Lista Nacional Directa de Medicamentos

Listado de medicamentos — Plan de medicamentos de cinco niveles

Tu beneficio para medicamentos recetados viene con una lista de medicamentos también conocida como formulario. Esta lista contiene medicamentos recetados de marca y genéricos aprobados por la Administración de Alimentos y Medicamentos (FDA) de los EE. UU. Estamos a tu disposición. Si eres un miembro actual de Anthem y tienes preguntas sobre los beneficios de farmacia, podemos ayudarte. Solo tienes que llamar al número de Servicios de Farmacia para Miembros que figura en tu tarjeta de identificación.

Los nombres de los productos que aparecen en este formulario se indican debajo.

TBD

Algunas cosas para recordar:

- Puedes ver y buscar en nuestra lista de medicamentos actual en el sitio anthem.com/ca y elija "Prescription Benefits" (Beneficios de medicamentos recetados). Ten en cuenta lo siguiente: El formulario está sujeto a cambios y todas las versiones anteriores del formulario no son válidas.

- Los miembros actuales de Anthem tienen a disposición herramientas y recursos adicionales para ver la lista de medicamentos más actualizada del plan, así como los medicamentos que se agregaron, los genéricos y más, al iniciar sesión en anthem.com/ca.

- Tu cobertura tiene limitaciones y exclusiones, lo cual significa que hay ciertas normas sobre lo que cubre tu plan y lo que no cubre. ¿Ya eres miembro? Puedes ver tu Certificado/Evidencia de cobertura o tu Descripción resumida del plan si inicias sesión en anthem.com y accedes a My Plan ->Benefits-> Plan Documents (Mi plan ->Beneficios-> Documentos del plan).

- Tú y tu médico pueden usar esta lista como guía para elegir los medicamentos adecuados para ti. Es posible que tu plan no cubra los medicamentos que no están en esta lista y pueden costarte más como gasto de bolsillo. Para ayudarte a comprender cómo funciona la lista con tu beneficio para medicamentos, hemos incluido algunas preguntas frecuentes (FAQ) en este documento sobre cómo se organiza la lista y qué hacer si un medicamento no se encuentra en ella.
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Definiciones

“$0” al lado de un medicamento significa que es un medicamento preventivo. Para algunos miembros, este producto puede estar cubierto al 100% con $0 de costo compartido con la receta de su proveedor si se cumplen los criterios especificados.

“Medicamento de MARCA” indica que el medicamento se comercializa con un nombre protegido con una marca registrada de un propietario. Los medicamentos de MARCA de este formulario están escritos en MAYÚSCULAS.

“Coseguro” es el porcentaje del costo de un beneficio de cuidado de la salud cubierto que un inscrito debe pagar luego de que haya pagado el deducible, en el caso de que el beneficio tenga un deducible, tal como el beneficio de medicamentos recetados.

“Copago” es el monto fijo en dólares que un inscrito debe pagar por un beneficio de cuidado de la salud cubierto luego de que haya pagado el deducible, en el caso de que el beneficio tenga un deducible, tal como el beneficio de medicamentos recetados.

“Deducible” es el monto que un inscrito debe pagar por los beneficios de cuidado de la salud antes de que el plan de salud del inscrito comience a pagar la totalidad o parte del costo del beneficio de cuidado de la salud según los términos de la póliza.

“Optimización de la dosis (DO)” significa optimización de la dosis. Por lo general, esto significa que es posible que el inscrito deba pasar de tomar un medicamento dos veces al día a tomar una dosis más alta una vez al día.

“Niveles de los medicamentos” hace referencia a un grupo de medicamentos recetados que pertenecen a un nivel de costo compartido especificado en la cobertura de medicamentos recetados del plan de salud. El nivel en el que se encuentra un medicamento recetado determina la parte del costo que el inscrito deberá pagar por el medicamento.

“Iscrito” es una persona inscrita en un plan de salud que tiene derecho a recibir servicios del plan. Todas las referencias a los inscritos en este formulario también incluyen a los suscriptores, tal como se define en la siguiente sección.

“Circunstancia apremiante” significa que el inscrito tiene una afección que puede ser potencialmente mortal o perjudicar su salud o su capacidad para recuperar la capacidad funcional máxima, o que está realizando un tratamiento con un medicamento que no figura en el formulario.

“Formulario” o “lista de medicamentos recetados” hacen referencia a la lista completa de medicamentos preferidos de uso y que son elegibles para recibir cobertura en función del plan de salud, e incluyen todos los medicamentos cubiertos según el beneficio de medicamentos recetados para pacientes ambulatorios del plan de salud. El formulario también se conoce como “lista de medicamentos recetados”.

“Medicamento genérico” hace referencia a un medicamento que es el mismo que su equivalente de MARCA en dosis, seguridad, concentración, forma en que se toma, calidad, eficacia y uso previsto. Los medicamentos genéricos están escritos en letra negrita, cursiva y minúscula.

“Distribución limitada (LD)” significa distribución limitada. Estos medicamentos están disponibles únicamente en determinadas farmacias o mediante mayoristas, según lo que decida el fabricante.

“Necesario por motivos médicos” implica beneficios de cuidado de la salud necesarios para diagnosticar, tratar o prevenir una afección o sus síntomas, y que cumplen con las normas aceptadas de la medicina. El seguro médico no suele cubrir beneficios de cuidado de la salud que no son necesarios por motivos médicos.

“Medicamento que no figura en el formulario” es un medicamento recetado que no figura en el formulario del plan de salud.

“Quimioterapia por vía oral (OC)” Independientemente de cualquier deducible, el monto total de copagos y coseguros que un asegurado debe pagar no excederá los doscientos dólares ($200) por una receta individual de un suministro para hasta 30 días de un medicamento recetado contra el cáncer administrado por vía oral y cubierto por la póliza.
“Gastos de bolsillo” es la suma de los copagos, coseguros y deducibles correspondientes, además de todos los costos por servicios de cuidado de la salud que no están cubiertos por el plan de salud.

“Proveedor prescriptor” es un proveedor de cuidado de la salud autorizado a emitir una receta para tratar una afección para un inscrito en el plan de salud.

“Receta” hace referencia a una solicitud verbal, escrita o electrónica emitida por un proveedor prescriptor para un inscrito específico que incluye el nombre del medicamento recetado, la cantidad de medicamento, la fecha de emisión, el nombre y la información de contacto del proveedor prescriptor, la firma del proveedor prescriptor (si la receta es escrita) y, si lo solicita el inscrito, la afección o el motivo por el cual se receta ese medicamento en particular.

“Medicamento recetado” es un medicamento recetado por el proveedor prescriptor del inscrito y que requiere una receta según las leyes correspondientes.

“Autorización previa (PA)” es un requisito del plan de salud que exige que el inscrito o el proveedor prescriptor del inscrito obtengan la autorización del plan de salud para un medicamento recetado antes de que el plan de salud cubra el medicamento. El plan de salud debe otorgar una autorización previa cuando sea necesario por motivos médicos que el inscrito obtenga el medicamento.

“Límite de cantidad (QL)” es una restricción de la cantidad de dosis de un medicamento recetado cubierto por el seguro médico durante un periodo de tiempo específico, o cualquier otra limitación en la cantidad de un medicamento que está cubierto.

“Medicamento especializado (SP)” es un medicamento especializado. Los medicamentos especializados se utilizan para tratar afecciones complejas y crónicas. Es posible que estos medicamentos se deban obtener en una farmacia de medicamentos especializados.

“Terapia escalonada (ST)” es un proceso que especifica la secuencia en la cual se recetan distintos medicamentos para una determinada afección y adecuados desde un punto de vista médico para un paciente en particular. Según el plan de salud, es posible que el inscrito deba probar con uno o más medicamentos para tratar su afección antes de que el plan de salud cubra un medicamento en particular para la afección conforme a la solicitud de terapia escalonada.

“Suscriptor” hace referencia a la persona que es responsable de pagarle a un plan o cuyo empleo u otro estado (excepto por la dependencia familiar) es la base de la elegibilidad de la membresía en el plan.
Preguntas frecuentes

¿Cómo sé qué medicamentos están cubiertos como beneficios?
Esta es una lista completa de todos los medicamentos de la lista de medicamentos. Pero es posible que haya algún medicamento en esta lista que no esté cubierto, depende de las normas de tu plan.

Tu beneficio de farmacia cubre medicamentos recetados, incluidos los medicamentos especializados, que pueden administrarte como parte de una consulta médica, una visita de cuidado en el hogar o en un centro de cuidados ambulatorios cuando se trata de servicios cubiertos. Los beneficios que recibes en el consultorio de tu proveedor suelen estar cubiertos como beneficio médico. Esto puede incluir medicamentos para terapia de infusión, quimioterapia, productos sanguíneos, ciertos inyectables y cualquier medicamento que deba administrar un proveedor.

¿Cómo puedo encontrar un medicamento en la lista?
(A) Puedes encontrar un medicamento recetado buscando la categoría terapéutica y la clase a la que pertenece el medicamento, o bien el nombre de MARCA o genérico en el índice ordenado alfabéticamente.
(B) Si el equivalente genérico de un medicamento de MARCA no está disponible en el mercado o no está cubierto, el medicamento no se indicará aparte con el nombre genérico.

Puedes buscar en la lista de medicamentos del PDF por:
- Nombre del medicamento, con Ctrl+F en el teclado; luego escribe el nombre del medicamento que estás buscando.
- Clase del medicamento, con las categorías ordenadas alfabéticamente.

¿Cómo se muestran los medicamentos en la lista?
- Los medicamentos están ordenados alfabéticamente por nombre de MARCA y nombre genérico en la categoría terapéutica y la clase a la que pertenece.
- El nombre genérico de un medicamento de MARCA se encuentra al lado del nombre de MARCA entre paréntesis y en negrita, cursiva y minúsculas.

Si el equivalente genérico de un medicamento de MARCA está disponible y también cubierto, el medicamento genérico se indicará aparte del medicamento de MARCA en negrita, cursiva y minúsculas.

Si un medicamento genérico se comercializa con un nombre de MARCA protegido con una marca registrada de un propietario, el nombre de MARCA se indicará después del nombre genérico entre paréntesis y en tipografía normal, con la primera letra de cada palabra en mayúsculas.

En la sección “Requisitos y límites de la cobertura”, se indica si deben concederte una aprobación previa antes de que puedas obtener el medicamento (llamada “autorización previa” o PA) o si antes debes probar otros medicamentos para tu tratamiento (llamada “terapia escalonada” o ST).

Nota: La presencia de un medicamento recetado en el formulario no garantiza que tu médico te recetará ese medicamento para una afección particular.
¿Cuáles son mis opciones para obtener mis medicamentos recetados?
Hay muchas formas y lugares para obtener tus medicamentos recetados, como las farmacias de tu localidad de tu plan, la conveniente entrega a domicilio o las farmacias de medicamentos especializados. La mayoría de los planes ofrecen nuestro programa de entrega a domicilio sin costo adicional.

Para obtener más información, los miembros actuales de Anthem pueden iniciar sesión en anthem.com/ca y seleccionar la opción “Prescription Benefits” (Beneficios de medicamentos recetados) o llamar al 833-203-1739. Para conocer más detalles sobre tu cobertura, puedes llamar al número de teléfono que figura en tu tarjeta de identificación del miembro.

¿Qué sucede si mi medicamento no está en la lista?
Sabemos que solo tú y tu médico saben lo que es mejor para ti. Si quieres tomar un medicamento que no está en la lista, es posible que debas pagar el costo total del medicamento. También puedes hablar con tu médico o farmacéutico para ver si hay algún otro medicamento que cubra tu plan que sea igual de efectivo, o si los medicamentos genéricos o de venta libre (OTC) son una opción. Solo tú y tu médico pueden decidir qué medicamentos son adecuados para ti.

Si estás tomando un medicamento que no está cubierto, tu médico puede pedirnos que revisemos la cobertura. Este proceso se denomina “aprobación previa” o “autorización previa”.

Tu médico puede comenzar el proceso completando una autorización previa digital, llamando al número de Servicios para Miembros que figura en el dorso de tu tarjeta de identificación del miembro o al descargar un formulario de autorización previa desde nuestro sitio web y enviarlo. Si tu solicitud se aprueba, el monto que deberás pagar por el medicamento dependerá del beneficio de tu plan.

Tu médico tiene distintas opciones para comenzar el proceso de autorización previa (PA):
2. Inicia sesión en anthem.com/ca y selecciona Pharmacy (Farmacia).
   o Ve a Pharmacy Resources (Recursos de farmacia) y Search Your Drug List (Consultar la lista de medicamentos) para buscar tu medicamento.
   o Selecciona la concentración y composición correcta del medicamento.
   o Desplázate hacia Definition of Restrictions (Definición de restricciones) y busca el formulario para fax en la tabla.
   o Tu médico debe completar y enviarnos el formulario por fax al 844-474-3347.
3. Llama a Servicios para Miembros al número que figura en el dorso de tu tarjeta de identificación del miembro.

¿Quién decide qué medicamentos están en la lista?
Los medicamentos de la lista son revisados por medio de nuestro proceso de Farmacia y servicios terapéuticos (P&T). En este proceso, un grupo de médicos, farmacéuticos y otros profesionales de cuidado de la salud independientes deciden qué medicamentos incluimos en nuestras listas. Este grupo se reúne a menudo para revisar nuestros medicamentos nuevos y existentes, y recomiendan medicamentos en función de qué tan seguros y efectivos son y del valor que ofrecen a nuestros miembros.

¿Qué es un medicamento especializado y cómo lo consigo?
Si estás tomando un medicamento que se considera medicamento especializado, es posible que debas ir a una farmacia de medicamentos especializados para que esté cubierto. Los medicamentos especializados vienen en muchas formas, como comprimidos, líquidos, inyecciones, infusions e inhaladores, y pueden necesitar manipulación y almacenamiento especiales. Por lo general, los beneficios de medicamentos especializados que son autoadministrados están cubiertos como beneficio de farmacia. Los beneficios de medicamentos especializados que recibes en el consultorio de tu proveedor suelen estar cubiertos como beneficio médico. Si acudes a farmacias que no están en la red, es posible que el medicamento no esté cubierto y que tengas que pagar el costo total. Para conocer más detalles sobre tu cobertura, puedes llamar al número de teléfono que figura en tu tarjeta de identificación del miembro.

¿La lista de medicamentos se modifica? Si es así, ¿cómo lo sabré?
Los medicamentos de nuestra lista se revisan y actualizan una vez al mes. En ocasiones, se agregan o se eliminan medicamentos, cambian los niveles o se actualizan los requisitos. Normalmente, los cambios comenzarán a regir el primer día del mes. Pero no te preocupes; te avisaremos si un medicamento que estás tomando se elimina de la lista y, en algunos casos, si un medicamento que tomas pasa a un nivel más alto.
Siempre puedes consultar la lista de medicamentos para asegurarte de que los que estás tomando siguen estando. Para ver la lista de medicamentos más actualizada, inicia sesión en anthem.com/ca.

¿Qué tipos de medicamentos puedo encontrar en el formulario?
Cubrimos medicamentos de cuidado preventivo aprobados por la Administración de Alimentos y Medicamentos (FDA) sin costo compartido y en conformidad con la Ley del Cuidado de Salud a Bajo Precio (ACA) y las regulaciones estatales de California. Es posible que tu médico deba hacer una receta para que estos servicios de prevención estén cubiertos por tu plan, aunque figuren como medicamentos de venta libre. La disponibilidad o cobertura de estos medicamentos sin costo compartido pueden estar sujetas al criterio establecido por el plan de salud.

Cubrimos equipos y suministros aprobados por la FDA para el tratamiento y el control de la diabetes insulinodependiente, la diabetes no insulinodependiente y la diabetes gestacional, según sea necesario por motivos médicos. Los medicamentos incluyen insulina, bombas de insulina e hipoglucemiantes orales. Los suministros y equipos cubiertos se limitan a medidores de glucosa, tiras reactivas, jeringas y lancetas. Los beneficios cubiertos también incluyen autocontrol ambulatorio y servicios educativos para tratar la diabetes si los servicios se prestan mediante un programa autorizado por el Proyecto de control de la diabetes del Estado dentro del Departamento de Salud.

¿Qué medicamentos puedo encontrar en cada nivel?
Categorizamos los medicamentos en diferentes niveles según qué tan efectivos son para mejorar la salud, si hay opciones de venta libre (OTC) y los costos, en comparación con otros medicamentos usados para el mismo tipo de tratamiento. Mientras más bajo es el nivel, menor es tu parte del costo. A continuación hay un resumen de los niveles de tu plan:

- Los medicamentos del nivel 1 tienen la distribución de costos más baja para ti. En general, son medicamentos con el mejor precio en comparación con otras opciones que tratan las mismas afecciones. Algunos planes dividen el nivel 1 en nivel 1a y nivel 1b:
  - Los medicamentos del nivel 1a tienen la distribución de costos más baja. Suelen ser medicamentos genéricos con el mejor precio en comparación con otras opciones que tratan las mismas afecciones.
  - Los medicamentos del nivel 1b tienen una distribución de costos baja. Suelen ser medicamentos genéricos con el mejor precio en comparación con otras opciones que tratan las mismas afecciones.

- Los medicamentos del nivel 2 tienen una distribución de costos más alta que los del nivel 1. Pueden ser medicamentos de marca preferida, según su eficacia para mejorar la salud y el costo en comparación con otros medicamentos que se usan para el mismo tipo de tratamiento. Algunos son medicamentos genéricos que pueden costar más porque son más nuevos en el mercado.

- Los medicamentos de nivel 3 tienen un costo compartido más alto. Generalmente, incluyen medicamentos genéricos y de marca que pueden costar más que los medicamentos de los niveles inferiores que se utilizan para tratar la misma afección. El nivel 3 también puede incluir medicamentos que la FDA aprobó recientemente.

- Los medicamentos del nivel 4 tienen un costo compartido más alto y, generalmente, incluyen medicamentos genéricos y medicamentos de marca especializados. Estos pueden costar más que los medicamentos de los niveles inferiores que se utilizan para tratar la misma afección. Además, el nivel 4 puede incluir medicamentos recientemente aprobados por la FDA o medicamentos especializados que se utilizan para tratar afecciones crónicas complejas, y pueden requerir una administración especial.

- Los medicamentos del nivel 5 tienen la distribución de costos más alta de todas. Los medicamentos de este nivel son medicamentos especializados, genéricos y de marca no preferida. El nivel 5 también puede incluir medicamentos recién aprobados por la FDA o medicamentos especializados que se utilizan para tratar afecciones graves a largo plazo y pueden requerir una administración especial.
¿Cómo sabré el precio de mi medicamento?
Los miembros actuales de Anthem pueden acceder en línea y, con la herramienta de precios de medicamentos (Price a Medication Tool), conocer los precios específicos de varias farmacias minoristas de su localidad con el código postal.

Nota: Para los medicamentos de quimioterapia por vía oral: independientemente de cualquier deducible, el monto total de copagos y coseguros que un asegurado debe pagar no excederá los doscientos dólares ($200) por una receta individual de un suministro para hasta 30 días de un medicamento recetado contra el cáncer administrado por vía oral y cubierto por la póliza.

¿Cómo promueve Anthem la seguridad?
Cuando vas a una farmacia, el farmacéutico recibirá un mensaje electrónico de Anthem si un medicamento necesita autorización previa, terapia escalonada o si la cantidad que puede proporcionarse es limitada. Te mostramos de cerca todos los programas que ofrecemos para asegurarnos de que recibas el cuidado que necesitas y, a la vez, de protegerte.1

Los programas de edición clínica son los siguientes:
- Autorización previa, la cual requiere que obtengas la aprobación antes de tomar un medicamento. Esto permite asegurarnos de que un medicamento se use adecuadamente y enfocarnos en los medicamentos que pueden tener lo siguiente:
  - Riesgo de provocar efectos secundarios
  - Riesgo de provocar efectos perjudiciales al tomarlos con otros medicamentos
  - Probabilidad de uso incorrecto o abuso
  - Normas para usarlo con determinadas condiciones
- Terapia escalonada, la cual requiere que primero se prueben otros medicamentos. Apunta a determinar si un medicamento es adecuado para una afección en particular.
- Optimización de la dosis, la cual implica probar una dosis dos veces al día a una vez al día, según sea necesario por motivos médicos. Tomar menos dosis puede disminuir los costos; tomar una única dosis alta de un medicamento una vez al día puede costar menos que tomar una dosis baja dos veces al día.
- Los límites de cantidad imponen un límite en la cantidad indicada en una receta y con qué frecuencia puede reponerse el medicamento.
  - Si una solicitud de reposición se envía demasiado pronto, o el médico receta una cantidad superior a la permitida, el medicamento no tendrá cobertura en ese momento.
  - Si hay motivos médicos para recetar el medicamento con las dosis indicadas originalmente, el médico puede pedir una revisión por parte de nuestro Centro de Autorización Previa.

Además, si estás tomando un medicamento que se considera medicamento especializado, es posible que debas ir a una farmacia de medicamentos especializados para que el medicamento tenga cobertura.

¿Cómo puede mi médico comenzar el proceso de autorización previa?
Si tu medicamento está en nuestro formulario, pero requiere una autorización previa (PA) o terapia escalonada, tu médico tiene las siguientes opciones para comenzar el proceso de PA:
2. Inicia sesión en anthem.com/ca y selecciona Pharmacy (Farmacia).
   - Ve a Pharmacy Resources (Recursos de farmacia) y Search Your Drug List (Consultar la lista de medicamentos) para buscar tu medicamento.
   - Selecciona la concentración y composición correcta del medicamento.
   - Desplázate hacia Definition of Restrictions (Definición de restricciones) y busca el formulario para fax en la tabla.
   - Tu médico debe completar el formulario y enviarlo por fax a Anthem al 844-474-3347.
3. Llama a Servicios para Miembros al número que figura en el dorso de tu tarjeta de identificación del miembro.

¿Qué es la terapia escalonada? ¿Cómo funciona?
La terapia escalonada implica probar otros fármacos antes de que determinados medicamentos tengan cobertura. La farmacia te avisará si la terapia escalonada es necesaria y, de ser así, primero debes probar el medicamento o tratamiento que se indica en el programa. Si el medicamento o tratamiento no sirve para tratar bien la afección, el médico puede comunicarse con nuestro Centro de Autorización Previa para pedir que aprobemos el medicamento original.1
Nota sobre los opioides: Es posible que el costo compartido del miembro para determinados opioides que disuadan el consumo inadecuado sea menor en algunos estados debido a las leyes de dichos estados. Los opioides son un tipo de analgésico. En respuesta a la epidemia mundial de opioides, la Administración de Alimentos y Medicamentos (FDA) de EE. UU. ha alentado a los fabricantes de medicamentos a elaborar opioides con propiedades que ayuden a disuadir su uso indebido y abuso.

Los medicamentos pueden estar excluidos de la lista según las normas de los beneficios de tu plan.

1 Si el Centro de Autorización Previa conduce que la reclamación de la receta debe ser denegada, los miembros y sus médicos recibirán cartas donde se explica el proceso de apelaciones y/o de quejas.
NOMENCLATURA
A continuación hay algunos términos y notas que encontrarás en la lista de medicamentos.

Los medicamentos de MARCA están en MAYÚSCULAS y en tipografía normal.

Los medicamentos genéricos están en minúsculas, cursiva y negrita.

$0: medicamentos preventivos. Para algunos miembros, este producto puede estar cubierto al 100 % con $0 de costo compartido con la receta de su proveedor si se cumplen los criterios especificados.

DO: optimización de la dosis. Por lo general, esto significa que es posible que el inscrito deba pasar de tomar un medicamento dos veces al día a tomar una dosis más alta una vez al día.

LD: distribución limitada. Estos medicamentos están disponibles únicamente en determinadas farmacias o mediante mayoristas, según lo que decida el fabricante.

OC: quimioterapia por vía oral. Después del deducible, estos medicamentos no excederán los $200 por receta individual de un suministro para hasta 30 días.

PA: autorización previa. Es posible que debas obtener la aprobación de beneficios antes de poder reponer determinados medicamentos recetados.

QL: límites de cantidad. Se aplican límites a la cantidad de medicamentos cubiertos en un determinado periodo de tiempo.

SP: medicamentos especializados. Los medicamentos especializados se utilizan para tratar afecciones complejas y crónicas. Es posible que estos medicamentos se deban obtener en una farmacia de medicamentos especializados.

ST: terapia escalonada. Es posible que primero debas tomar otro medicamento recomendado antes de que un medicamento recetado esté cubierto.

**Nivel 1 =** los medicamentos de nivel 1 tienen el costo compartido más bajo. Por lo general, son medicamentos genéricos que ofrecen el mejor valor comparados con otros medicamentos para tratar las mismas afecciones.

**Nivel 1a =** los medicamentos de nivel 1a tienen el costo compartido más bajo. Suelen ser medicamentos genéricos que ofrecen el mejor valor comparados con otros medicamentos para tratar las mismas afecciones.

**Nivel 1b =** los medicamentos de nivel 1b tienen un costo compartido bajo. Por lo general, son medicamentos genéricos que ofrecen el mejor valor comparados con otros medicamentos para tratar las mismas afecciones.

**Nivel 2 =** los medicamentos del nivel 2 tienen una distribución de costos más alta que los del nivel 1. Pueden ser medicamentos de marca preferida, según su eficacia para mejorar la salud y el costo en comparación con otros medicamentos que se usan para el mismo tipo de tratamiento.

**Nivel 3 =** los medicamentos de nivel 3 tienen un costo compartido más alto. Generalmente, incluyen medicamentos genéricos y de marca que pueden costar más que los medicamentos de los niveles inferiores que se utilizan para tratar la misma afección. El nivel 3 también puede incluir medicamentos que la FDA aprobó recientemente.

**Nivel 4 =** Los medicamentos del nivel 4 tienen un costo compartido más alto y, generalmente, incluyen medicamentos genéricos y medicamentos de marca especializados. Estos pueden costar más que los medicamentos de los niveles inferiores que se utilizan para tratar la misma afección.

**Nivel 5 =** los medicamentos del nivel 5 tienen la distribución de costos más alta de todas. Los medicamentos de este nivel son medicamentos especializados, genéricos y de marca no preferida. El nivel 5 también puede incluir medicamentos recién aprobados por la FDA o medicamentos especializados que se utilizan para tratar afecciones graves a largo plazo y pueden requerir una administración especial.
<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>5-ALPHA REDUCTASE INHIBITORS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>dutasteride oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>finasteride oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PROSCAR ORAL TABLET (finasteride)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>5-HT3 RECEPTOR ANTAGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALOXI INTRAVENOUS SOLUTION (palonosetron hcl)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>ANZEMET ORAL TABLET (dolasetron mesylate)</td>
<td>3</td>
<td>QL (5 tablets per 30 days)</td>
</tr>
<tr>
<td>granisetron hcl intravenous solution</td>
<td>1 or 1b*</td>
<td>QL (10 tablets per 30 days)</td>
</tr>
<tr>
<td>granisetron hcl oral solution</td>
<td>1 or 1b*</td>
<td>QL (8 mL per 1 day)</td>
</tr>
<tr>
<td>ondansetron hcl injection solution</td>
<td>1 or 1b*</td>
<td>QL (8 tablets per 30 days)</td>
</tr>
<tr>
<td>ondansetron hcl oral solution</td>
<td>1 or 1b*</td>
<td>QL (48 tablets per 30 days)</td>
</tr>
<tr>
<td>ondansetron oral tablet 24 mg</td>
<td>1 or 1b*</td>
<td>QL (48 tablets per 30 days)</td>
</tr>
<tr>
<td>ondansetron hcl oral tablet 4 mg</td>
<td>1 or 1b*</td>
<td>QL (48 tablets per 30 days)</td>
</tr>
<tr>
<td>ondansetron hcl oral tablet 8 mg</td>
<td>1 or 1b*</td>
<td>QL (24 tablets per 30 days)</td>
</tr>
<tr>
<td>ondansetron oral tablet dispersible 4 mg</td>
<td>1 or 1b*</td>
<td>QL (48 tablets per 30 days)</td>
</tr>
<tr>
<td>ondansetron oral tablet dispersible 8 mg</td>
<td>1 or 1b*</td>
<td>QL (24 tablets per 30 days)</td>
</tr>
<tr>
<td>PALONOSETRON HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>palonosetron hcl intravenous solution prefilled syringe</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>SANCUSO TRANSDERMAL PATCH (granisetron)</td>
<td>3</td>
<td>QL (4 patches per 28 days)</td>
</tr>
<tr>
<td>SUSTOL SUBCUTANEOUS PREFILLED SYRINGE (granisetron)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ZOFRAN ORAL TABLET (ondansetron hcl)</td>
<td>3</td>
<td>QL (48 tablets per 30 days)</td>
</tr>
<tr>
<td>ZUPLENZ ORAL FILM 4 MG (ondansetron)</td>
<td>3</td>
<td>QL (48 films per 30 days)</td>
</tr>
<tr>
<td>ZUPLENZ ORAL FILM 8 MG (ondansetron)</td>
<td>3</td>
<td>QL (24 films per 30 days)</td>
</tr>
<tr>
<td><em>ABORTIFACIENT - PROGESTERONE RECEPTOR ANTAGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MIFEPREX ORAL TABLET (mifepristone)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>mifepristone oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>ABORTIFACIENTS/CERVICAL RIPENING - PROSTAGLANDINS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>carboprost tromethamine intramuscular solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CERVIDIL VAGINAL INSERT (dinoprostone)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>HEMABATE INTRAMUSCULAR SOLUTION (carboprost tromethamine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PREPIDIL VAGINAL GEL (dinoprostone)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROSTIN E2 VAGINAL SUPPOSITORY (dinoprostone)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>ACE INHIBITOR &amp; CALCIUM CHANNEL BLOCKER COMBINATIONS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 5-40 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>amlodipine besy-benazepril hcl oral capsule 2.5-10 mg, 5-10 mg, 5-20 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>PRESTALIA ORAL TABLET 14-10 MG (perindopril arg-amlodipine)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRESTALIA ORAL TABLET 3.5-2.5 MG, 7-5 MG (perindopril arg-amlodipine)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>TARKA ORAL TABLET EXTENDED RELEASE (trandolapril-verapamil hcl)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>trandolapril-verapamil hcl er oral tablet extended release 1-240 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>trandolapril-verapamil hcl er oral tablet extended release 2-180 mg, 2-240 mg, 4-240 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>ACE INHIBITORS &amp; THIAZIDE/THIAZIDE-LIKE</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACCURETIC ORAL TABLET (quinapril-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 5-6.25 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>benazepril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>captopril-hydrochlorothiazide oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>enalapril-hydrochlorothiazide oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>fosinopril sodium-hctz oral tablet 10-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>fosinopril sodium-hctz oral tablet 20-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>lisinopril-hydrochlorothiazide oral tablet 20-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>lisinopril-hydrochlorothiazide oral tablet 20-25 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>LOTENSIN HCT ORAL TABLET 10-12.5 MG (benazepril-hydrochlorothiazide)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>LOTENSIN HCT ORAL TABLET 20-12.5 MG, 20-25 MG (benazepril-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>quinapril-hydrochlorothiazide oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>VASERETIC ORAL TABLET (enalapril-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ZESTORETIC ORAL TABLET 10-12.5 MG (lisinopril-hydrochlorothiazide)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>ZESTORETIC ORAL TABLET 20-12.5 MG (lisinopril-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ZESTORETIC ORAL TABLET 20-25 MG (lisinopril-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em>ACE INHIBITORS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>benazepril hcl oral tablet</td>
<td>1 or 1a*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>captopril oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>enalapril maleate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>enalaprilat intravenous injectable</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>EPANED ORAL SOLUTION (enalapril maleate)</td>
<td>3</td>
<td>QL (40 mg per 1 day)</td>
</tr>
<tr>
<td>fosinopril sodium oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</td>
<td>1 or 1a*</td>
<td>DO</td>
</tr>
<tr>
<td>lisinopril oral tablet 30 mg, 40 mg</td>
<td>1 or 1a*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>LOTENSIN ORAL TABLET (benazepril hcl)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>moexipril hcl oral tablet 15 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>moexipril hcl oral tablet 7.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>perindopril erbumine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>QBRELIS ORAL SOLUTION (lisinopril)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>quinapril hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ramipril oral capsule</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>trandolapril oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
</tbody>
</table>

**ACNE ANTIBIOTICS*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
<th>Nombre del medicamento</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLEOCIN-T EXTERNAL GEL (clindamycin phosphate)</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>CLEOCIN-T EXTERNAL LOTION (clindamycin phosphate)</td>
<td>3</td>
<td>ST; QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>clindamycin phosphate (Clindacin Etz External Swab)</td>
<td>1 or 1b*</td>
<td>QL (2 pads per 1 day)</td>
</tr>
<tr>
<td>clindamycin phosphate (Clindacin-P External Swab)</td>
<td>1 or 1b*</td>
<td>QL (2 pads per 1 day)</td>
</tr>
<tr>
<td>clindamycin phosphate external foam</td>
<td>1 or 1b*</td>
<td>QL (2 pads per 1 day)</td>
</tr>
<tr>
<td>clindamycin phosphate external gel</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>clindamycin phosphate external lotion</td>
<td>1 or 1b*</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>clindamycin phosphate external solution</td>
<td>1 or 1b*</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>clindamycin phosphate external swab</td>
<td>1 or 1b*</td>
<td>QL (2 pads per 1 day)</td>
</tr>
<tr>
<td>dapsone external gel</td>
<td>1 or 1b*</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>ery external pad</td>
<td>1 or 1b*</td>
<td>QL (2 pads per 1 day)</td>
</tr>
<tr>
<td>ERYGEL EXTERNAL GEL (erythromycin)</td>
<td>3</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>erythromycin external gel</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>erythromycin external solution</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>EVEOCLIN EXTERNAL FOAM (clindamycin phosphate)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>KLARON EXTERNAL LOTION (sulfacetamide sodium (acne))</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>sulfacetamide sodium (acne) external lotion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

**ACNE COMBINATIONS*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
<th>Nombre del medicamento</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>adapalene-benzoyl peroxide external gel</td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>BENZAMYCIN EXTERNAL GEL (benzoyl peroxide-erythromycin)</td>
<td>3</td>
<td>ST; QL (46.6 grams per 30 days)</td>
</tr>
<tr>
<td>benzoyl perox-hydrocortisone external lotion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BENZOYL PEROXIDE FORTE- HC EXTERNAL LOTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>benzoyl peroxide-erythromycin external gel</td>
<td>1 or 1b*</td>
<td>QL (2 packets per 1 day)</td>
</tr>
<tr>
<td>clindamycin phos-benzoyl perox external gel 1.2-5 %</td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>clindamycin-tretinoin external gel</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>CLINOIN EXTERNAL CREAM <em>(clindamycin-tretinoin-cholesty)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>clindamycin-benzoyl per (refr) <em>(Neuac External Gel)</em></td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>NIACINAMIDE-TRETINOIN EXTERNAL GEL 4-0.025 %</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ONEXTON EXTERNAL GEL <em>(clindamycin phos-benzoyl perox)</em></td>
<td>2</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>resorcinol-sulfur external lotion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sulfacetamide sodium-sulfur external pad</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sulfamez wash external emulsion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ZACARE EXTERNAL KIT <em>(benzoyl peroxide-hyaluronate)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>ACNE PRODUCTS</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABSORICA LD ORAL CAPSULE <em>(isotretinoin micronized)</em></td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>ABSORICA ORAL CAPSULE <em>(isotretinoin)</em></td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>adapalene external cream</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>adapalene external gel</td>
<td>1 or 1b*</td>
<td>PA; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>adapalene external pad</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>AKLIEF EXTERNAL CREAM <em>(trifarotene)</em></td>
<td>3</td>
<td>ST; QL (1 pump per 30 days)</td>
</tr>
<tr>
<td>isotretinoin <em>(Amnesteem Oral Capsule)</em></td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td>ARAZLO EXTERNAL LOTION <em>(tazarotene)</em></td>
<td>3</td>
<td>ST; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>tretinoin <em>(Avita External Cream)</em></td>
<td>1 or 1b*</td>
<td>PA; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>tretinoin <em>(Avita External Gel)</em></td>
<td>1 or 1b*</td>
<td>PA; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>BENZAC AC WASH EXTERNAL LIQUID <em>(benzoyl peroxide)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>benzoyl peroxide <em>(Benzepro Short Contact External Foam)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>benzoyl peroxide external foam</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BENZOYL PEROXIDE EXTERNAL GEL 6.5 %</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>benzoyl peroxide external gel 8 %</td>
<td>1 or 1b*</td>
<td>PA; QL (42.5 grams per 30 days)</td>
</tr>
<tr>
<td>bp wash external liquid 2.5 %, 7 %</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>isotretinoin <em>(Claravis Oral Capsule)</em></td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td>isotretinoin oral capsule</td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td>isotretinoin <em>(Myorisan Oral Capsule)</em></td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td>tretinoin external cream</td>
<td>1 or 1b*</td>
<td>PA; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>tretinoin external gel</td>
<td>1 or 1b*</td>
<td>PA; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>tretinoin microsphere external gel</td>
<td>1 or 1b*</td>
<td>PA; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>ZACLIR CLEANSING EXTERNAL LOTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>isotretinoin <em>(Zenatane Oral Capsule)</em></td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td><em>ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>clonidine hcl er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>guanfacine hcl er oral tablet extended release 24 hour 3 mg, 4 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td>KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR (clonidine hcl)</td>
<td>3</td>
<td>PA; QL (4 tablets per 1 day)</td>
</tr>
</tbody>
</table>

*ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR***

| atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg | 1 or 1b* | PA; DO |
| atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg | 1 or 1b* | PA; QL (1 capsule per 1 day) |

*ADRENERGIC COMBINATIONS***

| ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED (fluticasone-salmeterol) | 1 or 1b* | QL (1 package per 30 days) |
| ADVAIR HFA INHALATION AEROSOL (fluticasone-salmeterol) | 2 | QL (1 inhaler per 30 days) |
| ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED (umeclidinium-vilanterol) | 2 | QL (1 inhaler per 30 days) |
| BEVESPI AEROSPHERE INHALATION AEROSOL (glycopyrrolate-formoterol) | 2 | QL (1 inhaler per 30 days) |
| BERELLI AERISPHERE INHALATION AEROSOL POWDER BREATH ACTIVATED (fluticasone furoate-vilanterol) | 3 | ST; QL (1 inhaler per 30 days) |
| budesonide-formoterol fumarate inhalation aerosol | 1 or 1b* | QL (1 inhaler per 30 days) |
| COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION (ipratropium-albuterol) | 2 | QL (2 inhalers per 30 days) |
| DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED (aclidinium br-formoterol fum) | 3 | ST; QL (1 inhaler per 30 days) |
| fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act | 1 or 1b* | QL (1 inhaler per 30 days) |
| ipratropium-albuterol inhalation solution | 1 or 1b* | |
| STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION (tiotropium bromide-olodaterol) | 2 | QL (1 inhaler per 30 days) |
| SYMVICESPURT INHALATION AEROSOL (budesonide-formoterol fumarate) | 2 | QL (1 inhaler per 30 days) |
| TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH (fluticasone-umeclidin-vilant) | 2 | QL (1 box per 30 days) |
| TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 200-62.5-25 MCG/INH (fluticasone-umeclidin-vilant) | 2 | QL (1 inhaler per 30 days) |
| UTIBRON NEOHALER INHALATION CAPSULE (indacaterol-glycopyrrolate) | 3 | ST; QL (2 capsules per 1 day) |

*ADRENOLYTICS-CENTRAL & THIAZIDE/THIAZIDE-LIKE COMB***

| methyldopa-hydrochlorothiazide oral tablet | 1 or 1b* |

*AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS*** - DRUGS FOR THE SKIN

| VEREGEN EXTERNAL OINTMENT (sinecatechins) | 3 |

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<tr>
<td><em>AGENTS FOR FACIAL WRINKLES - RETINOIDS</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>refissa external cream</td>
<td>1 or 1b</td>
<td>PA; QL (40 grams per 30 days)</td>
</tr>
<tr>
<td>RENOVA EXTERNAL CREAM (tretinoin (facial wrinkles))</td>
<td>3</td>
<td>PA; QL (40 grams per 30 days)</td>
</tr>
<tr>
<td>RENOVA PUMP EXTERNAL CREAM (tretinoin (facial wrinkles))</td>
<td>3</td>
<td>PA; QL (44 grams per 30 days)</td>
</tr>
<tr>
<td>tretinoin (emollient) external cream</td>
<td>1 or 1b</td>
<td>PA; QL (40 grams per 30 days)</td>
</tr>
<tr>
<td><em>AGENTS FOR GAUCHER DISEASE</em>** - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CERDELGA ORAL CAPSULE (elaglucet tartrate)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED (imiglucerase)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED (talglicerase alfa)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>miglustat oral capsule</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>VPRIV INTRAVENOUS SOLUTION RECONSTITUTED (velaglucerase alfa)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><em>AGENTS FOR PHEOCHROMOCYTOMA</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DEMSER ORAL CAPSULE (metyrosine)</td>
<td>3</td>
<td>PA; QL (16 capsules per 1 day)</td>
</tr>
<tr>
<td>DIBENZYLINE ORAL CAPSULE (phenoxybenzamine hcl)</td>
<td>3</td>
<td>PA; QL (12 capsules per 1 day)</td>
</tr>
<tr>
<td>metyrosine oral capsule</td>
<td>1 or 1b</td>
<td>PA; QL (16 capsules per 1 day)</td>
</tr>
<tr>
<td>phenoxybenzamine hcl oral capsule</td>
<td>1 or 1b</td>
<td>PA; QL (12 capsules per 1 day)</td>
</tr>
<tr>
<td>phentolamine mesylate injection solution reconstituted</td>
<td>1 or 1b</td>
<td></td>
</tr>
<tr>
<td><em>ALCOHOL DETERRENTS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>acamprosate calcium oral tablet delayed release</td>
<td>1 or 1b</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>ANTABUSE ORAL TABLET (disulfiram)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>disulfiram oral tablet</td>
<td>1 or 1b</td>
<td></td>
</tr>
<tr>
<td><em>ALKYLATING AGENTS</em>** - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BELRAPZO INTRAVENOUS SOLUTION (bendamustine hcl)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>BENDEKA INTRAVENOUS SOLUTION (bendamustine hcl)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>busulfan intravenous solution</td>
<td>1 or 1b</td>
<td>SP</td>
</tr>
<tr>
<td>BUSULFEX INTRAVENOUS SOLUTION (busulfan)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>carboplatin intravenous solution</td>
<td>1 or 1b</td>
<td>SP</td>
</tr>
<tr>
<td>cisplatin intravenous solution</td>
<td>1 or 1b</td>
<td>SP</td>
</tr>
<tr>
<td>CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>MYLERAN ORAL TABLET (busulfan)</td>
<td>2; OC</td>
<td></td>
</tr>
<tr>
<td>oxaliplatin intravenous solution 100 mg/20ml, 50 mg/10ml</td>
<td>1 or 1b</td>
<td>SP</td>
</tr>
<tr>
<td>OXALIPLATIN INTRAVENOUS SOLUTION 200 MG/40ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>oxaliplatin intravenous solution reconstituted</td>
<td>1 or 1b</td>
<td>SP</td>
</tr>
<tr>
<td>paraplatin intravenous solution 1000 mg/100ml</td>
<td>1 or 1b</td>
<td></td>
</tr>
</tbody>
</table>

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<tr>
<td>carboplatin (Paraplatin Intravenous Solution 150 Mg/15Ml, 450 Mg/45Ml, 50 Mg/5Ml, 600 Mg/60Ml)</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>TEPADINA INJECTION SOLUTION RECONSTITUTED (<em>thiotepa</em>)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>thiotepa injection solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>TREANDA INTRAVENOUS SOLUTION RECONSTITUTED (*bendamustine hcl)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED (*lurbinectedin)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
</tbody>
</table>

**ALLERGENIC EXTRACTS** - BIOLOGICAL AGENTS

- ACACIA SUBCUTANEOUS SOLUTION
- ACREMONIUM SUBCUTANEOUS SOLUTION
- ALDER SUBCUTANEOUS SOLUTION
- ALTERNARIA SUBCUTANEOUS SOLUTION
- AMERICAN BEECH SUBCUTANEOUS SOLUTION
- AMERICAN COCKROACH SUBCUTANEOUS SOLUTION
- AMERICAN ELM SUBCUTANEOUS SOLUTION
- AMERICAN SYCAMORE SUBCUTANEOUS SOLUTION
- ARIZONA CYPRESS SUBCUTANEOUS SOLUTION
- ASPERGILLUS FUMIGATUS INJECTION SOLUTION
- AUREOBASIDIUM PULLULANS INJECTION SOLUTION
- AUREOBASIDIUM SUBCUTANEOUS SOLUTION
- AUSTRALIAN PINE SUBCUTANEOUS SOLUTION
- BAHIA SUBCUTANEOUS SOLUTION
- BALD CYPRESS SUBCUTANEOUS SOLUTION
- BAYBERRY (WAX MYRTLE) SUBCUTANEOUS SOLUTION
- BERMUDA GRASS SUBCUTANEOUS SOLUTION
- BLACK WALNUT POLLEN SUBCUTANEOUS SOLUTION
- BLACK WILLOW SUBCUTANEOUS SOLUTION
- BOTRYTIS INJECTION SOLUTION
- BOTRYTIS SUBCUTANEOUS SOLUTION
- BOX ELDER SUBCUTANEOUS SOLUTION
- BROME SUBCUTANEOUS SOLUTION
- CALIFORNIA PEPPER TREE SUBCUTANEOUS SOLUTION
- CANDIDA ALBICANS EXTRACT INJECTION SOLUTION
- CANDIDA ALBICANS EXTRACT SUBCUTANEOUS SOLUTION
- CAT HAIR EXTRACT SUBCUTANEOUS SOLUTION
- CATTLE EPITHELIUM SUBCUTANEOUS SOLUTION
- CEDAR ELM SUBCUTANEOUS SOLUTION

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<tbody>
<tr>
<td>CLADOSPORIUM CLADOSPORIOIDES INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLADOSPORIUM CLADOSPORIOIDES INTRADERMAL SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLADOSPORIUM CLADOSPORIOIDES SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLADOSPORIUM SPHAEROSPERMUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>COCKLEBUR SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CORN POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CURVULARIA SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DANDELION SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DOG EPITHELIUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DOG FENNEL SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DRECHSLERA SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EASTERN COTTONWOOD SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ENGLISH PLANTAIN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EPICOCCUM NIGRUM INJECTION SOLUTION</td>
<td>3</td>
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</tr>
<tr>
<td>EPICOCCUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>FIRE ANT SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>FUSARIUM SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>GERMAN COCKROACH SUBCUTANEOUS SOLUTION</td>
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<td></td>
</tr>
<tr>
<td>GOLDENROD SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>GRASTEK SUBLINGUAL TABLET SUBLINGUAL (timothy grass pollen allergen)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>HACKBERRY SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>HONEY BEE VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED (honey bee venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>HONEY BEE VENOM SUBCUTANEOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>HORSE EPITHELIUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>JOHNSON GRASS SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>JUNE GRASS POLLEN STANDARDIZED SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>KAPOK SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>KOCHIA SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>LAMBS QUARTERS SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LENSACLE SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>MEADOW FESCUE GRASS POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MELALEUCA SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MESQUITE SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MITE (D. FARINAE) SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MITE (D. PTERONYSSINUS) SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MIXED RAGWEED SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
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<tr>
<td>MIXED VESPID VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MIXED VESPID VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MOUNTAIN CEDAR SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MOUSE EPITHELIUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MUCOR INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MUCOR INTRADERMAL SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MUCOR SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MUGWORT SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>OLIVE TREE SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ORCHARD GRASS POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PALFORZIA (12 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (120 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (160 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (20 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (200 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (240 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (3 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (300 MG MAINTENANCE) ORAL PACKET (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 packet per 1 day)</td>
</tr>
<tr>
<td>PALFORZIA (300 MG TITRATION) ORAL PACKET (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (40 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (6 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA (80 MG DAILY DOSE) ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PALFORZIA INITIAL ESCALATION ORAL (peanut powder-dnfp)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 1 fill)</td>
</tr>
<tr>
<td>PECAN POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PENICILLIUM NOTATUM INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PENICILLIUM NOTATUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PERENNIAL RYE GRASS POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PHOMA EXIGUA SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PRIVET SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>QUEEN PALM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RABBIT EPITHELIUM SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RAGWITEK SUBLINGUAL TABLET SUBLINGUAL (short ragweed pollen ext)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>RED BIRCH SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RED CEDAR SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RED MAPLE SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
</tbody>
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</tr>
</thead>
<tbody>
<tr>
<td>RED MULBERRY SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RED TOP GRASS POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
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</tr>
<tr>
<td>RHIZOPUS SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ROUGH MARSH ELDER SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ROUGH PIGWEED SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RUSSIAN THISTLE SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SACCHAROMYCES CEREVISIAE INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SACCHAROMYCES CEREVISIAE SUBCUTANEOUS SOLUTION</td>
<td>3</td>
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</tr>
<tr>
<td>SAGEBRUSH SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SHAGBARK HICKORY SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SHEEP SORREL SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SHORT RAGWEED POLLEN EXT SUBCUTANEOUS SOLUTION</td>
<td>3</td>
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<tr>
<td>SPINY PIGWEED SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>STEMPHYLUM SUBCUTANEOUS SOLUTION</td>
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</tr>
<tr>
<td>SWEET GUM SUBCUTANEOUS SOLUTION</td>
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</tr>
<tr>
<td>SWEET VERNAL GRASS POLLEN SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TALL RAGWEED SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TIMOTHY GRASS POLLEN ALLERGEN SUBCUTANEOUS SOLUTION 10000 BAU/ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TIMOTHY GRASS POLLEN ALLERGEN SUBCUTANEOUS SOLUTION 100000 BAU/ML</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>TRICHOPYTON MENTAGROPHYTES SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TRICHOPYTON SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VENOMIL HONEY BEE VENOM INJECTION KIT (honey bee venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VENOMIL MIXED VESPID VENOM INJECTION SOLUTION RECONSTITUTED (mixed vespid venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VENOMIL WASP VENOM INJECTION KIT (wasp venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VENOMIL WHITE FACED HORNET INJECTION KIT (white faced hornet venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VENOMIL YELLOW HORNET VENOM INJECTION KIT (yellow hornet venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VENOMIL YELLOW JACKET VENOM INJECTION KIT (yellow jacket venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VIRGINIA LIVE OAK SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WASP VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WASP VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WESTERN JUNIPER SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WHITE ASH SUBCUTANEOUS SOLUTION</td>
<td>3</td>
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<tbody>
<tr>
<td>WHITE BIRCH SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>WHITE FACED HORNET VENOM SUBCUTANEOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WHITE MULBERRY SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WHITE OAK SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WHITE PINE SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WHITE-FACED HORNET VENOM INJECTION SOLUTION RECONSTITUTED (white faced hornet venom)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>YELLOW DOCK SUBCUTANEOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>YELLOW HORNET VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>YELLOW HORNET VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>YELLOW JACKET VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED</td>
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<td></td>
</tr>
<tr>
<td>YELLOW JACKET VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED</td>
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**ALPHA 1-ADRENOCEPTOR ANTAGONISTS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>alfuzosin hcl er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR (doxazosin mesylate)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>silodosin oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>tamsulosin hcl oral capsule</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
</tbody>
</table>

**ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIMBRINZA OPHTHALMIC SUSPENSION (brinzolamide-brimonidine)</td>
<td>2</td>
<td>QL (8 mL per 30 days)</td>
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</table>

**ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>mirtazapine oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>mirtazapine oral tablet dispersible</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>REMERON ORAL TABLET (mirtazapine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>REMERON SOLTAB ORAL TABLET DISPERSIBLE (mirtazapine)</td>
<td>3</td>
<td></td>
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</tbody>
</table>

**ALPHA-BETA BLOCKERS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>carvedilol oral tablet 12.5 mg, 3.125 mg, 6.25 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>carvedilol oral tablet 25 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>carvedilol phosphate er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LABETALOL HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>labetalol hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
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**ALPHA-GLUCOSIDASE INHIBITORS***

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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>acarbose oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>GLYSET ORAL TABLET <em>(miglitol)</em></td>
<td>3</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>miglitol oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>PRECOSE ORAL TABLET <em>(acarbose)</em></td>
<td>3</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>ALPHA-PROTEINASE INHIBITOR (HUMAN)</strong></td>
<td></td>
<td></td>
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<tr>
<td>ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED <em>(alpha1-proteinase inhibitor)</em></td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>GLASSIA INTRAVENOUS SOLUTION <em>(alpha1-proteinase inhibitor)</em></td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>PROLASTIN-C INTRAVENOUS SOLUTION <em>(alpha1-proteinase inhibitor)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED <em>(alpha1-proteinase inhibitor)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED <em>(alpha1-proteinase inhibitor)</em></td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><strong>AMEBICIDES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOLOSEC ORAL PACKET <em>(secnidazole)</em></td>
<td>3</td>
<td>ST; QL (2 grams per 1 fill)</td>
</tr>
<tr>
<td><strong>AMINO ACID MIXTURES</strong> - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>amino acids <em>(Aminoamrns Oral Capsule)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>AMINOPROTECT INTRAVENOUS SOLUTION <em>(amino acid infusion)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>amino acids <em>(Aminoreliefms Oral Capsule)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>AMINOSYN II INTRAVENOUS SOLUTION <em>(amino acid infusion)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>AMINOSYN-PF INTRAVENOUS SOLUTION <em>(amino acid infusion)</em></td>
<td>3</td>
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</tr>
<tr>
<td>CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION <em>(amino ac elect-calc in d5w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION <em>(amino ac elect-calc in d10w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION <em>(amino ac elect-calc in d5w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION <em>(amino ac elect-calc in d15w)</em></td>
<td>3</td>
<td></td>
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<tr>
<td>CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION <em>(amino ac elect-calc in d20w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION <em>(amino acid infusion in d10w)</em></td>
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<td></td>
</tr>
<tr>
<td>CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION <em>(amino acid infusion in d5w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION <em>(amino acid infusion in d15w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION <em>(amino acid infusion in d20w)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION</td>
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<tr>
<td>CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION</td>
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</tr>
<tr>
<td>CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>*amino acid infusion (Clinisol Sf Intravenous Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>FREAMEINE HBC INTRAVENOUS SOLUTION (*amino acid infusion)</td>
<td>3</td>
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<tr>
<td>FREAMEINE III INTRAVENOUS SOLUTION (*amino acid infusion)</td>
<td>3</td>
<td></td>
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<tr>
<td>hepatamine intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NEPHRAMINE INTRAVENOUS SOLUTION (*amino acid infusion)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>*amino acid infusion (Plenamine Intravenous Solution)</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>PREMASOL INTRAVENOUS SOLUTION (*amino acid infusion)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROCALAMINE INTRAVENOUS SOLUTION (*amino acid electrolyte infusion)</td>
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<tr>
<td>PROSOL INTRAVENOUS SOLUTION (*amino acid infusion)</td>
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<td></td>
</tr>
<tr>
<td>TRAVASOL INTRAVENOUS SOLUTION (*amino acid infusion)</td>
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<td></td>
</tr>
<tr>
<td>TROPHAMINE INTRAVENOUS SOLUTION (*amino acid infusion)</td>
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<tr>
<td><em>AMINO ACIDS-SINGLE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>ARGinine HCL INJECTION SOLUTION</td>
<td>3</td>
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<tr>
<td>ELCYS INTRAVENOUS SOLUTION (cysteine hcl)</td>
<td>3</td>
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<tr>
<td>GLUTATHIONE INJECTION SOLUTION</td>
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<td></td>
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<tr>
<td>GLUTATHIONE INTRAVENOUS SOLUTION</td>
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<tr>
<td>GLYCINE INJECTION SOLUTION</td>
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<tr>
<td>LYSIS HCL INJECTION SOLUTION</td>
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<tr>
<td>n-acetyl-l-cysteine oral capsule</td>
<td>1 or 1b*</td>
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<tr>
<td>NEOKE ALCAR ORAL POWDER (acetylcarnitine)</td>
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<td>TAURINE INJECTION SOLUTION</td>
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<td>TRYPTOPHAN ORAL CAPSULE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>AMINOGLYCOSIDES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>amikacin sulfate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ARIKAYCE INHALATION SUSPENSION (*amikacin sulfate liposome)</td>
<td>5</td>
<td>PA; LD; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>BETHKIS INHALATION NEBULIZATION SOLUTION (*tobramycin)</td>
<td>5</td>
<td>LD; SP; QL (224 mL per 28 days)</td>
</tr>
<tr>
<td>gentamicin in saline intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>gentamicin sulfate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>neomycin sulfate oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>paromomycin sulfate oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>streptomycin sulfate intramuscular solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>TOBI PODHALER INHALATION CAPSULE (*tobramycin)</td>
<td>5</td>
<td>LD; SP; QL (224 capsules per 28 days)</td>
</tr>
<tr>
<td>tobramycin inhalation nebulization solution 300 mg/4ml</td>
<td>4</td>
<td>SP; QL (224 mL per 28 days)</td>
</tr>
<tr>
<td>tobramycin inhalation nebulization solution 300 mg/5ml</td>
<td>4</td>
<td>SP; QL (9.4 mL per 1 day)</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>tobramycin sulfate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>tobramycin sulfate injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ZEMDRI INTRAVENOUS SOLUTION (plazomicin sulfate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>AMINOPENICILLINS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>amoxicillin oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>amoxicillin oral suspension reconstituted</td>
<td>1 or 1a*</td>
<td>QL (500 mL per 1 fill)</td>
</tr>
<tr>
<td>amoxicillin oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>amoxicillin oral tablet chewable</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>ampicillin oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>ampicillin sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ampicillin sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>AMPA GLUTAMATE RECEPTOR ANTAGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FYCOMPA ORAL SUSPENSION (perampanel)</td>
<td>3</td>
<td>QL (24 mL per 1 day)</td>
</tr>
<tr>
<td>FYCOMPA ORAL TABLET (perampanel)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>AMPHETAMINE MIXTURES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>amphetamine-dextroamphetamine oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 5 mg, 7.5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>amphetamine-dextroamphetamine oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>amphetamine-dextroamphetamine oral tablet 30 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR (amphetamine-dextroamphetamine)</td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><em>AMPHETAMINES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADZENYS ER ORAL SUSPENSION EXTENDED RELEASE (amphetamine)</td>
<td>3</td>
<td>PA; QL (15 mL per 1 day)</td>
</tr>
<tr>
<td>ADZENYS XR-O DT ORAL TABLET EXTENDED RELEASE DISPERSIBLE (amphetamine)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amphetamine er oral suspension extended release</td>
<td>1 or 1b*</td>
<td>QL (15 mL per 1 day)</td>
</tr>
<tr>
<td>amphetamine sulfate oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>amphetamine sulfate oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>dextroamphetamine sulfate oral solution</td>
<td>1 or 1b*</td>
<td>PA; QL (60 mL per 1 day)</td>
</tr>
<tr>
<td>dextroamphetamine sulfate oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>dextroamphetamine sulfate oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE <em>(amphetamine)</em></td>
<td>3</td>
<td>PA; QL (8 mL per 1 day)</td>
</tr>
<tr>
<td>EVEKEO ODT ORAL TABLET DISPERSIBLE <em>(amphetamine sulfate)</em></td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>dextroamphetamine sulfate <em>(Procentra Oral Solution)</em></td>
<td>1 or 1b*</td>
<td>PA; QL (60 mL per 1 day)</td>
</tr>
<tr>
<td>VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG <em>(lisdexamfetamine dimesylate)</em></td>
<td>2</td>
<td>PA; DO</td>
</tr>
<tr>
<td>VYVANSE ORAL CAPSULE 40 MG, 50 MG, 60 MG, 70 MG <em>(lisdexamfetamine dimesylate)</em></td>
<td>2</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG <em>(lisdexamfetamine dimesylate)</em></td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td>VYVANSE ORAL TABLET CHEWABLE 40 MG, 50 MG, 60 MG <em>(lisdexamfetamine dimesylate)</em></td>
<td>2</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>dextroamphetamine sulfate <em>(Zenzedi Oral Tablet 10 Mg)</em></td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>zenzedi oral tablet 15 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>zenzedi oral tablet 2.5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>zenzedi oral tablet 20 mg, 30 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>dextroamphetamine sulfate <em>(Zenzedi Oral Tablet 5 Mg)</em></td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>zenzedi oral tablet 7.5 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>ANABOLIC STEROIDS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ANADROL-50 ORAL TABLET <em>(oxymetholone)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>oxandrolone oral tablet</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td><strong>ANALEPTICS</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CAFCIT INTRAVENOUS SOLUTION <em>(caffeine citrate)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>caffeine citrate intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>caffeine citrate oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DOPRAM INTRAVENOUS SOLUTION <em>(doxapram hcl)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANALGESIC COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>duraxin oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>ANALGESICS OTHER</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>clonidine hcl (analgesia) epidural solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DURACLON EPIDURAL SOLUTION <em>(clonidine hcl (analgesia))</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>OFIRMEV INTRAVENOUS SOLUTION <em>(acetaminophen)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANALGESICS-SEDATIVES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>butalbital-acetaminophen <em>(Bupap Oral Tablet)</em></td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>butalbital-acetaminophen oral tablet 25-325 mg</td>
<td>1 or 1b*</td>
<td>QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>butalbital-apap-caffeine oral capsule</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>butalbital-apap-caffeine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>butalbital-aspirin-caffeine oral capsule</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>butalbital-apap-cafeína (Esgic Oral Capsule)</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>tencon oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>butalbital-apap-cafeína (Zebutal Oral Capsule)</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
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</table>

*ANAPHYLAXIS THERAPY AGENTS***

<table>
<thead>
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<tbody>
<tr>
<td>ADRENALIN INJECTION SOLUTION (epinephrine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>epinephrine injection solution auto-injector</td>
<td>1 or 1b*</td>
<td>QL (2 pens per 1 fill)</td>
</tr>
<tr>
<td>EPINEPHRINE SNAP-V INJECTION KIT (epinephrine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE (epinephrine)</td>
<td>2</td>
<td>QL (2 syringes per 1 fill)</td>
</tr>
</tbody>
</table>

*ANDROGEN BIOSYNTHESIS INHIBITORS*** - DRUGS FOR CANCER

<table>
<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>abiraterone acetate oral tablet</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>YONSA ORAL TABLET (abiraterone acetate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ZYTIGA ORAL TABLET 250 MG (abiraterone acetate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>ZYTIGA ORAL TABLET 500 MG (abiraterone acetate)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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</tbody>
</table>

*ANDROGENS***

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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>ANDRODERM TRANSDERMAL PATCH 24 HOUR (testosterone)</td>
<td>3</td>
<td>PA; QL (1 patch per 1 day)</td>
</tr>
<tr>
<td>danazol oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION (testosterone cypionate)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>JATENZO ORAL CAPSULE 158 MG, 198 MG (testosterone undecanoate)</td>
<td>3</td>
<td>PA; QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>JATENZO ORAL CAPSULE 237 MG (testosterone undecanoate)</td>
<td>3</td>
<td>PA; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>TESTOPEL IMPLANT PELLET (testosterone)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>testosterone cypionate injection solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>testosterone cypionate intramuscular solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>testosterone enanthate intramuscular solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%)</td>
<td>1 or 1b*</td>
<td>PA; QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td>testosterone transdermal gel 10 mg/act (2%)</td>
<td>1 or 1b*</td>
<td>PA; QL (1 pump per 30 days)</td>
</tr>
<tr>
<td>testosterone transdermal gel 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)</td>
<td>1 or 1b*</td>
<td>PA; QL (1 packet per 1 day)</td>
</tr>
<tr>
<td>testosterone transdermal gel 25 mg/2.5gm (1%)</td>
<td>1 or 1b*</td>
<td>PA; QL (2 packet per 1 day)</td>
</tr>
<tr>
<td>testosterone transdermal solution</td>
<td>1 or 1b*</td>
<td>PA; QL (1 pump bottle per 30 days)</td>
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</tbody>
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*ANESTHETICS - MISC.***

<table>
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<tbody>
<tr>
<td>AMIDATE INTRAVENOUS SOLUTION (etomidate)</td>
<td>3</td>
<td></td>
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<tr>
<td>ANESTHESIA S/I-40 INTRAVENOUS KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ANESTHESIA S/I-40A INTRAVENOUS KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ANESTHESIA S/I-40H INTRAVENOUS KIT</td>
<td>3</td>
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<tr>
<td>ANESTHESIA S/I-40S INTRAVENOUS KIT</td>
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<tbody>
<tr>
<td>DIPRIVAN INTRAVENOUS EMULSION (propofol)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>etomidate intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>fresenius propoven intravenous emulsion 1000 mg/100ml, 200 mg/20ml, 500 mg/50ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>FRESENIUS PROPOVEN INTRAVENOUS EMULSION 2000 MG/100ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KETALAR INJECTION SOLUTION (ketamine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ketamine hcl injection solution 10 mg/ml, 100 mg/ml, 50 mg/ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>KETAMINE HCL INJECTION SOLUTION PREFILLED SYRINGE 50 MG/5ML, 50 MG/ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KETAMINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KETAMINE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>propofol intravenous emulsion</td>
<td>1 or 1b*</td>
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*ANESTHETICS TOPICAL ORAL*** - DRUGS FOR THE MOUTH AND THROAT

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<tbody>
<tr>
<td>lidocaine hcl mouth/throat solution</td>
<td>1 or 1a*</td>
<td>QL (10 mL per 1 day)</td>
</tr>
<tr>
<td>lidocaine viscous hcl mouth/throat solution</td>
<td>1 or 1a*</td>
<td>QL (10 mL per 1 day)</td>
</tr>
</tbody>
</table>

*ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB***

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<tbody>
<tr>
<td>amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-320 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amlodipine besylate-valsartan oral tablet 5-160 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-40 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amlodipine-olmesartan oral tablet 5-20 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>telmisartan-amlodipine oral tablet 40-10 mg, 80-10 mg, 80-5 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>telmisartan-amlodipine oral tablet 40-5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>TWYNSTA ORAL TABLET 40-10 MG, 80-10 MG, 80-5 MG (telmisartan-amlodipine)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>TWYNSTA ORAL TABLET 40-5 MG (telmisartan-amlodipine)</td>
<td>3</td>
<td>DO</td>
</tr>
</tbody>
</table>

*ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>candesartan cilexetil-hctz oral tablet 16-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>candesartan cilexetil-hctz oral tablet 32-12.5 mg, 32-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>EDARBYCLOR ORAL TABLET (azilsartan-chlorthalidone)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>losartan potassium-hctz oral tablet 50-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olmesartan medoxomil-hctz oral tablet 20-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olmesartan medoxomil-hctz oral tablet 40-12.5 mg, 40-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>telmisartan-hctz oral tablet 40-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>telmisartan-hctz oral tablet 80-12.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>telmisartan-hctz oral tablet 80-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 80-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>valsartan-hydrochlorothiazide oral tablet 160-25 mg, 320-12.5 mg, 320-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

*ANGIOTENSIN II RECEPTOR ANTAGONISTS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>candesartan cilexetil oral tablet 16 mg, 4 mg, 8 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>candesartan cilexetil oral tablet 32 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>EDARBI ORAL TABLET 40 MG (azilsartan medoxomil)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>EDARBI ORAL TABLET 80 MG (azilsartan medoxomil)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>irbesartan oral tablet 150 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>irbesartan oral tablet 300 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>losartan potassium oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>losartan potassium oral tablet 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>olmesartan medoxomil oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olmesartan medoxomil oral tablet 40 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>olmesartan medoxomil oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>telmisartan oral tablet 20 mg, 40 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>telmisartan oral tablet 80 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>valsartan oral tablet 160 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>valsartan oral tablet 320 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>valsartan oral tablet 40 mg, 80 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
</tbody>
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*ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>amlodipine-valsartan-hctz oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amlodipine-valsartan-hctz oral tablet 5-160-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olmesartan-amlodipine-hctz oral tablet 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

*ANOREXIANT COMBINATIONS*** - DRUGS FOR THE NERVOUS SYSTEM

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR (phentermine-topiramate)</td>
<td>3</td>
<td>PA</td>
</tr>
</tbody>
</table>

*ANOREXIANTS NON-AMPHETAMINE*** - DRUGS FOR THE NERVOUS SYSTEM

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADIPEX-P ORAL CAPSULE (phentermine hcl)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>ADIPEX-P ORAL TABLET (phentermine hcl)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>benzphetamine hcl oral tablet 25 mg</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>benzphetamine hcl oral tablet 50 mg</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>diethylpropion hcl er oral tablet extended release 24 hour</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>diethylpropion hcl oral tablet</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>LOMAIRA ORAL TABLET (phentermine hcl)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>phendimetrazine tartrate er oral capsule extended release 24 hour</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>phendimetrazine tartrate oral tablet</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>phentermine hcl oral capsule</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>phentermine hcl oral tablet</td>
<td>1 o 1b*</td>
<td>PA</td>
</tr>
<tr>
<td><em>ANTACIDS - BICARBONATE</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SODIUM BICARBONATE ORAL POWDER</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>ANTHELMINTICS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>albendazole oral tablet</td>
<td>1 o 1b*</td>
<td>PA; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ALBENZA ORAL TABLET (albendazole)</td>
<td>3</td>
<td>PA; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>BENZNIDAZOLE ORAL TABLET</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BILTRICIDE ORAL TABLET (praziquantel)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EMVERM ORAL TABLET CHEWABLE (mebendazole)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ivermectin oral tablet</td>
<td>1 o 1b*</td>
<td></td>
</tr>
<tr>
<td>praziquantel oral tablet</td>
<td>1 o 1b*</td>
<td></td>
</tr>
<tr>
<td>STROMECTOL ORAL TABLET (ivermectin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>ANTIADRENALS</em>** - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LYSODREN ORAL TABLET (mitotane)</td>
<td>2; OC</td>
<td>LD; QL (38 tablet per 1 day)</td>
</tr>
<tr>
<td><em>ANTIADRENERGICS - CENTRALLY ACTING</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CATAPRES ORAL TABLET (clonidine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY (clonidine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY (clonidine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY (clonidine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>clonidine hcl oral tablet</td>
<td>1 o 1a*</td>
<td></td>
</tr>
<tr>
<td>clonidine transdermal patch weekly</td>
<td>1 o 1b*</td>
<td></td>
</tr>
<tr>
<td>guanfacine hcl oral tablet</td>
<td>1 o 1b*</td>
<td></td>
</tr>
<tr>
<td>methylidopa oral tablet</td>
<td>1 o 1b*</td>
<td></td>
</tr>
<tr>
<td><em>ANTIADRENERGICS - PERIPHERALLY ACTING</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG (doxazosin mesylate)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>CARDURA ORAL TABLET 8 MG (doxazosin mesylate)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg</td>
<td>1 o 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>doxazosin mesylate oral tablet 8 mg</td>
<td>1 o 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>MINIPRESS ORAL CAPSULE (prazosin hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>prazosin hcl oral capsule</td>
<td>1 o 1b*</td>
<td></td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>terazosin hcl oral capsule 1 mg, 2 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>terazosin hcl oral capsule 10 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
</tbody>
</table>

*ANTIANDROGENS*** - DRUGS FOR CANCER

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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>bicalutamide oral tablet</td>
<td>1 or 1b*; OC</td>
<td></td>
</tr>
<tr>
<td>CASODEX ORAL TABLET (bicalutamide)</td>
<td>3; OC</td>
<td></td>
</tr>
<tr>
<td>ERLEADA ORAL TABLET (apalutamide)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (4 tablets per 1 day)</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>flutamide oral capsule</td>
<td>1 or 1b*; OC</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NILANDRON ORAL TABLET (nilutamide)</td>
<td>3; OC</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>nilutamide oral tablet</td>
<td>1 or 1b*; OC</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NUBEQA ORAL TABLET (darolutamide)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>XTANDI ORAL CAPSULE (enzalutamide)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (4 capsule per 1 day)</td>
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*ANTIANGINALS-OTHER***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR (ranolazine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ranolazine er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
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</table>

*ANTIANXIETY AGENTS - MISC.***

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<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>buspirone hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>droperidol injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydroxyzine hcl intramuscular solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydroxyzine hcl oral syrup</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydroxyzine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydroxyzine pamoate oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>meprobamate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>VISTARIL ORAL CAPSULE (hydroxyzine pamoate)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

*ANTIARRHYTHMICS - MISC.***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>ADENOCARD INTRAVENOUS SOLUTION (adenosine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>adenosine intravenous solution 12 mg/4ml, 6 mg/2ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
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*ANTIARRHYTHMICS TYPE I-A***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>disopyramide phosphate oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR (disopyramide phosphate)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>NORPACE ORAL CAPSULE (disopyramide phosphate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>procainamide hcl injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>quinidine gluconate er oral tablet extended release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>quinidine sulfate oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
</tbody>
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*ANTIARRHYTHMICS TYPE I-B***

<table>
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<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>lidocaine hcl (cardiac) intravenous solution prefilled syringe</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>LIDOCAINE HCL (CARDIAC) PF INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl (cardiac) pf intravenous solution prefilled syringe</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LIDOCAINE IN D5W INTRAVENOUS SOLUTION 2-5 MG/ML-%</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-%</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>mexiletine hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>ANTIARRHYTHMICS TYPE I-C</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>flecainide acetate oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>flecainide acetate oral tablet 150 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>flecainide acetate oral tablet 50 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>propafenone hcl er oral capsule extended release 12 hour</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>propafenone hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR (propafenone hcl)</td>
<td>3</td>
<td></td>
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<tr>
<td><em>ANTIARRHYTHMICS TYPE III</em>**</td>
<td></td>
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<tr>
<td>amiodarone hcl intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>amiodarone hcl oral tablet 100 mg, 400 mg</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>amiodarone hcl oral tablet 200 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>BRETYLIUM TOSYLATE INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CORVERT INTRAVENOUS SOLUTION (ibutilide fumarate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>dofetilide oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>ibutilide fumarate intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>MULTAQ ORAL TABLET (dronedarone hcl)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>NEXTERONE INTRAVENOUS SOLUTION (amiodarone hcl in dextrose)</td>
<td>3</td>
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<tr>
<td>amiodarone hcl (Pacerone Oral Tablet 100 Mg, 400 Mg)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>amiodarone hcl (Pacerone Oral Tablet 200 Mg)</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td><em>ANTIBIOTIC STEROID COMBINATIONS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CORTISPORIN EXTERNAL CREAM (neomycin-polymyxin-hc)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CORTISPORIN EXTERNAL OINTMENT (bacit-poly-neo he)</td>
<td>3</td>
<td></td>
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<tr>
<td>NEO-SYNALAR EXTERNAL CREAM (neomycin-fluocinolone)</td>
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<tr>
<td><em>ANTIBIOTICS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>ALTABAX EXTERNAL OINTMENT (retapamulin)</td>
<td>2</td>
<td>QL (30 grams per 1 fill)</td>
</tr>
<tr>
<td>CENTANY AT EXTERNAL KIT (mupirocin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CENTANY EXTERNAL OINTMENT (mupirocin)</td>
<td>3</td>
<td>QL (30 grams per 1 fill)</td>
</tr>
<tr>
<td>gentamicin sulfate external cream</td>
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</tr>
<tr>
<td>gentamicin sulfate external ointment</td>
<td>1 or 1b*</td>
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<tr>
<td>mupirocin calcium external cream</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
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<tr>
<td>mupirocin external ointment</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 1 fill)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>XEPI EXTERNAL CREAM (<em>oxenoxacin</em>)</td>
<td>3</td>
<td>QL (45 grams per 1 fill)</td>
</tr>
<tr>
<td><strong>ANTI-CATAPLECTIC AGENTS</strong>*</td>
<td></td>
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</tr>
<tr>
<td>XYREM ORAL SOLUTION (<em>sodium oxybate</em>)</td>
<td>3</td>
<td>PA; LD; QL (18 mL per 1 day)</td>
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<tr>
<td><strong>ANTICHOLINERGIC COMBINATIONS</strong>*</td>
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<tr>
<td>chlordiazepoxide-clidinium oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>DONNATAL ORAL ELIXIR (<em>pb-hyoscy-atropine-scopolamine</em>)</td>
<td>3</td>
<td></td>
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<tr>
<td>LIBRAX ORAL CAPSULE (<em>chlordiazepoxide-clidinium</em>)</td>
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<td></td>
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<tr>
<td>phenobarbital-belladonna alk oral elixir</td>
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<tr>
<td><em>ANTICONVULSANTS - BENZODIAZEPINES</em>**</td>
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<tr>
<td>clobazam oral suspension</td>
<td>1 or 1b*</td>
<td>QL (16 mL per 1 day)</td>
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<tr>
<td>clobazam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>clonazepam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>clonazepam oral tablet dispersible</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>DIASTAT ACUDIAL RECTAL GEL (<em>diazepam</em>)</td>
<td>3</td>
<td>QL (2 syringes per 1 fill)</td>
</tr>
<tr>
<td>DIASTAT PEDIATRIC RECTAL GEL (<em>diazepam</em>)</td>
<td>3</td>
<td>QL (2 syringes per 1 fill)</td>
</tr>
<tr>
<td>diazepam rectal gel</td>
<td>1 or 1b*</td>
<td>QL (2 syringes per 1 fill)</td>
</tr>
<tr>
<td>NAYZILAM NASAL SOLUTION (<em>midazolam (anticonvulsant)</em></td>
<td>3</td>
<td>PA; QL (50 mg per 30 days)</td>
</tr>
<tr>
<td>SYMPAZAN ORAL FILM 10 MG, 20 MG (<em>clobazam</em>)</td>
<td>3</td>
<td>QL (2 film strips per 1 day)</td>
</tr>
<tr>
<td>SYMPAZAN ORAL FILM 5 MG (<em>clobazam</em>)</td>
<td>3</td>
<td>QL (1 film strip per 1 day)</td>
</tr>
<tr>
<td>VALTOCO 10 MG DOSE NASAL LIQUID (<em>diazepam</em>)</td>
<td>3</td>
<td>PA; LD; QL (10 blister packs per 30 days)</td>
</tr>
<tr>
<td>VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK (<em>diazepam</em>)</td>
<td>3</td>
<td>PA; LD; QL (10 blister packs per 30 days)</td>
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<tr>
<td>VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK (<em>diazepam</em>)</td>
<td>3</td>
<td>PA; LD; QL (10 blister packs per 30 days)</td>
</tr>
<tr>
<td>VALTOCO 5 MG DOSE NASAL LIQUID (<em>diazepam</em>)</td>
<td>3</td>
<td>PA; LD; QL (10 blister packs per 30 days)</td>
</tr>
<tr>
<td><strong>ANTICONVULSANTS - MISC.</strong>*</td>
<td></td>
<td></td>
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<tr>
<td>APTIOM ORAL TABLET 200 MG, 400 MG (<em>eslicarbazepine acetate</em>)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>APTIOM ORAL TABLET 600 MG, 800 MG (<em>eslicarbazepine acetate</em>)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>BANZEL ORAL SUSPENSION (<em>rufinamide</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BANZEL ORAL TABLET (<em>rufinamide</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BRIVIACT INTRAVENOUS SOLUTION (<em>brivaracetam</em>)</td>
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<tr>
<td>BRIVIACT ORAL SOLUTION (<em>brivaracetam</em>)</td>
<td>3</td>
<td>QL (20 mg per 1 day)</td>
</tr>
<tr>
<td>BRIVIACT ORAL TABLET 10 MG, 25 MG, 50 MG (<em>brivaracetam</em>)</td>
<td>3</td>
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<tr>
<td>BRIVIACT ORAL TABLET 100 MG, 75 MG (<em>brivaracetam</em>)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>carbamazepine er oral capsule extended release 12 hour 100 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>carbamazepine er oral capsule extended release 12 hour 200 mg</td>
<td>1 or 1b*</td>
<td>QL (8 capsules per 1 day)</td>
</tr>
<tr>
<td>carbamazepine er oral capsule extended release 12 hour 300 mg</td>
<td>1 or 1b*</td>
<td>QL (5 capsules per 1 day)</td>
</tr>
<tr>
<td>carbamazepine er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>carbamazepine er oral capsule extended release</td>
<td>1 or 1b*</td>
<td>QL (50 mL per 1 day)</td>
</tr>
<tr>
<td>carbamazepine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (8 tablets per 1 day)</td>
</tr>
<tr>
<td>carbamazepine oral tablet chewable</td>
<td>1 or 1b*</td>
<td>QL (10 tablets per 1 day)</td>
</tr>
<tr>
<td>DIACOMIT ORAL CAPSULE 250 MG (stiripentol)</td>
<td>5</td>
<td>PA; LD; QL (12 capsules per 1 day)</td>
</tr>
<tr>
<td>DIACOMIT ORAL CAPSULE 500 MG (stiripentol)</td>
<td>5</td>
<td>PA; LD; QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>DIACOMIT ORAL PACKET 250 MG (stiripentol)</td>
<td>5</td>
<td>PA; LD; QL (8 packets per 1 day)</td>
</tr>
<tr>
<td>DIACOMIT ORAL PACKET 500 MG (stiripentol)</td>
<td>5</td>
<td>PA; LD; QL (6 packets per 1 day)</td>
</tr>
<tr>
<td>EPIDIOLEX ORAL SOLUTION (cannabidiol)</td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>carbamazepine (Epitol Oral Tablet)</td>
<td>1 or 1b*</td>
<td>QL (8 tablets per 1 day)</td>
</tr>
<tr>
<td>FANATREX FUSEPAQ ORAL SUSPENSION (gabapentin)</td>
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<tr>
<td>FINTEPLA ORAL SOLUTION (fenfluramine hcl)</td>
<td>5</td>
<td>PA; LD; QL (26 mg per 1 day)</td>
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<tr>
<td>gabapentin oral capsule 100 mg, 400 mg</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
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<tr>
<td>gabapentin oral capsule 300 mg</td>
<td>1 or 1b*</td>
<td>QL (9 capsules per 1 day)</td>
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<tr>
<td>gabapentin oral solution</td>
<td>1 or 1b*</td>
<td>QL (72 mL per 1 day)</td>
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<tr>
<td>gabapentin oral tablet 600 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>gabapentin oral tablet 800 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine er oral tablet extended release 24 hour 100 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine er oral tablet extended release 24 hour 200 mg, 250 mg, 300 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine er oral tablet extended release 24 hour 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine oral kit</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lamotrigine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine oral tablet chewable 25 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine oral tablet chewable 5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine oral tablet dispersible 100 mg, 200 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>lamotrigine oral tablet dispersible 25 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
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<tr>
<td>lamotrigine oral tablet dispersible 50 mg</td>
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<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>lamotrigine starter kit-blue oral kit</td>
<td>1 or 1b*</td>
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<tr>
<td>lamotrigine starter kit-green oral kit</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lamotrigine starter kit-orange oral kit</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>levetiracetam er oral tablet extended release 24 hour 500 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam er oral tablet extended release 24 hour 750 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>LEVETIRACETAM IN NACL INTRAVENOUS SOLUTION</td>
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<td></td>
</tr>
<tr>
<td>levetiracetam intravenous solution</td>
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<tr>
<td>levetiracetam oral solution</td>
<td>1 or 1b*</td>
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</tr>
</tbody>
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<tbody>
<tr>
<td>levetiracetam oral tablet 1000 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam oral tablet 250 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam oral tablet 750 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>oxcarbazepine oral suspension</td>
<td>1 or 1b*</td>
<td>QL (40 mL per 1 day)</td>
</tr>
<tr>
<td>oxcarbazepine oral tablet 150 mg, 300 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>oxcarbazepine oral tablet 600 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG (oxcarbazepine)</td>
<td>3</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 600 MG (oxcarbazepine)</td>
<td>3</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>QL (3 capsule per 1 day)</td>
</tr>
<tr>
<td>pregabalin oral capsule 225 mg, 300 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>pregabalin oral solution</td>
<td>1 or 1b*</td>
<td>QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>primidone oral tablet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 25 MG, 50 MG (topiramate)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 150 MG, 200 MG (topiramate)</td>
<td>3</td>
<td>ST; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>levetiracetam (Roweepra Oral Tablet 1000 Mg)</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam (Roweepra Oral Tablet 500 Mg)</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
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<tr>
<td>levetiracetam (Roweepra Oral Tablet 750 Mg)</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam (Roweepra Xr Oral Tablet Extended Release 24 Hour 500 Mg)</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>levetiracetam (Roweepra Xr Oral Tablet Extended Release 24 Hour 750 Mg)</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 1000 MG, 250 MG, 500 MG (levetiracetam)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 750 MG (levetiracetam)</td>
<td>3</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>lamotrigine (Subvenite Oral Tablet)</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>lamotrigine (Subvenite Starter Kit-Blue Oral Kit)</td>
<td>1 or 1b*</td>
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<tr>
<td>lamotrigine (Subvenite Starter Kit-Green Oral Kit)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lamotrigine (Subvenite Starter Kit-Orange Oral Kit)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>topiramate er oral capsule er 24 hour sprinkle 100 mg, 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>topiramate er oral capsule er 24 hour sprinkle 150 mg, 200 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>topiramate oral capsule sprinkle</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>topiramate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG (topiramate)</td>
<td>2</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG (topiramate)</td>
<td>2</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
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<tr>
<td>VIMPAT INTRAVENOUS SOLUTION <em>(lacosamide)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VIMPAT ORAL SOLUTION <em>(lacosamide)</em></td>
<td>3</td>
<td>QL (40 mL per 1 day)</td>
</tr>
<tr>
<td>VIMPAT ORAL TABLET <em>(lacosamide)</em></td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>zonisamide oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
</tbody>
</table>

*ANTIDEPRESSANTS - MISC.***

<table>
<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG <em>(bupropion hbr)</em></td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 348 MG, 522 MG <em>(bupropion hbr)</em></td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>ANTIDIABETIC - AMYLIN ANALOGS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(pramlintide acetate)</em></td>
<td>2</td>
<td>QL (4 pens per 30 days)</td>
</tr>
<tr>
<td>SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(pramlintide acetate)</em></td>
<td>2</td>
<td>QL (2 boxes per 30 days)</td>
</tr>
</tbody>
</table>

*ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS***

<table>
<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>MYTESI ORAL TABLET DELAYED RELEASE <em>(crofelemer)</em></td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
</tbody>
</table>

*ANTIDIARRHEAL AGENTS - MISC.***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>VSL#3 DS ORAL PACKET <em>(probiotic product)</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

*ANTIDIARRHEAL COMBINATIONS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESTORA RX ORAL CAPSULE <em>(lactobacillus casei-folic acid)</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

*ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.***

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>VSL#3 DS ORAL PACKET <em>(probiotic product)</em></td>
<td>3</td>
<td></td>
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</tbody>
</table>

*ANTIDIARRHEAL/PROBIOTIC COMBINATIONS***

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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>RESTORA RX ORAL CAPSULE <em>(lactobacillus casei-folic acid)</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

*ANTIDOTE COMBINATIONS AND KITS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>DUODOTE INTRAMUSCULAR SOLUTION AUTO-INJECTOR <em>(atropine-pralidoxime chloride)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NITHIODOTE INTRAVENOUS KIT <em>(sodium nitrite-sod thiosulfate)</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

*ANTIDOTES - CHELATING AGENTS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHEMET ORAL CAPSULE <em>(succimer)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>deferasirox granules oral packet</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>deferasirox oral tablet 180 mg</td>
<td>4</td>
<td>SP</td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>deferasirox oral tablet 360 mg, 90 mg</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>deferasirox oral tablet soluble</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>deferiprone oral tablet</td>
<td>4</td>
<td>PA</td>
</tr>
<tr>
<td>EXJADE ORAL TABLET SOLUBLE (deferasirox)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>FERRIPROX ORAL SOLUTION (deferiprone)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>FERRIPROX ORAL TABLET (deferiprone)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>FERRIPROX TWICE-A-DAY ORAL TABLET (deferiprone)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>JADENU ORAL TABLET (deferasirox)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>JADENU SPRINKLE ORAL PACKET (deferasirox)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>PENTETATE CALCIUM TRISODIUM COMBINATION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PENTETATE ZINC TRISODIUM COMBINATION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANTIDOTES AND SPECIFIC ANTAGONISTS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACETADOTE INTRAVENOUS SOLUTION (acetylcysteine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>acetylcysteine intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED (coag fact xa inactivated-zhzo)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BAL IN OIL INTRAMUSCULAR SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BRIDION INTRAVENOUS SOLUTION (sugammadex sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CALCIUM DISODIUM VERSENATE INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED (hydroxocobalamin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>deferoxamine mesylate injection solution reconstituted</td>
<td>4</td>
<td>SP</td>
</tr>
<tr>
<td>DESFERAL INJECTION SOLUTION RECONSTITUTED (deferoxamine mesylate)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED (digoxin immune fab)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>fomepizole intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PRAXBIND INTRAVENOUS SOLUTION (idarucizumab)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED (pralidoxime chloride)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROVAYBLUE INTRAVENOUS SOLUTION (methylene blue (antidote))</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RADIOGARDASE ORAL CAPSULE (prussian blue insoluble)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SODIUM NITRITE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>sodium thiosulfate intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>VISTOGARD ORAL PACKET (uridine triacetate)</td>
<td>3</td>
<td>PA; LD; QL (20 packets per 30 days)</td>
</tr>
<tr>
<td><strong>ANTIDOTES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACETADOTE INTRAVENOUS SOLUTION (acetylcysteine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>acetylcysteine intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tr>
<td>ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED (coag fact xa inactivated-zhzo)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BAL IN OIL INTRAMUSCULAR SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BRIDION INTRAVENOUS SOLUTION (sugammadex sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CALCIUM DISODIUM VERSENATE INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED (hydroxocobalamín)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>deferoxamine mesylate injection solution reconstituted</td>
<td>4</td>
<td>SP</td>
</tr>
<tr>
<td>DESFERAL INJECTION SOLUTION RECONSTITUTED (deferoxamine mesylate)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED (digoxin immune fab)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>fomepizole intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PRAXBIND INTRAVENOUS SOLUTION (idarucizumab)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED (pralidoxime chloride)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROVAYBLUE INTRAVENOUS SOLUTION (methylene blue (antidote))</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RADIOGARDASE ORAL CAPSULE (prussian blue insoluble)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SODIUM NITRITE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>sodium thiosulfate intravenous solution</td>
<td>1 or 1b*</td>
<td>PA; LD; QL (20 packets per 30 days)</td>
</tr>
<tr>
<td>VISTOGARD ORAL PACKET (uridine triacetate)</td>
<td>3</td>
<td>PA; QL (20 packets per 30 days)</td>
</tr>
</tbody>
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**ANTIEMETIC COMBINATIONS***

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<tbody>
<tr>
<td>AKYNZEO INTRAVENOUS SOLUTION (fosnetupitant-palonosetron)</td>
<td>3</td>
<td>PA; QL (5 vials per 30 days)</td>
</tr>
<tr>
<td>AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED (fosnetupitant-palonosetron)</td>
<td>3</td>
<td>PA; QL (5 vials per 30 days)</td>
</tr>
<tr>
<td>AKYNZEO ORAL CAPSULE (netupitant-palonosetron)</td>
<td>3</td>
<td>QL (5 capsules per 25 days)</td>
</tr>
<tr>
<td>BONIESTA ORAL TABLET EXTENDED RELEASE (doxylamine-pyridoxine)</td>
<td>3</td>
<td>PA; QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>doxylamine-pyridoxine oral tablet delayed release</td>
<td>1 or 1b*</td>
<td>PA; QL (4 tablet per 1 day)</td>
</tr>
</tbody>
</table>

**ANTIEMETIC COMBINATIONS - ANTICHOLINERGIC***

<table>
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</thead>
<tbody>
<tr>
<td>DIMENHYDRINATE INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>meclizine hcl oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>scopolamine transdermal patch 72 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>TIGAN INTRAMUSCULAR SOLUTION (trimethobenzamide hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TIGAN ORAL CAPSULE (trimethobenzamide hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>trimethobenzamide hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
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**ANTIEMETIC COMBINATIONS - MISCELLANEOUS***

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</thead>
<tbody>
<tr>
<td>dronabinol oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MARINOL ORAL CAPSULE (dronabinol)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td>SYNDROS ORAL SOLUTION (<em>dronabinol</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANTIESTROGENS</strong>* - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FARESTON ORAL TABLET (<em>toremifene citrate</em>)</td>
<td>3; OC</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SOLTAMOX ORAL SOLUTION (<em>tamoxifen citrate</em>)</td>
<td>2; OC; $0</td>
<td></td>
</tr>
<tr>
<td>tamoxifen citrate oral tablet</td>
<td>1 or 1b*; OC; $0</td>
<td></td>
</tr>
<tr>
<td>toremifene citrate oral tablet</td>
<td>1 or 1b*; OC</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED (<em>caspofungin acetate</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CASPOFUNGIN ACETATE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED (<em>anidulafungin</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>micafungin sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED (<em>micafungin sodium</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANTIFUNGALS - TOPICAL COMBINATIONS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>clotrimazole-betamethasone external cream</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>clotrimazole-betamethasone external lotion</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 30 days)</td>
</tr>
<tr>
<td>EXODERM EXTERNAL LOTION (<em>sod thiosulfate-salicylic acid</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>FUNGIMEZ EXTERNAL SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>iodoquimez-hc external cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>iodoquinol-hc-aloe polysacch external gel</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>miconazole-zinc oxide-petrolat external ointment</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>nystatin-triamcinolone external cream</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>nystatin-triamcinolone external ointment</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>RECURA EXTERNAL CREAM (<em>misc antifungal combo products</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VUSION EXTERNAL OINTMENT (<em>miconazole-zinc oxide-petrolat</em>)</td>
<td>3</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>XOLEGEL COREPAK EXTERNAL KIT (<em>ketoconazole-hydrocortisone</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XOLEGEL DUO/HEAD &amp; SHOULDERS EXTERNAL KIT (<em>ketoconazole &amp; pyrithione zinc</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XOLEGEL DUO/XOLEX EXTERNAL KIT (<em>ketoconazole &amp; pyrithione zinc</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANTIFUNGALS - TOPICAL</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ciclopirox external gel</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ciclopirox external shampoo</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ciclopirox external solution</td>
<td>1 or 1b*</td>
<td>QL (7 mL per 30 days)</td>
</tr>
<tr>
<td>ciclopirox olamine external cream</td>
<td>1 or 1b*</td>
<td>QL (90 grams per 30 days)</td>
</tr>
<tr>
<td>ciclopirox olamine external suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td>LOPROX EXTERNAL CREAM (<em>ciclopirox olamine</em>)</td>
<td>3</td>
<td>ST; QL (90 grams per 30 days)</td>
</tr>
<tr>
<td>LOPROX EXTERNAL SHAMPOO (<em>ciclopirox</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LOPROX EXTERNAL SUSPENSION (<em>ciclopirox olamine</em>)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>MENTAX EXTERNAL CREAM (<em>butenafine hcl</em>)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>naftifine hcl external cream</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>naftifine hcl external gel</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>NAFTIN EXTERNAL CREAM (<em>naftifine hcl</em>)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>NAFTIN EXTERNAL GEL (<em>naftifine hcl</em>)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>nystatin (Nyamyc External Powder)</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>nystatin external cream</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>nystatin external ointment</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>nystatin external powder</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>nystatin (Nystop External Powder)</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td><em>ANTIFUNGALS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABELCET INTRAVENOUS SUSPENSION (<em>amphotericin b lipid</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED (<em>amphotericin b liposome</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>amphotericin b intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ANCOBON ORAL CAPSULE (<em>flucytosine</em>)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>BIO-STATIN ORAL CAPSULE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bio-statín oral powder</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>flucytosine oral capsule</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>griseofulvin microsize oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>griseofulvin microsize oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>griseofulvin ultramicrosize oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>nystatin oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>terbinafine hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>ANTIHEMOPHILIC PRODUCTS</em>**</td>
<td></td>
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</tr>
<tr>
<td>ADVATE INTRAVENOUS SOLUTION RECONSTITUTED (<em>antihemophil factor (rahf-pfm</em>))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>AFSTYLA INTRAVENOUS KIT (<em>antihemophil fact single chain</em>)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ALPHANATE/VWF COMPLEX/HUMAN INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor ix)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>BENEFIX INTRAVENOUS KIT (*coagulation factor ix (recomb))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor x (human))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>CORIFACT INTRAVENOUS KIT (factor xiii concentrate human)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED (antihem fact (bdd-rfviicf))</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td>ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED (antihemoph fact remb gpeg-exei)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>FEIBA INTRAVENOUS SOLUTION RECONSTITUTED (antiinhibitor coagulant cmplx)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED (fibrinogen concentrate (human))</td>
<td>5</td>
<td>PA</td>
</tr>
<tr>
<td>HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED (antihemophilic factor)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED (antihemophilic factor-vwf)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>IDELVION INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor ix (rix-fp))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>IXINITY INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor ix (recomb))</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td>JIVI INTRAVENOUS SOLUTION RECONSTITUTED (ahf (bdd-rfviig-apecl))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>KCENTRA INTRAVENOUS KIT (prothrombin complex conc human)</td>
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<tr>
<td>KOATE INTRAVENOUS SOLUTION RECONSTITUTED (antihemophilic factor)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED (antihemophilic factor)</td>
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<td>PA; SP</td>
</tr>
<tr>
<td>KOKENATE FS INTRAVENOUS KIT (antihemophilic factor (recomb))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED (antihemophil factor (rahf-pfm))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>MONONINE INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor ix)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED (antihemophil fact bd truncated)</td>
<td>4</td>
<td>LD; SP</td>
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<tr>
<td>NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor viia recomb)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>NUWIQ INTRAVENOUS KIT (antihem fact (bdd-rfviisim))</td>
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<tr>
<td>NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED (antihem fact (bdd-rfviisim))</td>
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<tr>
<td>OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED (factor ix complex)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>REBINYN INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor ix glycopeg)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td>RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED (antihemophilic factor (recomb))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED (fibrinogen concentrate (human))</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor viiia-jncw)</td>
<td>5</td>
<td>PA</td>
</tr>
<tr>
<td>TRETEN INTRAVENOUS SOLUTION RECONSTITUTED (coagulation factor xiia a-sub)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED (von willebrand factor (recomb))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>WILATE INTRAVENOUS KIT (antihemophilic factor-vwf)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>XYNTHA INTRAVENOUS KIT (antihem fact (bddsrfviii,mor))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>XYNTHA SOLOFUSE INTRAVENOUS KIT (antihem fact (bddsrfviii,mor))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
</tbody>
</table>

*ANTIHISTAMINES - ALKYLAMINES***

| ryclora oral solution                                                                       | 1 or 1b*             |

*ANTIHISTAMINES - ETHANOLAMINES***

| carboxinamide maleate oral solution                                                        | 1 or 1b*             |
| carboxinamide maleate oral tablet 4 mg                                                     | 1 or 1b*             |
| clemastine fumarate oral tablet 2.68 mg                                                    | 1 or 1b*             |
| diphen oral elixir                                                                        | 1 or 1a* QL (4 mL per 1 day) |
| diphenhydramine hcl injection solution                                                     | 1 or 1b*             |
| diphenhydramine hcl oral elixir                                                           | 1 or 1a* QL (4 mL per 1 day) |
| KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE (carboxinamide maleate)                     | 3                     | QL (40 mL per 1 day)            |
| RYVENT ORAL TABLET (carboxinamide maleate)                                                | 1 or 1b* QL (4 tablets per 1 day) |

*ANTIHISTAMINES - NON-SEDATING***

| cetirizine hcl oral solution                                                               | 1 or 1b*             |
| CLARINEX ORAL TABLET (desloratadine)                                                      | 3                     | ST; QL (1 tablet per 1 day)     |
| desloratadine oral tablet                                                                  | 1 or 1b* QL (1 tablet per 1 day) |
| desloratadine oral tablet dispersible                                                     | 1 or 1b* QL (1 tablet per 1 day) |
| levocetirizine dihydrochloride oral solution                                               | 1 or 1b* QL (10 mL per 1 day) |
| levocetirizine dihydrochloride oral tablet                                                 | 1 or 1b* QL (1 tablet per 1 day) |
| QUZYTTIR INTRAVENOUS SOLUTION (cetirizine hcl)                                            | 3                     |

*ANTIHISTAMINES - PHENOTHIAZINES***

| PHENERGAN INJECTION SOLUTION (promethazine hcl)                                           | 3                     |
| promethazine hcl injection solution                                                       | 1 or 1a*             |
| promethazine hcl oral solution                                                            | 1 or 1a*             |
| promethazine hcl oral syrup                                                               | 1 or 1a*             |

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<tbody>
<tr>
<td>promethazine hcl oral tablet 12.5 mg, 50 mg</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>promethazine hcl oral tablet 25 mg</td>
<td>1 or 1a*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>promethazine hcl rectal suppository</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>promethegran rectal suppository</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>ANTIHISTAMINES - PIPERIDINES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>cyproheptadine hcl oral syrup</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cyproheptadine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>ANTIHISTAMINE-STEROID</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>azelastine-fluticasone nasal suspension</td>
<td>1 or 1b*</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td>DYMISTA NASAL SUSPENSION (azelastine-fluticasone)</td>
<td>3</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td><strong>ANTIHYPERTENSIVES - MISC.</strong>*</td>
<td></td>
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</tr>
<tr>
<td>VECAMYL ORAL TABLET (mecamylamine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANTI-IGE MONOCLONAL ANTIBODIES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (omalizumab)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED (omalizumab)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><strong>ANTI-INFECTIVE AGENTS - MISC.</strong>* - DRUGS FOR INFECTIONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AEMCOLO ORAL TABLET DELAYED RELEASE (rifamycin sodium)</td>
<td>3</td>
<td>PA; QL (12 tablets per 30 days)</td>
</tr>
<tr>
<td>bacitracin intramuscular solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>baxitracin intramuscular solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>FLAGYL ORAL CAPSULE (metronidazole)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>FLAGYL ORAL TABLET (metronidazole)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>IMPAVIDO ORAL CAPSULE (miltefosine)</td>
<td>3</td>
<td>PA; QL (84 capsules per 1 fill)</td>
</tr>
<tr>
<td>metronidazole in nacl intravenous solution 5-0.79 mg/ml-%, 500-0.79 mg/100ml-%</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>METRONIDAZOLE IN NAACL INTRAVENOUS SOLUTION 500-0.74 MG/100ML-%</td>
<td>3</td>
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</tr>
<tr>
<td>metronidazole oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>metronidazole oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>NEBUPENT INHALATION SOLUTION RECONSTITUTED (pentamidine isethionate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PENTAM INJECTION SOLUTION RECONSTITUTED (pentamidine isethionate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>pentamidine isethionate inhalation solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pentamidine isethionate injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td>PRIMSOL ORAL SOLUTION (trimethoprim hcl)</td>
<td>3</td>
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<tr>
<td>tinidazole oral tablet 250 mg</td>
<td>1 or 1b*</td>
<td>QL (5 tablets per 28 days)</td>
</tr>
<tr>
<td>tinidazole oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (20 tablets per 1 fill)</td>
</tr>
<tr>
<td>trimethoprim oral tablet</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>XIFAXAN ORAL TABLET 200 MG (rifaximin)</td>
<td>3</td>
<td>PA; QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>XIFAXAN ORAL TABLET 550 MG (rifaximin)</td>
<td>3</td>
<td>PA; QL (126 tablet per 252 days)</td>
</tr>
</tbody>
</table>

**ANTIFUGITIVES - GENITOURINARY IRRIGANTS*** - DRUGS FOR THE URINARY SYSTEM

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<tbody>
<tr>
<td>COARTEM ORAL TABLET (artemether-lumefantrine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MALARONE ORAL TABLET (atovaquone-proguanil hcl)</td>
<td>3</td>
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</tr>
<tr>
<td><strong>ANTIMALARIALS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ARAKODA ORAL TABLET (tafenoquine succinate)</td>
<td>3</td>
<td>QL (56 tablets per 1 year)</td>
</tr>
<tr>
<td>chloroquine phosphate oral tablet 250 mg</td>
<td>1 or 1a*</td>
<td>QL (16 tablets per 1 fill)</td>
</tr>
<tr>
<td>chloroquine phosphate oral tablet 500 mg</td>
<td>1 or 1a*</td>
<td>QL (8 tablets per 1 fill)</td>
</tr>
<tr>
<td>DARAPRIM ORAL TABLET (pyrimethamine)</td>
<td>3</td>
<td>PA; LD; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>hydroxychloroquine sulfate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (16 tablets per 1 fill)</td>
</tr>
<tr>
<td>KRINTAFEL ORAL TABLET (tafenoquine succinate)</td>
<td>3</td>
<td>QL (2 tablets per 1 fill)</td>
</tr>
<tr>
<td>mefloquine hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (5 tablets per 28 days)</td>
</tr>
<tr>
<td>PRIMAQUINE PHOSPHATE ORAL TABLET</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>pyrimethamine oral tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>QUALAQUIN ORAL CAPSULE (quinine sulfate)</td>
<td>3</td>
<td>PA; QL (60 capsule per 365 days)</td>
</tr>
<tr>
<td>quinine sulfate oral capsule</td>
<td>1 or 1b*</td>
<td>PA; QL (60 capsule per 365 days)</td>
</tr>
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<td><strong>ANTIMANIC AGENTS</strong>*</td>
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</tr>
<tr>
<td>lithium carbonate er oral tablet extended release</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>lithium carbonate oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>lithium carbonate oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>LITHIUM ORAL SOLUTION</td>
<td>2</td>
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<tr>
<td><strong>ANTIMETABOLITES</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED (pemetrexed disodium)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ARRANON INTRAVENOUS SOLUTION (nelarabine)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>azacitidine injection suspension reconstituted</td>
<td>1 or 1b*</td>
<td>PA; SP</td>
</tr>
<tr>
<td>capecitabine oral tablet</td>
<td>1 or 1b*; OC</td>
<td>PA; SP</td>
</tr>
<tr>
<td>cladribine intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>clofarabine intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>CLOLAR INTRAVENOUS SOLUTION (clofarabine)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>cytarabine (pf) injection solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>cytarabine injection solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>DACOGEN INTRAVENOUS SOLUTION RECONSTITUTED (decitabine)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>decitabine intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>floxuridine injection solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>fludarabine phosphate intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>fludarabine phosphate intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>fluorouracil intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>FOLOTYN INTRAVENOUS SOLUTION (pralatrexate)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>GEMCITABINE HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>SP</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>gemcitabine hcl intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>INFUGEM INTRAVENOUS SOLUTION (gemcitabine hcl-nacl)</td>
<td>3</td>
<td>SP</td>
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<tr>
<td>mercaptopurine oral tablet</td>
<td>1 or 1b*; OC</td>
<td>SP</td>
</tr>
<tr>
<td>methotrexate oral tablet</td>
<td>1 or 1b*; OC</td>
<td>SP</td>
</tr>
<tr>
<td>methotrexate sodium (pf) injection solution</td>
<td>1 or 1b*</td>
<td>SP</td>
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<tr>
<td>methotrexate sodium injection solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>methotrexate sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>methotrexate sodium oral tablet</td>
<td>1 or 1b*; OC</td>
<td>SP</td>
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<tr>
<td>ONUREG ORAL TABLET (azacitidine)</td>
<td>3; OC</td>
<td>PA; LD; QL (14 tablets per 28 days)</td>
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<tr>
<td>PURIXAN ORAL SUSPENSION (mercaptopurine)</td>
<td>3; OC</td>
<td>PA; LD</td>
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<td>TABLOID ORAL TABLET (thioguanine)</td>
<td>2; OC</td>
<td>PA; LD</td>
</tr>
<tr>
<td>TREXALL ORAL TABLET (methotrexate sodium)</td>
<td>2; OC</td>
<td>PA; LD</td>
</tr>
<tr>
<td>VIDAZA INJECTION SUSPENSION RECONSTITUTED (azacitidine)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>XATMEP ORAL SOLUTION (methotrexate)</td>
<td>3; OC</td>
<td>PA; SP</td>
</tr>
<tr>
<td>XELODA ORAL TABLET (capecitabine)</td>
<td>3</td>
<td>PA; SP</td>
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**ANTIMYASTHENIC AGENTS*** - DRUGS FOR NERVES AND MUSCLES

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
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<tbody>
<tr>
<td>BLOXIVERZ INTRAVENOUS SOLUTION (neostigmine methylsulfate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>FIRDAPSE ORAL TABLET (amifampridine phosphate)</td>
<td>5</td>
<td>PA; LD; QL (8 tablets per 1 day)</td>
</tr>
<tr>
<td>GUANIDINE HCL ORAL TABLET</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MESTINON ORAL SOLUTION (pyridostigmine bromide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MESTINON ORAL TABLET (pyridostigmine bromide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MESTINON ORAL TABLET EXTENDED RELEASE (pyridostigmine bromide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NEOSTIGMINE METHYSULFATE INTRAVENOUS SOLUTION 10 MG/10ML, 5 MG/10ML</td>
<td>3</td>
<td></td>
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<tr>
<td>NEOSTIGMINE METHYSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
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</tr>
<tr>
<td>pyridostigmine bromide er oral tablet extended release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pyridostigmine bromide oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pyridostigmine bromide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>REGONOL INTRAVENOUS SOLUTION (pyridostigmine bromide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RUZURGI ORAL TABLET (amifampridine)</td>
<td>5</td>
<td>PA; LD; QL (10 tablets per 1 day)</td>
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**ANTIMYASTHENIC/CHOLINERGIC AGENTS*** - DRUGS FOR NERVES AND MUSCLES

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<th>Requisitos de cobertura y límite</th>
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<td>BLOXIVERZ INTRAVENOUS SOLUTION (neostigmine methylsulfate)</td>
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<tr>
<td>FIRDAPSE ORAL TABLET (amifampridine phosphate)</td>
<td>5</td>
<td>PA; LD; QL (8 tablets per 1 day)</td>
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<tr>
<td>GUANIDINE HCL ORAL TABLET</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MESTINON ORAL SOLUTION (pyridostigmine bromide)</td>
<td>3</td>
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</thead>
<tbody>
<tr>
<td>MESTINON ORAL TABLET (pyridostigmine bromide)</td>
<td>3</td>
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<tr>
<td>MESTINON ORAL TABLET EXTENDED RELEASE (pyridostigmine bromide)</td>
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<td></td>
</tr>
<tr>
<td>NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 10 MG/10ML, 5 MG/10ML</td>
<td>3</td>
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</tr>
<tr>
<td>NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>pyridostigmine bromide er oral tablet extended release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pyridostigmine bromide oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pyridostigmine bromide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>REGONOL INTRAVENOUS SOLUTION (pyridostigmine bromide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RUZURGI ORAL TABLET (amifampridine)</td>
<td>5</td>
<td>PA; LD; QL (10 tablets per 1 day)</td>
</tr>
<tr>
<td><em>ANTIMYCOBACTERIAL AGENTS</em>**</td>
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<tr>
<td>CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED (capreomycin sulfate)</td>
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<tr>
<td>cycloserine oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ethambutol hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>isoniazid injection solution</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>isoniazid oral syrup</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>isoniazid oral tablet</td>
<td>1 or 1a*</td>
<td></td>
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<tr>
<td>MYAMBUTOL ORAL TABLET (ethambutol hcl)</td>
<td>3</td>
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<tr>
<td>MYCOBUTIN ORAL CAPSULE (rifabutin)</td>
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<td>PASER ORAL PACKET (aminosalicylic acid)</td>
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<tr>
<td>PRETOMANID ORAL TABLET</td>
<td>3</td>
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<tr>
<td>PRIFTIN ORAL TABLET (rifapentine)</td>
<td>2</td>
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</tr>
<tr>
<td>pyrazinamide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>rifabutin oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED (rifampin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RIFADIN ORAL CAPSULE (rifampin)</td>
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<td></td>
</tr>
<tr>
<td>rifampin intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>rifampin oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>SIRTURO ORAL TABLET (bedaquiline fumarate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TRECATOR ORAL TABLET (ethionamide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>ANTINEOPLASTIC - AUTOLOGOUS CELLULAR IMMUNOTHERAPY</em>** - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PROVENGE INTRAVENOUS SUSPENSION (sipuleucel-t)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><em>ANTINEOPLASTIC - BRAF KINASE INHIBITORS</em>** - DRUGS FOR CANCER</td>
<td></td>
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</tr>
<tr>
<td>BRAFTOVI ORAL CAPSULE (encorafenib)</td>
<td>3; OC</td>
<td>PA; LD; QL (6 capsules per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>TAFINLAR ORAL CAPSULE <em>(dabrafenib mesylate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>ZELBORAF ORAL TABLET <em>(vemurafenib)</em></td>
<td>2; OC</td>
<td>PA; LD; SP; QL (8 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</strong>* - DRUGS FOR CANCER**</td>
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<tr>
<td>DAURISMO ORAL TABLET 100 MG <em>(glasdegib maleate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>DAURISMO ORAL TABLET 25 MG <em>(glasdegib maleate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ERIVEDGE ORAL CAPSULE <em>(vismodegib)</em></td>
<td>2; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ODOMZO ORAL CAPSULE <em>(sonidegib phosphate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS</strong>* - DRUGS FOR CANCER**</td>
<td></td>
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<tr>
<td>BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED <em>(belinostat)</em></td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>FARYDAK ORAL CAPSULE <em>(panobinostat lactate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ISTODAX (OVERFILL) INTRAVENOUS SOLUTION RECONSTITUTED <em>(romidepsin)</em></td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>ROMIDEPSIN INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ZOLINZA ORAL CAPSULE <em>(vorinostat)</em></td>
<td>2; OC</td>
<td>PA; SP; QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>ANTINEOPLASTIC - IMMUNOMODULATORS</strong>* - DRUGS FOR CANCER**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>POMALYST ORAL CAPSULE 1 MG <em>(pomalidomide)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (5 capsule per 1 day)</td>
</tr>
<tr>
<td>POMALYST ORAL CAPSULE 2 MG <em>(pomalidomide)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 capsules per 1 day)</td>
</tr>
<tr>
<td>POMALYST ORAL CAPSULE 3 MG, 4 MG <em>(pomalidomide)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
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<tr>
<td><strong>ANTINEOPLASTIC - MEK INHIBITORS</strong>* - DRUGS FOR CANCER**</td>
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<tr>
<td>COTELLIC ORAL TABLET <em>(cobimetinib fumarate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>KOSELUGO ORAL CAPSULE 10 MG <em>(selumetinib sulfate)</em></td>
<td>3; OC</td>
<td>PA; LD; QL (8 capsules per 1 day)</td>
</tr>
<tr>
<td>KOSELUGO ORAL CAPSULE 25 MG <em>(selumetinib sulfate)</em></td>
<td>3; OC</td>
<td>PA; LD; QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>MEKINIST ORAL TABLET 0.5 MG <em>(trametinib dimethyl sulfoxide)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>MEKINIST ORAL TABLET 2 MG <em>(trametinib dimethyl sulfoxide)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>MEKTOVI ORAL TABLET <em>(binimetinib)</em></td>
<td>3; OC</td>
<td>PA; LD; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>ANTINEOPLASTIC - MONOCLONAL ANTIBODIES</strong>* - DRUGS FOR CANCER**</td>
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<tr>
<td>ARZERRA INTRAVENOUS CONCENTRATE <em>(ofatumumab)</em></td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>BAVENCIO INTRAVENOUS SOLUTION <em>(avelumab)</em></td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
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<tr>
<td>CAMPATH INTRAVENOUS SOLUTION <em>(alemtuzumab)</em></td>
<td>3</td>
<td></td>
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<tr>
<td>DARZALEX INTRAVENOUS SOLUTION <em>(daratumumab)</em></td>
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<td>PA; LD; SP</td>
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<tr>
<td>EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED <em>(elotuzumab)</em></td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>ERBITUX INTRAVENOUS SOLUTION <em>(cetuximab)</em></td>
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<td>PA; SP</td>
</tr>
<tr>
<td>GAZYVA INTRAVENOUS SOLUTION <em>(obinutuzumab)</em></td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED <em>(trastuzumab)</em></td>
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<td>LD; SP</td>
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<tr>
<td>HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED <em>(trastuzumab-pkrb)</em></td>
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<td>LD; SP</td>
</tr>
<tr>
<td>IMFINZI INTRAVENOUS SOLUTION <em>(durvalumab)</em></td>
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<td>PA; LD; SP</td>
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<tr>
<td>KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED <em>(trastuzumab-anns)</em></td>
<td>3</td>
<td>LD; SP</td>
</tr>
<tr>
<td>KEYTRUDA INTRAVENOUS SOLUTION <em>(pembrolizumab)</em></td>
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<td>PA; LD; SP</td>
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<tr>
<td>LARTRUVO INTRAVENOUS SOLUTION <em>(olaratumab)</em></td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>LIBUTYO INTRAVENOUS SOLUTION <em>(cemiplimab-rwlc)</em></td>
<td>3</td>
<td>PA; LD</td>
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<tr>
<td>LUMOXITI INTRAVENOUS SOLUTION RECONSTITUTED <em>(moxetumomab pasudotox-tdfk)</em></td>
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<td>PA; LD; SP</td>
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<tr>
<td>MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED <em>(tafasitamab-cxix)</em></td>
<td>3</td>
<td>LD</td>
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<tr>
<td>OGVRI INTRAVENOUS SOLUTION RECONSTITUTED <em>(trastuzumab-dkst)</em></td>
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<td>LD; SP</td>
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<tr>
<td>ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED <em>(trastuzumab-dtib)</em></td>
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<td>LD; SP</td>
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<tr>
<td>OPDIVO INTRAVENOUS SOLUTION <em>(nivolumab)</em></td>
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<td>PA; LD; SP</td>
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<tr>
<td>PERJETA INTRAVENOUS SOLUTION <em>(pertuzumab)</em></td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>PORTRAZZA INTRAVENOUS SOLUTION <em>(necitumumab)</em></td>
<td>3</td>
<td>LD; SP</td>
</tr>
<tr>
<td>POTELIGEO INTRAVENOUS SOLUTION <em>(mogamulizumab-kpke)</em></td>
<td>3</td>
<td>LD; SP</td>
</tr>
<tr>
<td>RITUXAN INTRAVENOUS SOLUTION <em>(rituximab)</em></td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>RUXIENCE INTRAVENOUS SOLUTION <em>(rituximab-pvvr)</em></td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>SARCLISA INTRAVENOUS SOLUTION <em>(isatuximab-irfe)</em></td>
<td>3</td>
<td>PA; LD; SP</td>
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<tr>
<td>TECENTRIQ INTRAVENOUS SOLUTION 1200 MG/20ML <em>(atezolizumab)</em></td>
<td>3</td>
<td>PA; LD; SP; QL (1 vial per 21 days)</td>
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<td>TECENTRIQ INTRAVENOUS SOLUTION 840 MG/14ML <em>(atezolizumab)</em></td>
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<td>PA; LD; SP; QL (2 vials per 28 days)</td>
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<td>TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED <em>(trastuzumab-ryyp)</em></td>
<td>3</td>
<td>SP</td>
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<tr>
<td>TRUXIMA INTRAVENOUS SOLUTION <em>(rituximab-abbs)</em></td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>UNITUXIN INTRAVENOUS SOLUTION <em>(dinutuximab)</em></td>
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<td>LD</td>
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<tr>
<td>VECTIBIX INTRAVENOUS SOLUTION <em>(panitumumab)</em></td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>YERVOY INTRAVENOUS SOLUTION <em>(ipilimumab)</em></td>
<td>3</td>
<td>PA; SP</td>
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<tr>
<td><strong>ANTINEOPLASTIC - MTOR KINASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>AFINITOR DISPERZ ORAL TABLET SOLUBLE (<strong>everolimus</strong>)</td>
<td>3; OC</td>
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<tr>
<td>AFINITOR ORAL TABLET 10 MG (<strong>everolimus</strong>)</td>
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<tr>
<td>AFINITOR ORAL TABLET 2.5 MG, 5 MG, 7.5 MG (<strong>everolimus</strong>)</td>
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<td>PA; SP</td>
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<td>everolimus oral tablet 2.5 mg, 5 mg, 7.5 mg</td>
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<td>PA; SP</td>
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<tr>
<td>Temozolimido intravenoso solución</td>
<td>1 or 1b*</td>
<td>PA; SP</td>
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<td>TORISEL INTRAVENOUS SOLUTION (<strong>temsirolimus</strong>)</td>
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<td><strong>ANTINEOPLASTIC - MULTIKINASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>NEXAVAR ORAL TABLET (<strong>sorafenib tosylate</strong>)</td>
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<tr>
<td>RYDAPT ORAL CAPSULE (<strong>midostaurin</strong>)</td>
<td>3; OC</td>
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<td>STIVARGA ORAL TABLET (<strong>regorafenib</strong>)</td>
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<td>SUTENT ORAL CAPSULE 12.5 MG (<strong>sunitinib malate</strong>)</td>
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<td>SUTENT ORAL CAPSULE 25 MG, 37.5 MG, 50 MG (<strong>sunitinib malate</strong>)</td>
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<td><strong>ANTINEOPLASTIC - PROTEASOME INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>BORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED</td>
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<td>KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED (<strong>carfilzomib</strong>)</td>
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<td>NINLARO ORAL CAPSULE (<strong>ixazomib citrate</strong>)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (3 capsule per 28 days)</td>
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<tr>
<td>VELCADE INJECTION SOLUTION RECONSTITUTED (<strong>bortezomib</strong>)</td>
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<td>ALECENSA ORAL CAPSULE (<strong>alectinib hcl</strong>)</td>
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<td>ALUNBRIG ORAL TABLET 180 MG (<strong>brigatinib</strong>)</td>
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<td>ALUNBRIG ORAL TABLET 30 MG (<strong>brigatinib</strong>)</td>
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<td>ALUNBRIG ORAL TABLET 90 MG (<strong>brigatinib</strong>)</td>
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<td>ALUNBRIG ORAL TABLET THERAPY PACK (<strong>brigatinib</strong>)</td>
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<tr>
<td>AYVAKIT ORAL TABLET (<strong>avapritinib</strong>)</td>
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<td>PA; LD; QL (1 tablet per 1 day)</td>
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<tr>
<td>BOSULIF ORAL TABLET 100 MG (<strong>bosutinib</strong>)</td>
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<td>BOSULIF ORAL TABLET 400 MG, 500 MG (<strong>bosutinib</strong>)</td>
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<tr>
<td>BRUKINSA ORAL CAPSULE (<strong>zanubrutinib</strong>)</td>
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<td>CABOOMETYX ORAL TABLET (<strong>cabozeatinib s-malate</strong>)</td>
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<tr>
<td>CALQUENCE ORAL CAPSULE (<strong>acalabrutinib</strong>)</td>
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<tr>
<td>CAPRELSA ORAL TABLET 100 MG (<strong>vandetanib</strong>)</td>
<td>2; OC</td>
<td>PA; LD; QL (3 tablet per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>CAPRELSA ORAL TABLET 300 MG <em>(vandetanib)</em></td>
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<td>PA; LD; QL (1 tablet per 1 day)</td>
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<tr>
<td>COMETRIQ (100 MG DAILY DOSE) ORAL KIT <em>(cabozantinib s-malate)</em></td>
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<td>PA; LD</td>
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<td>COMETRIQ (140 MG DAILY DOSE) ORAL KIT <em>(cabozantinib s-malate)</em></td>
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<td>PA; LD</td>
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<td>COMETRIQ (60 MG DAILY DOSE) ORAL KIT <em>(cabozantinib s-malate)</em></td>
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<tr>
<td>erlotinib hcl oral tablet 100 mg, 150 mg</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
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<td>erlotinib hcl oral tablet 25 mg</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (3 tablets per 1 day)</td>
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<td>GAVRETO ORAL CAPSULE <em>(pralsetinib)</em></td>
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<td>GILOTRIF ORAL TABLET <em>(afatinib dimaleate)</em></td>
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<td>ICLUSIG ORAL TABLET 15 MG <em>(ponatinib hcl)</em></td>
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<td>ICLUSIG ORAL TABLET 45 MG <em>(ponatinib hcl)</em></td>
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<td>imatinib mesylate oral tablet 100 mg</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (8 tablet per 1 day)</td>
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<td>imatinib mesylate oral tablet 400 mg</td>
<td>1 or 1b*; OC</td>
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<tr>
<td>IMBRUVICA ORAL CAPSULE 140 MG <em>(ibrutinib)</em></td>
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<td>IMBRUVICA ORAL CAPSULE 70 MG <em>(ibrutinib)</em></td>
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<td>IMBRUVICA ORAL TABLET <em>(ibrutinib)</em></td>
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<td>PA; LD; QL (1 tablet per 1 day)</td>
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<td>INLYTA ORAL TABLET 1 MG <em>(axitinib)</em></td>
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<td>PA; LD; SP; QL (8 tablet per 1 day)</td>
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<td>INLYTA ORAL TABLET 5 MG <em>(axitinib)</em></td>
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<td>PA; LD; SP; QL (4 tablet per 1 day)</td>
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<td>IRESSA ORAL TABLET <em>(gefitinib)</em></td>
<td>2; OC</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td>lapatinib ditosylate oral tablet</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (6 tablet per 1 day)</td>
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<tr>
<td>LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>PA; LD; SP; QL (30 capsules per 30 days)</td>
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<td>LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>PA; LD; SP; QL (60 capsules per 30 days)</td>
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<td>LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>PA; LD; SP; QL (90 capsules per 30 days)</td>
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<tr>
<td>LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK <em>(lenvatinib mesylate)</em></td>
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<td>PA; LD; SP; QL (1 pack per 30 days)</td>
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<tr>
<td>LORBRENA ORAL TABLET 100 MG <em>(lorlatinib)</em></td>
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<tr>
<td>LORBRENA ORAL TABLET 25 MG <em>(lorlatinib)</em></td>
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<td>PA; LD; SP; QL (3 tablets per 1 day)</td>
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<tr>
<td>NERLYNX ORAL TABLET <em>(neratinib maleate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (6 tablets per 1 day)</td>
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<tr>
<td>QINLOCK ORAL TABLET (ripretinib)</td>
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<td>PA; LD; QL (3 tablets per 1 day)</td>
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<tr>
<td>RETEVMO ORAL CAPSULE 40 MG (selpercatinib)</td>
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<td>RETEVMO ORAL CAPSULE 80 MG (selpercatinib)</td>
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<td>PA; LD; SP; QL (4 capsules per 1 day)</td>
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<td>SPRYCEL ORAL TABLET (dasatinib)</td>
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<td>PA; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td>TABRECTA ORAL TABLET (capmatinib hcl)</td>
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<td>PA; SP; QL (4 tablets per 1 day)</td>
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<td>TAGRISSO ORAL TABLET 40 MG (osimertinib mesylate)</td>
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<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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<td>TAGRISSO ORAL TABLET 80 MG (osimertinib mesylate)</td>
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<td>TARCEVA ORAL TABLET 100 MG, 150 MG (erlotinib hcl)</td>
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<td>TASIGNA ORAL CAPSULE (nilotinib hcl)</td>
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<td>TURALIO ORAL CAPSULE (pexidartinib hcl)</td>
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<td>TYKERB ORAL TABLET (lapatinib ditosylate)</td>
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<td>XALKORI ORAL CAPSULE (crizotinib)</td>
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<td>XOSPATA ORAL TABLET (gilteritinib fumarate)</td>
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<td>ZYKADIA ORAL TABLET (ceritinib)</td>
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*ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL*** - DRUGS FOR THE SKIN*

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<tr>
<td>VALCHLOR EXTERNAL GEL (mechlorethamine hcl (topical))</td>
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*ANTINEOPLASTIC ANTIBIOTICS*** - DRUGS FOR CANCER*

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<tr>
<td>doxorubicin hcl (Adriamycin Intravenous Solution)</td>
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<tr>
<td>adriamycin intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>bleomycin sulfate injection solution reconstituted</td>
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<td>SP</td>
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<tr>
<td>COSMGEN INTRAVENOUS SOLUTION RECONSTITUTED (dactinomycin)</td>
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<td>SP</td>
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<tr>
<td>dactinomycin intravenous solution reconstituted</td>
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<td>SP</td>
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<tr>
<td>DAUNORUBICIN HCL INTRAVENOUS SOLUTION</td>
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<td>SP</td>
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<td>DOXIL INTRAVENOUS INJECTABLE (doxorubicin hcl liposomal)</td>
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<td>SP</td>
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<td>doxorubicin hcl liposomal intravenous injectable</td>
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<tr>
<td>epirubicin hcl intravenous solution</td>
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<td>IDAMYCIN PFS INTRAVENTOUS SOLUTION (<em>idarubicin hcl</em>)</td>
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<td>SP</td>
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<td>*idarubicin hcl intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
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<tr>
<td>JELMYTO SOLUTION RECONSTITUTED (<em>mitomycin</em>)</td>
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<td>PA; LD</td>
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<td>*mitomycin intravenous solution reconstituted</td>
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<td>SP</td>
</tr>
<tr>
<td>*mitoxantrone hcl intravenous concentrate</td>
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<td>SP</td>
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<td><em>mitomycin</em> (Mutamycin Intravenous Solution Reconstituted)</td>
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<td>SP</td>
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<tr>
<td>*valrubicin intravesical solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>VALSTAR INTRAVENTOUS SOLUTION (<em>valrubicin</em>)</td>
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<td>SP</td>
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<td><em>ANTINEOPLASTIC -ANTIBODY FOR RADIOPHARMACEUTICAL THERAPY</em>** - DRUGS FOR CANCER</td>
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<td>ZEVALIN Y-90 INTRAVENTOUS KIT (<em>ibritumomab tiuxetan for y-90</em>)</td>
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<td>PA; LD</td>
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<td><em>ANTINEOPLASTIC ANTIBODY-DRUG COMPLEXES</em>** - DRUGS FOR CANCER</td>
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<td>ADCETRIS INTRAVENTOUS SOLUTION RECONSTITUTED (<em>brentuximab vedotin</em>)</td>
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<td>BESPONSA INTRAVENTOUS SOLUTION RECONSTITUTED (<em>inotuzumab ozogamicin)</em></td>
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<td>KADCYLA INTRAVENTOUS SOLUTION RECONSTITUTED (<em>ado-trastuzumab emtansine)</em></td>
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<td>MYLOTARG INTRAVENTOUS SOLUTION RECONSTITUTED (<em>gemtuzumab ozogamicin)</em></td>
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<td>PADCEV INTRAVENTOUS SOLUTION RECONSTITUTED (<em>enfortumab vedotin-effv)</em></td>
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<td>POLIVY INTRAVENTOUS SOLUTION RECONSTITUTED 140 MG (<em>polatuzumab vedotin-piiq)</em></td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>POLIVY INTRAVENTOUS SOLUTION RECONSTITUTED 30 MG (<em>polatuzumab vedotin-piiq)</em></td>
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<td>PA</td>
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<tr>
<td>TRODELVY INTRAVENTOUS SOLUTION RECONSTITUTED (<em>sacituzumab govitecan-hziy)</em></td>
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<td>PA; LD</td>
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<tr>
<td><em>ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
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</tr>
<tr>
<td>CARAC EXTERNAL CREAM (<em>fluorouracil</em>)</td>
<td>3</td>
<td>ST; QL (30 gm per 365 days)</td>
</tr>
<tr>
<td>EFUDEX EXTERNAL CREAM (<em>fluorouracil</em>)</td>
<td>3</td>
<td>ST; QL (40 gm per 365 days)</td>
</tr>
<tr>
<td>FLUOROPLEX EXTERNAL CREAM (<em>fluorouracil</em>)</td>
<td>3</td>
<td>ST; QL (60 gm per 365 days)</td>
</tr>
<tr>
<td>*fluorouracil external cream 0.5 %</td>
<td>1 or 1b*</td>
<td>ST; QL (30 gm per 365 days)</td>
</tr>
<tr>
<td>*fluorouracil external cream 5 %</td>
<td>1 or 1b*</td>
<td>QL (40 gm per 365 days)</td>
</tr>
<tr>
<td>*fluorouracil external solution</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 365 days)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>TOLAK EXTERNAL CREAM (fluorouracil)</td>
<td>3</td>
<td>ST; QL (40 gm per 365 days)</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTIC COMBINATIONS</strong></em> - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DARZALEX FASPRO SUBCUTANEOUS SOLUTION (daratumumab-hyaluronidase-fihj)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION (trastuzumab-hyaluronidase-oysk)</td>
<td>3</td>
<td>LD; SP</td>
</tr>
<tr>
<td>INQOVI ORAL TABLET (decitabine-cedazuridine)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (5 tablets per 28 days)</td>
</tr>
<tr>
<td>KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK (ribociclib-letrozole)</td>
<td>2; OC</td>
<td>PA; SP; QL (0.04 unit per 1 day)</td>
</tr>
<tr>
<td>KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK (ribociclib-letrozole)</td>
<td>2; OC</td>
<td>PA; SP; QL (0.04 unit per 1 day)</td>
</tr>
<tr>
<td>KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK (ribociclib-letrozole)</td>
<td>2; OC</td>
<td>PA; SP; QL (0.04 unit per 1 day)</td>
</tr>
<tr>
<td>LONSURF ORAL TABLET (trifluridine-tipiracil)</td>
<td>3; OC</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>PHESGO SUBCUTANEOUS SOLUTION (pertuz-trastuz-hyaluron-zzxf)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>RITUXAN HYECEL SUBCUTANEOUS SOLUTION (rituximab-hyaluronidase human)</td>
<td>3</td>
<td>LD; SP</td>
</tr>
<tr>
<td>VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED (daunorubicin-cytarabine lipo)</td>
<td>3</td>
<td>LD</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTIC ENZYMES</strong></em> - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASPARLAS INTRAVENOUS SOLUTION (calaspargase pegol-mknl)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>ERWINAZE INJECTION SOLUTION RECONSTITUTED (asparaginase erwinia chrysanth)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>ONCASPAR INJECTION SOLUTION (pegaspargase)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL MISC.</strong></em> - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PICATO EXTERNAL GEL 0.015 % (ingenol mebutate)</td>
<td>3</td>
<td>ST; QL (3 tube per 365 days)</td>
</tr>
<tr>
<td>PICATO EXTERNAL GEL 0.05 % (ingenol mebutate)</td>
<td>3</td>
<td>ST; QL (2 tube per 365 days)</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAI'DS</strong></em> - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>diclofenac sodium transdermal gel 3 %</td>
<td>1 or 1b*</td>
<td>PA; QL (300 gm per 365 days)</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTIC RADIOPHARMACEUTICALS</strong></em> - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AZEDRA DOSIMETRIC INTRAVENOUS SOLUTION (iobenguane i 131)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>AZEDRA THERAPEUTIC INTRAVENOUS SOLUTION (iobenguane i 131)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>LUTATHERA INTRAVENOUS SOLUTION (lutetium lu 177 dotatate)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>QUADRAMET INTRAVENOUS SOLUTION (samarium sm 153 lexidronam)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>STRONTIUM CHLORIDE SR-89 INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XOFIGO INTRAVENOUS SOLUTION (radium ra 223 dichloride)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><em><strong>ANTINEOPLASTIC RETINOIDS - TOPICAL</strong></em> - DRUGS FOR THE SKIN**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PANRETIN EXTERNAL GEL (alitretinoin)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTICS - INTERLEUKINS</strong></em> - DRUGS FOR CANCER**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ELZONRIS INTRAVENOUS SOLUTION (tagraxofusp-erzs)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED (aldesleukin)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTICS - PHOTOACTIVATED AGENTS</strong></em> - DRUGS FOR CANCER**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED (porfimer sodium)</td>
<td>3</td>
<td>LD</td>
</tr>
<tr>
<td><em><strong>ANTINEOPLASTICS MISC.</strong></em> - DRUGS FOR CANCER**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACTIMMUNE SUBCUTANEOUS SOLUTION (interferon gamma-1b)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>ALFERON N INJECTION SOLUTION (interferon alfa-n3)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>arsenic trioxide intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>dacarbazine intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>HYDREA ORAL CAPSULE (hydroxyurea)</td>
<td>3; OC</td>
<td></td>
</tr>
<tr>
<td>hydroxyurea oral capsule</td>
<td>1 or 1b*; OC</td>
<td></td>
</tr>
<tr>
<td>INTRON A INJECTION SOLUTION (interferon alfa-2b)</td>
<td>5</td>
<td>LD; SP</td>
</tr>
<tr>
<td>INTRON A INJECTION SOLUTION RECONSTITUTED (interferon alfa-2b)</td>
<td>5</td>
<td>LD; SP</td>
</tr>
<tr>
<td>MATULANE ORAL CAPSULE (procarbazine hcl)</td>
<td>2; OC</td>
<td>LD</td>
</tr>
<tr>
<td>NIPENT INTRAVENOUS SOLUTION RECONSTITUTED (pentostatin)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED (omacetaxine mepesuccinate)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED (bcg live)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>TRISENOX INTRAVENOUS SOLUTION (arsenic trioxide)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td><em><strong>ANTIPARKINSON ANTICHOLINERGICS</strong></em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>benztropine mesylate injection solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>benztropine mesylate oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>COGENTIN INJECTION SOLUTION (benztropine mesylate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>trihexyphenidyl hcl oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>trihexyphenidyl hcl oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td><em><strong>ANTIPARKINSON DOPAMINERGICS</strong></em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>amantadine hcl oral capsule</td>
<td>1 or 1b*</td>
<td>QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>amantadine hcl oral syrup</td>
<td>1 or 1b*</td>
<td>QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>amantadine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bromocriptine mesylate oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bromocriptine mesylate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
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<tbody>
<tr>
<td>GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG <em>(amantadine hcl)</em></td>
<td>3</td>
<td>PA; LD; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 68.5 MG <em>(amantadine hcl)</em></td>
<td>3</td>
<td>PA; DO; LD</td>
</tr>
<tr>
<td>INBRIJA INHALATION CAPSULE <em>(levodopa)</em></td>
<td>5</td>
<td>PA; LD; SP; QL (5 kits per 30 days)</td>
</tr>
<tr>
<td>OSMOLEX ER ORAL TABLET ER 24 HOUR THERAPY PACK <em>(amantadine hcl)</em></td>
<td>3</td>
<td>PA; LD; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG <em>(amantadine hcl)</em></td>
<td>3</td>
<td>PA; DO; LD</td>
</tr>
<tr>
<td>OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 193 MG, 258 MG <em>(amantadine hcl)</em></td>
<td>3</td>
<td>PA; LD; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PARLODEL ORAL CAPSULE <em>(bromocriptine mesylate)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PARLODEL ORAL TABLET <em>(bromocriptine mesylate)</em></td>
<td>3</td>
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**ANTIPARKINSON MONOAmine OXIdASE INHIBITORS***

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>AZILECT ORAL TABLET <em>(rasagiline mesylate)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>rasagiline mesylate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>selegiline hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>selegiline hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>XADAGO ORAL TABLET 100 MG <em>(safinamide mesylate)</em></td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>XADAGO ORAL TABLET 50 MG <em>(safinamide mesylate)</em></td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ZELAPAR ORAL TABLET DISPERSIBLE <em>(selegiline hcl)</em></td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
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</tbody>
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**ANTIPERISTALTIC AGENTS***

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<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>diphenoxylate-atropine oral liquid</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>diphenoxylate-atropine oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LOMOTIL ORAL TABLET <em>(diphenoxylate-atropine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>loperamide hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MOTOFEN ORAL TABLET <em>(difenoxin-atropine)</em></td>
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**ANTIPROTOZOAL AGENTS***

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<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>ALINIA ORAL SUSPENSION RECONSTITUTED <em>(nitazoxanide)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ALINIA ORAL TABLET <em>(nitazoxanide)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>atovaquone oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MEPRON ORAL SUSPENSION <em>(atovaquone)</em></td>
<td>3</td>
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**ANTIPRURITICS - TOPICAL*** - DRUGS FOR THE SKIN

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<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>doxepin hcl external cream</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tube per 1 fill)</td>
</tr>
</tbody>
</table>

**ANTIPSRORIATICS - SYSTEMIC*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>acitretin oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE <em>(secukinumab)</em></td>
<td>4</td>
<td>PA; LD; SP; QL (2 syringes per 28 days)</td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td>COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR (secukinumab)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 pens per 28 days)</td>
</tr>
<tr>
<td>COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR (secukinumab)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 pens per 28 days)</td>
</tr>
<tr>
<td>COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (secukinumab)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 syringes per 28 days)</td>
</tr>
<tr>
<td>methoxsalen rapid oral capsule</td>
<td>1 or 1b*; OC</td>
<td>SP</td>
</tr>
<tr>
<td>OXSORALEN ULTRA ORAL CAPSULE (methoxsalen rapid)</td>
<td>3; OC</td>
<td>SP</td>
</tr>
<tr>
<td>SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT (risankizumab-rzaa)</td>
<td>4</td>
<td>PA; SP; QL (2 syringes per 84 days)</td>
</tr>
<tr>
<td>SORIATANE ORAL CAPSULE (acitretin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>STELARA SUBCUTANEOUS SOLUTION (ustekinumab)</td>
<td>4</td>
<td>PA; SP; QL (1 vial per 84 days)</td>
</tr>
<tr>
<td>STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (ustekinumab)</td>
<td>4</td>
<td>PA; SP; QL (1 syringe per 84 days)</td>
</tr>
<tr>
<td>TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR (guselkumab)</td>
<td>4</td>
<td>PA; SP; QL (1 syringe per 47 days)</td>
</tr>
<tr>
<td>TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (guselkumab)</td>
<td>4</td>
<td>PA; SP; QL (1 syringe per 47 days)</td>
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</tbody>
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**ANTIPSORIATICS*** - DRUGS FOR THE SKIN

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<tbody>
<tr>
<td>calcipotriene external cream</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>CALCIPOTRIENE EXTERNAL FOAM</td>
<td>3</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>calcipotriene external ointment</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>calcipotriene external solution</td>
<td>1 or 1b*</td>
<td>QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>calcipotriene (Calcitrene External Ointment)</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>calcitriol external ointment</td>
<td>1 or 1b*</td>
<td>QL (800 grams per 28 days)</td>
</tr>
<tr>
<td>DOVONEX EXTERNAL CREAM (calcipotriene)</td>
<td>3</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>SORILUX EXTERNAL FOAM (calcipotriene)</td>
<td>3</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>tazarotene external cream</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>TAZORAC EXTERNAL CREAM 0.05 % (tazarotene)</td>
<td>2</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>TAZORAC EXTERNAL GEL 0.05 % (tazarotene)</td>
<td>2</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>TAZORAC EXTERNAL GEL 0.1 % (tazarotene)</td>
<td>2</td>
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**ANTIPSYCHOTICS - MISC.***

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<th>Requisitos de cobertura y límite</th>
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<tbody>
<tr>
<td>CAPLYTA ORAL CAPSULE (lumateperone tosylate)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG (carbamazepine (antipsychotic))</td>
<td>3</td>
<td>QL (8 capsules per 1 day)</td>
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<tr>
<td>EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR 300 MG (carbamazepine (antipsychotic))</td>
<td>3</td>
<td>QL (5 capsules per 1 day)</td>
</tr>
<tr>
<td>GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED (ziprasidone mesylate)</td>
<td>3</td>
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<tr>
<td>LATUDA ORAL TABLET 120 MG (lurasidone hcl)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>LATUDA ORAL TABLET 20 MG, 40 MG, 60 MG (lurasidone hcl)</td>
<td>3</td>
<td>DO</td>
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<tbody>
<tr>
<td>LATUDA ORAL TABLET 80 MG (lurasidone hcl)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>NUPLAZID ORAL CAPSULE (pimavanserin tartrate)</td>
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<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
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<tr>
<td>NUPLAZID ORAL TABLET (pimavanserin tartrate)</td>
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<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td>VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG (cariprazine hcl)</td>
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<td>ST; DO</td>
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<tr>
<td>VRAYLAR ORAL CAPSULE 4.5 MG, 6 MG (cariprazine hcl)</td>
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<td>ST</td>
</tr>
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<td>VRAYLAR ORAL CAPSULE THERAPY PACK (cariprazine hcl)</td>
<td>3</td>
<td>ST; QL (1 pack per 1 year)</td>
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<tr>
<td>ziprasidone hcl oral capsule 20 mg, 40 mg</td>
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<td>DO</td>
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<tr>
<td>ziprasidone hcl oral capsule 60 mg, 80 mg</td>
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<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>ziprasidone mesylate intramuscular solution reconstituted</td>
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</tr>
<tr>
<td><em>ANTIRETROVIRAL COMBINATIONS</em>**</td>
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<tr>
<td>abacavir sulfate-lamivudine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>abacavir-lamivudine-zidovudine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>BIKTARVY ORAL TABLET (bictegravir-emtricitab-tenofof)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>CIMDUO ORAL TABLET (lamivudine-tenofovir)</td>
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<tr>
<td>COMBIVIR ORAL TABLET (lamivudine-zidovudine)</td>
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<tr>
<td>COMPLERA ORAL TABLET (emtricitab-rilpivir-tenofovir)</td>
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<td>DELSTRIGO ORAL TABLET (doravirin-lamivudin-tenofof df)</td>
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<tr>
<td>DESCOVY ORAL TABLET (emtricitabine-tenofovir af)</td>
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<tr>
<td>DOVATO ORAL TABLET (dolutegravir-lamivudine)</td>
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<td>efavirenz-lamivudine-tenofovir oral tablet</td>
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<tr>
<td>emtricitabine-tenofovir df oral tablet</td>
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<td>$0 QL (1 tablet per 1 day)</td>
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<td>EPZICOM ORAL TABLET (abacavir sulfate-lamivudine)</td>
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<tr>
<td>EVOTAZ ORAL TABLET (atazanavir-cobicistat)</td>
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<td>GENVOYA ORAL TABLET (elviteg-cobic-emtricit-tenofaf)</td>
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<tr>
<td>JULUCA ORAL TABLET (dolutegravir-rilpivirine)</td>
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<tr>
<td>KALETRA ORAL SOLUTION (lopinavir-ritonavir)</td>
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<td>QL (16 mL per 1 day)</td>
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<tr>
<td>KALETRA ORAL TABLET 100-25 MG (lopinavir-ritonavir)</td>
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<td>QL (10 tablets per 1 day)</td>
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<td>KALETRA ORAL TABLET 200-50 MG (lopinavir-ritonavir)</td>
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<td>QL (4 tablets per 1 day)</td>
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<td>lamivudine-zidovudine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<td>lopinavir-ritonavir oral solution</td>
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<td>ODEFSEY ORAL TABLET (emtricitab-rilpivir-tenofof af)</td>
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<td>PREZCOBIX ORAL TABLET (darunavir-cobicistat)</td>
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<td>STRIBILD ORAL TABLET (elviteg-cobic-emtricit-tenofdf)</td>
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<td>SYMTUZA ORAL TABLET (darun-cobic-emtricit-tenofof)</td>
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<tr>
<td>TEMIXYS ORAL TABLET (lamivudine-tenofovir)</td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>TRIUMEQ ORAL TABLET (abacavir-dolutegravir-lamivud)</td>
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<tr>
<td>TRIZIVIR ORAL TABLET (abacavir-lamivudine-zidovudine)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
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<tr>
<td><strong>ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)</strong>***</td>
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<tr>
<td>SELZENTRY ORAL SOLUTION <em>(maraviroc)</em></td>
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<td>SELZENTRY ORAL TABLET 150 MG, 300 MG <em>(maraviroc)</em></td>
<td>2</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>SELZENTRY ORAL TABLET 25 MG <em>(maraviroc)</em></td>
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<td>QL (8 tablets per 1 day)</td>
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<tr>
<td>SELZENTRY ORAL TABLET 75 MG <em>(maraviroc)</em></td>
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<td>QL (2 tablets per 1 day)</td>
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<tr>
<td><strong>ANTIRETROVIRALS - FUSION INHIBITORS</strong>*</td>
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<tr>
<td>FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED <em>(enfuvirtide)</em></td>
<td>2</td>
<td>PA; QL (60 vials per 30 days)</td>
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<td><strong>ANTIRETROVIRALS - INTEGRASE INHIBITORS</strong>*</td>
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<td>ISENTRESS HD ORAL TABLET <em>(raltegravir potassium)</em></td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ISENTRESS ORAL PACKET <em>(raltegravir potassium)</em></td>
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<td>ISENTRESS ORAL TABLET <em>(raltegravir potassium)</em></td>
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<tr>
<td>ISENTRESS ORAL TABLET CHEWABLE 100 MG <em>(raltegravir potassium)</em></td>
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<td>QL (6 tablets per 1 day)</td>
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<td>ISENTRESS ORAL TABLET CHEWABLE 25 MG <em>(raltegravir potassium)</em></td>
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<td>TIVICAY ORAL TABLET 10 MG <em>(dolutegravir sodium)</em></td>
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<tr>
<td>TIVICAY ORAL TABLET 25 MG, 50 MG <em>(dolutegravir sodium)</em></td>
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<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>TIVICAY PD ORAL TABLET SOLUBLE <em>(dolutegravir sodium)</em></td>
<td>3</td>
<td>QL (12 tablets per 1 day)</td>
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<tr>
<td><strong>ANTIRETROVIRALS - PROTEASE INHIBITORS</strong>*</td>
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<tr>
<td>APTIVUS ORAL CAPSULE <em>(tipranavir)</em></td>
<td>2</td>
<td>PA; QL (4 capsules per 1 day)</td>
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<tr>
<td>APTIVUS ORAL SOLUTION <em>(tipranavir)</em></td>
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<td>PA; QL (13 mL per 1 day)</td>
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<td>atazanavir sulfate oral capsule 150 mg, 200 mg</td>
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<tr>
<td>atazanavir sulfate oral capsule 300 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>CRIXIVAN ORAL CAPSULE 200 MG <em>(indinavir sulfate)</em></td>
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<td>QL (12 capsules per 1 day)</td>
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<tr>
<td>CRIXIVAN ORAL CAPSULE 400 MG <em>(indinavir sulfate)</em></td>
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<td>QL (6 capsules per 1 day)</td>
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<td>fosamprenavir calcium oral tablet</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>INVIRASE ORAL TABLET <em>(saquinavir mesylate)</em></td>
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<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>LEXIVA ORAL SUSPENSION <em>(fosamprenavir calcium)</em></td>
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<td>QL (60 mL per 1 day)</td>
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<tr>
<td>LEXIVA ORAL TABLET <em>(fosamprenavir calcium)</em></td>
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<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>NORVIR ORAL PACKET <em>(ritonavir)</em></td>
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<td>QL (12 packets per 1 day)</td>
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<td>NORVIR ORAL SOLUTION <em>(ritonavir)</em></td>
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<td>QL (16 mL per 1 day)</td>
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<tr>
<td>NORVIR ORAL TABLET <em>(ritonavir)</em></td>
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<td>QL (12 tablets per 1 day)</td>
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<tr>
<td>PREZISTA ORAL SUSPENSION <em>(darunavir ethanolate)</em></td>
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<td>PREZISTA ORAL TABLET 150 MG <em>(darunavir ethanolate)</em></td>
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<td>QL (6 tablets per 1 day)</td>
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<tr>
<td>PREZISTA ORAL TABLET 600 MG <em>(darunavir ethanolate)</em></td>
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<td>PREZISTA ORAL TABLET 75 MG <em>(darunavir ethanolate)</em></td>
<td>2</td>
<td>QL (10 tablets per 1 day)</td>
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<tr>
<td>PREZISTA ORAL TABLET 800 MG <em>(darunavir ethanolate)</em></td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>REYATAZ ORAL CAPSULE 150 MG, 200 MG <em>(atazanavir sulfate)</em></td>
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<td>QL (2 capsules per 1 day)</td>
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<tr>
<td>REYATAZ ORAL CAPSULE 300 MG <em>(atazanavir sulfate)</em></td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
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<tr>
<td>REYATAZ ORAL PACKET (<em>atazanavir sulfate</em>)</td>
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<td>QL (5 packets per 1 day)</td>
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<tr>
<td>ritonavir oral tablet</td>
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<tr>
<td>VIRACEPT ORAL TABLET 250 MG (<em>nelfinavir mesylate</em>)</td>
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<tr>
<td>VIRACEPT ORAL TABLET 625 MG (<em>nelfinavir mesylate</em>)</td>
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<td>QL (4 tablets per 1 day)</td>
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<tr>
<td><em>ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES</em>**</td>
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<tr>
<td>EDURANT ORAL TABLET (<em>rilpivirine hcl</em>)</td>
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<td>efavirenz oral capsule 200 mg</td>
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<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>efavirenz oral capsule 50 mg</td>
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<tr>
<td>efavirenz oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>INTELENCE ORAL TABLET 25 MG (<em>etravirine</em>)</td>
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<td>PA; QL (16 tablets per 1 day)</td>
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<tr>
<td>nevirapine er oral tablet extended release 24 hour 400 mg</td>
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<td>nevirapine oral suspension</td>
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<td>nevirapine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<td>PIFELTRO ORAL TABLET (<em>doravirine</em>)</td>
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<td>SUSTIVA ORAL CAPSULE 200 MG (<em>efavirenz</em>)</td>
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<td>QL (4 capsules per 1 day)</td>
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<tr>
<td>SUSTIVA ORAL CAPSULE 50 MG (<em>efavirenz</em>)</td>
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<td>VIRAMUNE ORAL SUSPENSION (<em>nevirapine</em>)</td>
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<td><em>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES</em>**</td>
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<tr>
<td>abacavir sulfate oral solution</td>
<td>1 or 1b*</td>
<td>QL (32 mL per 1 day)</td>
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<td>abacavir sulfate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<td>didanosine oral capsule delayed release 200 mg</td>
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<td>didanosine oral capsule delayed release 250 mg, 400 mg</td>
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<td>QL (1 capsule per 1 day)</td>
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<td>ZIAGEN ORAL SOLUTION (<em>abacavir sulfate</em>)</td>
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<tr>
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<td>QL (2 tablets per 1 day)</td>
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<td><em>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES</em>**</td>
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<td>emtricitabine oral capsule</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>EMTRIVA ORAL CAPSULE (<em>emtricitabine</em>)</td>
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<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>EMTRIVA ORAL SOLUTION (<em>emtricitabine</em>)</td>
<td>2</td>
<td>QL (29 mL per 1 day)</td>
</tr>
<tr>
<td>EPIVIR ORAL SOLUTION (<em>lamivudine</em>)</td>
<td>3</td>
<td>QL (32 mL per 1 day)</td>
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<tr>
<td>EPIVIR ORAL TABLET 150 MG (lamivudine)</td>
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<td>EPIVIR ORAL TABLET 300 MG (lamivudine)</td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>lamivudine oral solution</td>
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<td>QL (32 mL per 1 day)</td>
</tr>
<tr>
<td>lamivudine oral tablet 150 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>lamivudine oral tablet 300 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<td>RETROVIR ORAL CAPSULE (zidovudine)</td>
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<td>QL (6 capsules per 1 day)</td>
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<td>RETROVIR ORAL SYRUP (zidovudine)</td>
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<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
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<tr>
<td>stavudine oral capsule 30 mg, 40 mg</td>
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<td>ZERIT ORAL CAPSULE (stavudine)</td>
<td>3</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>zidovudine oral capsule</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>zidovudine oral syrup</td>
<td>1 or 1b*</td>
<td>QL (64 mL per 1 day)</td>
</tr>
<tr>
<td>zidovudine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>tenofovir disoproxil fumarate oral tablet</td>
<td>1 or 1b*; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>VIREAD ORAL POWDER (tenofovir disoproxil fumarate)</td>
<td>2</td>
<td>QL (8 grams per 1 day)</td>
</tr>
<tr>
<td>VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG (tenofovir disoproxil fumarate)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR (upadacitinib)</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>XELJANZ ORAL TABLET (tofacitinib citrate)</td>
<td>4</td>
<td>PA; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG (tofacitinib citrate)</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG (tofacitinib citrate)</td>
<td>4</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>ANTIRHEUMATIC ANTIMETABOLITES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>METHOTREXATE (ANTI-RHEUMATIC) ORAL TABLET</td>
<td>2; OC</td>
<td></td>
</tr>
<tr>
<td>Otrexup subcutaneous solution auto-injector (methotrexate (anti-rheumatic))</td>
<td>5</td>
<td>PA; SP; QL (4 auto-injector per 28 days)</td>
</tr>
<tr>
<td>Rasuvo subcutaneous solution auto-injector (methotrexate (anti-rheumatic))</td>
<td>4</td>
<td>PA; SP; QL (4 auto-injector per 28 days)</td>
</tr>
<tr>
<td><strong>ANTISEBORRHEIC COMBINATIONS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sodium sulfacetamide wash external liquid</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>ANTISEBORRHEIC PRODUCTS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ovace wash external liquid (sulfacetamide sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>selenium sulfide external lotion</td>
<td>1 or 1a*</td>
<td>QL (120 mL per 30 days)</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>sodium sulfacetamide external shampoo</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>ANTISEPTICS - MOUTH/THROAT</em>** - DRUGS FOR THE MOUTH AND THROAT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>chlorhexidine gluconate mouth/throat solution</td>
<td>1 or 1a*</td>
<td>QL (480 mL per 30 days)</td>
</tr>
<tr>
<td>chlorhexidine gluconate (Paroex Mouth/Throat Solution)</td>
<td>1 or 1a*</td>
<td>QL (480 mL per 30 days)</td>
</tr>
<tr>
<td>PERIDEX MOUTH/THROAT SOLUTION (chlorhexidine gluconate)</td>
<td>3</td>
<td>QL (480 mL per 30 days)</td>
</tr>
<tr>
<td>chlorhexidine gluconate (Periogard Mouth/Throat Solution)</td>
<td>1 or 1a*</td>
<td>QL (480 mL per 30 days)</td>
</tr>
<tr>
<td><em>ANTISEPTICS &amp; DISINFECTANTS</em>** - ANTISEPTICS AND DISINFECTANTS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>formaldehyde external solution 10 %</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>FORMALDEHYDE EXTERNAL SOLUTION 37 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GLUTARALDEHYDE EXTERNAL SOLUTION</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><em>ANTISPASMODICS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BENTYL INTRAMUSCULAR SOLUTION (dicyclomine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>dicyclomine hcl intramuscular solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>dicyclomine hcl oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>dicyclomine hcl oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>dicyclomine hcl oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td><em>ANTITHYROID AGENTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>methimazole oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>propylthiouracil oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>TAPAZOLE ORAL TABLET (methimazole)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT</td>
<td>4</td>
<td>PA; SP; QL (2 EA per 28 days)</td>
</tr>
<tr>
<td>(adalimumab)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 EA per 28 days)</td>
</tr>
<tr>
<td>HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 pens per 28 days)</td>
</tr>
<tr>
<td>HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (1 kit per 365 days)</td>
</tr>
<tr>
<td>HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 syringes per 28 days)</td>
</tr>
<tr>
<td>HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (1 kit per 365 days)</td>
</tr>
<tr>
<td>HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML &amp; 40MG/0.4ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 syringes per 28 days)</td>
</tr>
<tr>
<td>HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 EA per 28 days)</td>
</tr>
<tr>
<td>HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 syringes per 28 days)</td>
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<td></td>
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<td>PA; SP; QL (2 EA per 28 days)</td>
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<tr>
<td>HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 pens per 28 days)</td>
</tr>
<tr>
<td>HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (adalimumab)</td>
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<td>PA; SP; QL (1 kit per 365 days)</td>
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<td>4</td>
<td>PA; SP; QL (2 syringes per 28 days)</td>
</tr>
<tr>
<td>HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 EA per 28 days)</td>
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<tr>
<td>HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML (adalimumab)</td>
<td>4</td>
<td>PA; SP; QL (2 syringes per 28 days)</td>
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<tr>
<td><em>ANTITOXINS-ANTIVENINS</em>** - BIOLOGICAL AGENTS</td>
<td></td>
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<tr>
<td>ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED (centruroides (scorpion) im fab)</td>
<td>3</td>
<td></td>
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<tr>
<td>ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED (crotalidae immune fab (equine))</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ANTIVENIN LATRODECTUS MACTANS INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ANTIVENIN MICRURUS FULVIUS INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CROFAB INTRAVENOUS SOLUTION RECONSTITUTED (crotalidae polyval immune fab)</td>
<td>3</td>
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</tr>
<tr>
<td><em>ANTITUSSIVE - NONNARCOTIC</em>**</td>
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</tr>
<tr>
<td>benzonatate oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>TESSALON PERLES ORAL CAPSULE (benzonatate)</td>
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<td></td>
</tr>
<tr>
<td><em>ANTITUSSIVE - OPIOID</em>**</td>
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</tr>
<tr>
<td>hydrocodone-homatropine oral syrup</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>hydrocodone-homatropine oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>hydromet oral syrup</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td><em>ANTITUSSIVE-EXPECTORANT</em>**</td>
<td></td>
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</tr>
<tr>
<td>cheratussin ac oral syrup</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>CODITUSSIN AC ORAL LIQUID</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>g tussin ac oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>guaiatussin ac oral syrup</td>
<td>1 or 1a*</td>
<td></td>
</tr>
</tbody>
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<tr>
<td>guaifenesin ac oral syrup</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>guaifenesin-codeine oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>MAR-COF CG EXPECTORANT ORAL LIQUID (guaifenesin-codeine)</td>
<td>2</td>
<td></td>
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<tr>
<td>maxi-tuss ac oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>M-CLEAR WC ORAL SOLUTION</td>
<td>2</td>
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<tr>
<td>NINJACOF-XG ORAL LIQUID (guaifenesin-codeine)</td>
<td>3</td>
<td></td>
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<tr>
<td>trymine cg oral liquid</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>virtussin a/c oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>virtussin ac w/alc oral liquid</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td><em>ANTITUSSIVE-EXPECTORANTS-DECONGESTANT</em>**</td>
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<td></td>
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<tr>
<td>CODITUSSIN DAC ORAL LIQUID</td>
<td>3</td>
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</tr>
<tr>
<td>GILTUSS TR ORAL TABLET (phenylephrine-dm-gg)</td>
<td>2</td>
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</tr>
<tr>
<td>TUSNEL C ORAL SYRUP (pseudoephedrine-codeine-gg)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>virtussin dac oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>ANTIVIRAL MONOCLONAL ANTIBODIES</em>** - BIOLOGICAL AGENTS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SYNAGIS INTRAMUSCULAR SOLUTION (palivizumab)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td><em>ANTIVIRAL TOPICAL COMBINATIONS</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>XERESE EXTERNAL CREAM (acyclovir-hydrocortisone)</td>
<td>3</td>
<td>PA; QL (5 gm per 30 days)</td>
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<tr>
<td><em>ANTIVIRALS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>acyclovir external cream</td>
<td>1 or 1b*</td>
<td>PA; QL (5 gm per 30 days)</td>
</tr>
<tr>
<td>acyclovir external ointment</td>
<td>1 or 1b*</td>
<td>QL (30 gm per 30 days)</td>
</tr>
<tr>
<td>DENAVIR EXTERNAL CREAM (penciclovir)</td>
<td>3</td>
<td>PA; QL (5 gm per 30 days)</td>
</tr>
<tr>
<td>ZOVIRAX EXTERNAL OINTMENT (acyclovir)</td>
<td>3</td>
<td>QL (30 gm per 30 days)</td>
</tr>
<tr>
<td><em>AROMATASE INHIBITORS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>anastrozole oral tablet</td>
<td>1 or 1b*; OC; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>AROMASIN ORAL TABLET (exemestane)</td>
<td>3; OC</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>exemestane oral tablet</td>
<td>1 or 1b*; OC; $0</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>FEMARA ORAL TABLET (letrozole)</td>
<td>3; OC</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>letrozole oral tablet</td>
<td>1 or 1b*; OC; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>ARTICULAR CARTILAGE REPAIR THERAPY</em>** - DRUGS FOR MUSCLES,</td>
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<tr>
<td>LIGAMENTS, TENDONS, AND BONES</td>
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<tr>
<td>CARTICEL INTRA-ARTICULAR IMPLANT (autologous culture</td>
<td>3</td>
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<tr>
<td>chondrocyte)</td>
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<tr>
<td><em>ASSORTED CLASSES</em>** - VITAMINS AND MINERALS</td>
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<tr>
<td>NEXAVIR INJECTION SOLUTION (liver derivative complex)</td>
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<tr>
<td><em>AZITHROMYCIN</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>azithromycin intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tr>
<td>azithromycin oral packet</td>
<td>1 or 1b*</td>
<td>QL (2 packets per 30 days)</td>
</tr>
<tr>
<td>azithromycin oral suspension reconstituted 100 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (15 ML per 30 days)</td>
</tr>
<tr>
<td>azithromycin oral suspension reconstituted 200 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>azithromycin oral tablet 250 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 30 days)</td>
</tr>
<tr>
<td>azithromycin oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 30 days)</td>
</tr>
<tr>
<td>azithromycin oral tablet 600 mg</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 28 days)</td>
</tr>
<tr>
<td>ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED (azithromycin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ZITHROMAX ORAL PACKET (azithromycin)</td>
<td>3</td>
<td>QL (2 packets per 30 days)</td>
</tr>
<tr>
<td>ZITHROMAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML (azithromycin)</td>
<td>3</td>
<td>QL (15 ML per 30 days)</td>
</tr>
<tr>
<td>ZITHROMAX ORAL SUSPENSION RECONSTITUTED 200 MG/5ML (azithromycin)</td>
<td>3</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>ZITHROMAX ORAL TABLET 250 MG (azithromycin)</td>
<td>3</td>
<td>QL (6 tablets per 30 days)</td>
</tr>
<tr>
<td>ZITHROMAX ORAL TABLET 500 MG (azithromycin)</td>
<td>3</td>
<td>QL (3 tablets per 30 days)</td>
</tr>
<tr>
<td>ZITHROMAX TRI-PAK ORAL TABLET (azithromycin)</td>
<td>3</td>
<td>QL (3 tablets per 30 days)</td>
</tr>
<tr>
<td>ZITHROMAX Z-PAK ORAL TABLET (azithromycin)</td>
<td>3</td>
<td>QL (6 tablets per 30 days)</td>
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</table>

**BACTERIAL VACCINES***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED (haemophilus b polysac conj vac)</td>
<td>3; $0</td>
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<tr>
<td>BCG VACCINE INJECTION INJECTABLE</td>
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<tr>
<td>BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE (meningococcal b recomb omv adj)</td>
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<tr>
<td>BIOTHRAX INTRAMUSCULAR SUSPENSION (anthrax vaccine adsorbed)</td>
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<tr>
<td>HIBERIX INJECTION SOLUTION RECONSTITUTED (haemophilus b polysac conj vac)</td>
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<tr>
<td>MENACTRA INTRAMUSCULAR INJECTABLE (meningococcal a c y&amp;w-135 conj)</td>
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<tr>
<td>MENQUADFI INTRAMUSCULAR INJECTABLE (meningococcal a c y&amp;w-135 conj)</td>
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<td>MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED (meningococcal a c y&amp;w-135 olig)</td>
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<td>PEDVAX HIB INTRAMUSCULAR SUSPENSION (haemophilus b polysac conj vac)</td>
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<tr>
<td>PNEUMOVAX 23 INJECTION INJECTABLE (pneumococcal vac polyvalent)</td>
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<tr>
<td>PREVNAR 13 INTRAMUSCULAR SUSPENSION (pneumococcal 13-val conj vac)</td>
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<tr>
<td>TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE (meningococcal b vac (recomb))</td>
<td>3; $0</td>
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<tr>
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<tbody>
<tr>
<td>TYPHIM VI INTRAMUSCULAR SOLUTION (typhoid vi polysaccharide vacc)</td>
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<td>VAXCHORA ORAL SUSPENSION RECONSTITUTED (cholera vac live attenuated)</td>
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<td>VIVOTIF ORAL CAPSULE DELAYED RELEASE (typhoid vaccine)</td>
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<td><strong>BARBITURATE ANESTHETICS</strong>*</td>
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<td>BREVITAL SODIUM INJECTION SOLUTION RECONSTITUTED (methohexital sodium)</td>
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<td><strong>BARBITURATE HYPNOTICS</strong>*</td>
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<tr>
<td>NEMBUTAL INJECTION SOLUTION (pentobarbital sodium)</td>
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<tr>
<td>pentobarbital sodium injection solution</td>
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<tr>
<td>phenobarbital oral elixir</td>
<td>1 or 1b*</td>
<td>QL (100 mL per 1 day)</td>
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<tr>
<td>phenobarbital oral solution</td>
<td>1 or 1b*</td>
<td>QL (100 mL per 1 day)</td>
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<tr>
<td>phenobarbital oral tablet 100 mg</td>
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<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>phenobarbital oral tablet 15 mg</td>
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<td>QL (800 tablets per 30 days)</td>
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<tr>
<td>phenobarbital oral tablet 16.2 mg</td>
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<td>QL (741 tablets per 30 days)</td>
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<tr>
<td>b complex-b12 oral tablet</td>
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<tr>
<td>ra b-complex oral tablet</td>
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<tr>
<td>ra b-complex with b-12 oral tablet</td>
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</tr>
<tr>
<td>vitamin b complex oral tablet</td>
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<tr>
<td>vitamin b-complex oral tablet</td>
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<tr>
<td>vitamin-b complex oral tablet</td>
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<td><strong>B-COMPLEX W/ C &amp; CALCIUM</strong>* - DRUGS FOR NUTRITION</td>
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<td>gnp b-complex plus vitamin c oral tablet</td>
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</tr>
<tr>
<td>qc b-complex/vitamin c oral tablet</td>
<td>1 or 1b*; $0</td>
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<tr>
<td><strong>B-COMPLEX W/ C &amp; FOLIC ACID</strong>* - DRUGS FOR NUTRITION</td>
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<td>b-complex balanced oral tablet</td>
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<tr>
<td>b-complex/vitamin c oral tablet</td>
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<tr>
<td>b-plex oral tablet</td>
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<td>dialyvite 800 oral tablet</td>
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<td>folbee plus oral tablet</td>
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<td>rena-vite oral tablet</td>
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<td>sm b super vitamin complex oral tablet</td>
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<tr>
<td>super b-complex/vit c/fa oral tablet</td>
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<tr>
<td>triphrocaps oral capsule</td>
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<tr>
<td>virt-caps oral capsule</td>
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<tr>
<td>VITALINE BIOTIN FORTE ORAL TABLET (b complex-c-folic acid)</td>
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<td>WEST-VITE W/FOLIC ACID ORAL TABLET</td>
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<td><strong>B-COMPLEX W/ C</strong>* - DRUGS FOR NUTRITION</td>
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<td>allbee/c oral tablet</td>
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<td>b complex-c oral tablet</td>
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<td>b-complex-c oral tablet</td>
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<td>better b complex oral tablet</td>
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<tr>
<td>cvs super b complex/c oral tablet</td>
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<tbody>
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<tr>
<td>sm super b complex/c oral tablet</td>
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<td>sm vitamin b complex/vitamin c oral tablet</td>
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<td>super b complex/vitamin c oral tablet</td>
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<tr>
<td><em>B-COMPLEX W/ C-BIOTIN-E &amp; FOLIC ACID</em>** - DRUGS FOR NUTRITION</td>
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<td><em>B-COMPLEX W/ C-BIOTIN-E-FOLIC ACID &amp; IRON</em>** - DRUGS FOR NUTRITION</td>
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<td>balanced b-100 oral tablet extended release</td>
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</tbody>
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<td>1 or 1b*; $0</td>
<td></td>
</tr>
</tbody>
</table>

*BELLADONNA ALKALOIDS***

| ANASPAZ ORAL TABLET DISPERSIBLE (hyoscyamine sulfate) | 3 |
| ATROPEN INTRAMUSCULAR SOLUTION AUTO-INJECTOR (atropine sulfate) | 3 |
| ATROPINE SULFATE INJECTION SOLUTION 8 MG/20ML | 3 |
| atropine sulfate injection solution prefilled syringe 0.25 mg/5ml, 1 mg/10ml | 1 or 1b* |

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

En vigencia desde el 01/01/2021
<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 MG/2.5ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>hyoscynamine sulfate er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hyoscynamine sulfate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hyoscynamine sulfate oral tablet dispersible</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hyoscynamine sulfate sl sublingual tablet sublingual</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hyoscynamine sulfate sublingual tablet sublingual</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>BENZATHIAZOLES</em>** - DRUGS FOR NERVES AND MUSCLES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RILUTEK ORAL TABLET (riluzole)</td>
<td>5</td>
<td>SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>riluzole oral tablet</td>
<td>4</td>
<td>SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>TIGLUTIK ORAL SUSPENSION (riluzole)</td>
<td>5</td>
<td>LD</td>
</tr>
<tr>
<td><em>BENZISOXAZOLES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FANAPT ORAL TABLET 1 MG, 2 MG, 4 MG, 6 MG (iloperidone)</td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>FANAPT ORAL TABLET 10 MG, 12 MG, 8 MG (iloperidone)</td>
<td>3</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>FANAPT TITRATION PACK ORAL TABLET (iloperidone)</td>
<td>3</td>
<td>ST; QL (1 pack per 1 year)</td>
</tr>
<tr>
<td>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE (paliperidone palmitate)</td>
<td>3</td>
<td>QL (1 syringe per 28 days)</td>
</tr>
<tr>
<td>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE (paliperidone palmitate)</td>
<td>3</td>
<td>QL (1 syringe per 90 days)</td>
</tr>
<tr>
<td>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>paliperidone er oral tablet extended release 24 hour 6 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>paliperidone er oral tablet extended release 24 hour 9 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PERSERIS SUBCUTANEOUS PREFILLED SYRINGE (risperdone)</td>
<td>3</td>
<td>QL (1 syringe per 30 days)</td>
</tr>
<tr>
<td>RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG (risperidone microspheres)</td>
<td>2</td>
<td>QL (2 injections per 1 day)</td>
</tr>
<tr>
<td>RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG, 37.5 MG, 50 MG (risperidone microspheres)</td>
<td>2</td>
<td>QL (2 injections per 28 days)</td>
</tr>
<tr>
<td>risperidone oral solution</td>
<td>1 or 1b*</td>
<td>ST; QL (8 mL per 1 day)</td>
</tr>
<tr>
<td>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>risperidone oral tablet 3 mg, 4 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>risperidone oral tablet dispersible 3 mg, 4 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td><em>BENZODIAZEPINE ANTAGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>flumazenil intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>BENZODIAZEPINE HYPNOTICS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DORAL ORAL TABLET (quazepam)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>estazolam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>flurazepam hcl oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>HALCION ORAL TABLET (triazolam)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>midazolam hcl (pf) injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>midazolam hcl injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>midazolam hcl oral syrup</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
<td>100-0.8 MG/100ML-%, 50-0.8 MG/50ML-%, 50-0.9 MG/50ML-%</td>
<td>3</td>
</tr>
<tr>
<td>MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MIDAZOLAM INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MIDAZOLAM-SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>quazepam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>RESTORIL ORAL CAPSULE (temazepam)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>temazepam oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>triazolam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

*BENZODIAZEPINES & TRICYCLIC AGENTS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>chlor Diazepam- Amitriptyline oral tablet</td>
<td>1 or 1b*</td>
<td></td>
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</tbody>
</table>

*BENZODIAZEPINES***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>alprazolam er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ALPRAZOLAM INTENSOL ORAL CONCENTRATE (alprazolam)</td>
<td>3</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>alprazolam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>alprazolam oral tablet dispersible</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>alprazolam xr oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>chlor Diazepam- Hcl oral capsule</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>clorazepate dipotassium oral tablet</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>diazepam injection solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>diazepam (Diazepam Intensol Oral Concentrate)</td>
<td>1 or 1a*</td>
<td>QL (8 mL per 1 day)</td>
</tr>
<tr>
<td>DIAZEPAM INTRAMUSCULAR SOLUTION AUTO-INJECTOR</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>diazepam oral concentrate</td>
<td>1 or 1a*</td>
<td>QL (8 mL per 1 day)</td>
</tr>
<tr>
<td>diazepam oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>diazepam oral tablet</td>
<td>1 or 1a*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>lorazepam injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lorazepam (Lorazepam Intensol Oral Concentrate)</td>
<td>1 or 1b*</td>
<td>QL (3 mL per 1 day)</td>
</tr>
<tr>
<td>lorazepam oral concentrate 2 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (3 mL per 1 day)</td>
</tr>
<tr>
<td>lorazepam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>oxazepam oral capsule</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
</tbody>
</table>

*BETA ADRENERGICS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
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</tr>
</thead>
<tbody>
<tr>
<td>albuterol sulfate er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>albuterol sulfate hfa inhalation aerosol solution</td>
<td>1 or 1b*</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml</td>
<td>1 or 1b*</td>
<td>QL (360 mL per 30 days)</td>
</tr>
<tr>
<td>ALBUTEROL SULFATE INHALATION NEBULIZATION SOLUTION (5 MG/ML) 0.5%</td>
<td>3</td>
<td>QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml</td>
<td>1 or 1b*</td>
<td>QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>albuterol sulfate oral syrup</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>albuterol sulfate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ARCAPTA NEOHALER INHALATION CAPSULE (indacaterol maleate)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>BROVANA INHALATION NEBULIZATION SOLUTION (arformoterol tartrate)</td>
<td>3</td>
<td>QL (60 vial per 30 days)</td>
</tr>
<tr>
<td>isoproterenol hcl injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ISUPREL INJECTION SOLUTION (isoproterenol hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>levalbuterol hcl inhalation nebulization solution</td>
<td>1 or 1b*</td>
<td>QL (90 mL per 30 days)</td>
</tr>
<tr>
<td>levalbuterol tartrate inhalation aerosol</td>
<td>1 or 1b*</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>metaproterenol sulfate oral syrup</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>PERFOROMIST INHALATION NEBULIZATION SOLUTION (formoterol fumarate)</td>
<td>2</td>
<td>QL (120 ML per 30 days)</td>
</tr>
<tr>
<td>PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED (albuterol sulfate)</td>
<td>3</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>PROAIR HFA INHALATION AEROSOL SOLUTION (albuterol sulfate)</td>
<td>2</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED (albuterol sulfate)</td>
<td>2</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>PROVENTIL HFA INHALATION AEROSOL SOLUTION (albuterol sulfate)</td>
<td>3</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED (salmeterol xinafoate)</td>
<td>2</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION (olodaterol hcl)</td>
<td>3</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>terbutaline sulfate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>terbutaline sulfate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>VENTOLIN HFA INHALATION AEROSOL SOLUTION (albuterol sulfate)</td>
<td>2</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>XOPENEX HFA INHALATION AEROSOL (levalbuterol tartrate)</td>
<td>3</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
</tbody>
</table>

**BETA BLOCKER & DIURETIC COMBINATIONS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos en el plan</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>atenolol-chlorthalidone oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bisoprolol-hydrochlorothiazide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR (metoprolol-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>LOPRESSOR HCT ORAL TABLET (metoprolol-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 50-25 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>metoprolol-hydrochlorothiazide oral tablet 100-50 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>propranolol-hctz oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>TENORETIC 100 ORAL TABLET (atenolol-chlorthalidone)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TENORETIC 50 ORAL TABLET (atenolol-chlorthalidone)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ZIAC ORAL TABLET (bisoprolol-hydrochlorothiazide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>BETA BLOCKERS CARDIO-SELECTIVE</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>acebutolol hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>atenolol oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>betaxolol hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bisoprolol fumarate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BREVIBLOC IN NACL INTRAVENOUS SOLUTION (esmolol hcl-sodium chloride)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BREVIBLOC INTRAVENOUS SOLUTION (esmolol hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION (esmolol hcl-sodium chloride)</td>
<td>3</td>
<td></td>
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<tr>
<td>BREVIBLOC PREMIXED INTRAVENOUS SOLUTION (esmolol hcl-sodium chloride)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 5 MG (nebivolol hcl)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>BYSTOLIC ORAL TABLET 20 MG (nebivolol hcl)</td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>esmolol hcl intravenous solution 100 mg/10ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>esmolol hcl-sodium chloride intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>FIRST - METOPROLOL ORAL SOLUTION (metoprolol tartrate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 25 MG, 50 MG (metoprolol succinate)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE 200 MG (metoprolol succinate)</td>
<td>3</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>metoprolol succinate er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>metoprolol tartrate intravenous solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>metoprolol tartrate oral tablet 100 mg</td>
<td>1 or 1a*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>metoprolol tartrate oral tablet 25 mg, 37.5 mg, 50 mg, 75 mg</td>
<td>1 or 1a*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>BETA BLOCKERS NON-SELECTIVE</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HEMANGEOL ORAL SOLUTION (propranolol hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR (propranolol hcl sr beads)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR (propranolol hcl sr beads)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>nadolol oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pindolol oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>propranolol hcl er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>propranolol hcl intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>propranolol hcl oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>propranolol hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sotalol hcl (Sorine Oral Tablet)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sotalol hcl (af) oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>SOTALOL HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>sotalol hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>SOTYLIZE ORAL SOLUTION (sotalol hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>timolol maleate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

**BETA-3 ADRENERGIC AGONISTS***

*MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR (mirabegron) | 3 | QL (1 tablet per 1 day) |

**BETA-BLOCKERS - OPHTHALMIC COMBINATIONS***

*COMBIGAN OPHTHALMIC SOLUTION (brimonidine tartrate-timolol) | 2 | QL (15 mL per 30 days) |
| dorzolamide hcl-timolol mal ophthalmic solution | 1 or 1b* | QL (10 mL per 30 days) |
| dorzolamide hcl-timolol mal pf ophthalmic solution | 1 or 1b* | QL (12 mL per 30 days) |

**BETA-BLOCKERS - OPHTHALMIC***

*betaxolol hcl ophthalmic solution | 1 or 1b* | QL (0.5 mL per 1 day) |
| BETIMOL OPHTHALMIC SOLUTION (timolol hemihydrate) | 3 | QL (15 mL per 30 days) |
| BETOPTIC-S OPHTHALMIC SUSPENSION (betaxolol hcl) | 2 | QL (15 mL per 30 days) |
| carteolol hcl ophthalmic solution | 1 or 1a* |                                 |
| levobunolol hcl ophthalmic solution | 1 or 1b* |                                 |
| timolol maleate ophthalmic gel forming solution | 1 or 1b* | QL (5 mL per 30 days) |
| timolol maleate ophthalmic solution 0.25 % | 1 or 1b* | QL (20 mL per 30 days) |
| timolol maleate ophthalmic solution 0.5 % | 1 or 1b* |                                 |
| timolol maleate ophthalmic solution 0.5 % (daily) | 1 or 1b* | QL (5 mL per 30 days) |
| TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 % (timolol maleate) | 3 | QL (18 mL per 30 days) |
| TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 % (timolol maleate) | 3 | QL (20 mL per 30 days) |
| TIMOPTIC OPHTHALMIC SOLUTION 0.25 % (timolol maleate) | 3 | QL (20 mL per 30 days) |
| TIMOPTIC OPHTHALMIC SOLUTION 0.5 % (timolol maleate) | 3 |                                 |
| TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION (timolol maleate) | 3 | QL (5 mL per 30 days) |

**BICARBONATES*** - DRUGS FOR NUTRITION

*SODIUM ACETATE INTRAVENOUS SOLUTION 2 MEQ/ML | 3 |                                 |
| sodium acetate intravenous solution 4 meq/ml | 1 or 1b* |                                 |
| sodium bicarbonate intravenous solution 4.2 %, 8.4 % | 1 or 1b* |                                 |
| SODIUM BICARBONATE INTRAVENOUS SOLUTION 7.5 % | 3 |                                 |

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</tr>
</thead>
<tbody>
<tr>
<td>SODIUM BICARBONATE-DEXTROSE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>THAM INTRAVENOUS SOLUTION <em>(tromethamine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>BIGUANIDES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>metformin hcl er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>generic Glucophage XR</td>
</tr>
<tr>
<td>metformin hcl oral solution</td>
<td>1 or 1b*</td>
<td>PA; QL (2 bottles per 30 days)</td>
</tr>
<tr>
<td>metformin hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>RIOMET ER ORAL SUSPENSION RECONSTITUTED ER <em>(metformin hcl)</em></td>
<td>3</td>
<td>PA; QL (2 bottles per 30 days)</td>
</tr>
<tr>
<td>RIOMET ORAL SOLUTION <em>(metformin hcl)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>BILE ACID SEQUESTRANTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>cholestyramine light oral packet</td>
<td>1 or 1b*</td>
<td>QL (24 grams per 1 day)</td>
</tr>
<tr>
<td>cholestyramine light oral powder</td>
<td>1 or 1b*</td>
<td>QL (24 grams per 1 day)</td>
</tr>
<tr>
<td>cholestyramine oral packet</td>
<td>1 or 1b*</td>
<td>QL (6 packets per 1 day)</td>
</tr>
<tr>
<td>cholestyramine oral powder</td>
<td>1 or 1b*</td>
<td>QL (54 gm per 1 day)</td>
</tr>
<tr>
<td>colesvamel hcl oral packet</td>
<td>1 or 1b*</td>
<td>QL (1 packet per 1 day)</td>
</tr>
<tr>
<td>colesvamel hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>COLESTID FLAVORED ORAL GRANULES <em>(colestipol hcl)</em></td>
<td>3</td>
<td>QL (30 grams per 1 day)</td>
</tr>
<tr>
<td>COLESTID FLAVORED ORAL PACKET <em>(colestipol hcl)</em></td>
<td>3</td>
<td>QL (30 grams per 1 day)</td>
</tr>
<tr>
<td>COLESTID ORAL GRANULES <em>(colestipol hcl)</em></td>
<td>3</td>
<td>QL (30 grams per 1 day)</td>
</tr>
<tr>
<td>COLESTID ORAL PACKET <em>(colestipol hcl)</em></td>
<td>3</td>
<td>QL (30 grams per 1 day)</td>
</tr>
<tr>
<td>COLESTID ORAL TABLET <em>(colestipol hcl)</em></td>
<td>3</td>
<td>QL (16 tablets per 1 day)</td>
</tr>
<tr>
<td>colestipol hcl oral granules</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>colestipol hcl oral packet</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 1 day)</td>
</tr>
<tr>
<td>colestipol hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (16 tablets per 1 day)</td>
</tr>
<tr>
<td>cholestyramine light <em>(Prevalite Oral Packet)</em></td>
<td>1 or 1b*</td>
<td>QL (24 grams per 1 day)</td>
</tr>
<tr>
<td>cholestyramine light <em>(Prevalite Oral Powder)</em></td>
<td>1 or 1b*</td>
<td>QL (24 grams per 1 day)</td>
</tr>
<tr>
<td>QUESTRAN LIGHT ORAL POWDER <em>(cholestyramine light)</em></td>
<td>3</td>
<td>QL (24 grams per 1 day)</td>
</tr>
<tr>
<td>QUESTRAN ORAL PACKET <em>(cholestyramine)</em></td>
<td>3</td>
<td>QL (6 packets per 1 day)</td>
</tr>
<tr>
<td>QUESTRAN ORAL POWDER <em>(cholestyramine)</em></td>
<td>3</td>
<td>QL (54 gm per 1 day)</td>
</tr>
<tr>
<td><em>BIOFLAVONOID PRODUCTS</em>** - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADRENAL C FORMULA ORAL TABLET <em>(bioflavonoid products)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>BIPHASIC CONTRACEPTIVES - ORAL</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>desogestrel-ethinyl estradiol <em>(Azurette Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>desogestrel-ethinyl estradiol <em>(Bekyree Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>desogestrel-ethinyl estradiol <em>(Kariva Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>LO LOESTRIN FE ORAL TABLET <em>(norethin-eth estrad-fe bipher)</em></td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>MIRCETTE ORAL TABLET <em>(desogestrel-ethinyl estradiol)</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>desogestrel-ethinyl estradiol (Pimtena Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>desogestrel-ethinyl estradiol (Simliya Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>viorele oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>desogestrel-ethinyl estradiol (Volnea Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
</tbody>
</table>

*BISPHOSPHONATES***

<table>
<thead>
<tr>
<th>Medicamento</th>
<th>Nivel</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACTONEL ORAL TABLET 150 MG (risedronate sodium)</td>
<td>3</td>
<td>QL (1 tablet per 30 days)</td>
</tr>
<tr>
<td>ACTONEL ORAL TABLET 35 MG (risedronate sodium)</td>
<td>3</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>alendronate sodium oral solution</td>
<td>1 or 1b*</td>
<td>QL (10.72 mg per 1 day)</td>
</tr>
<tr>
<td>alendronate sodium oral tablet 10 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>alendronate sodium oral tablet 35 mg, 70 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>ATELVIA ORAL TABLET DELAYED RELEASE (risedronate sodium)</td>
<td>3</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>BONIVA INTRAVENOUS SOLUTION (ibandronate sodium)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>BONIVA ORAL TABLET (ibandronate sodium)</td>
<td>3</td>
<td>ST; QL (1 tablet per 28 days)</td>
</tr>
<tr>
<td>FOSAMAX ORAL TABLET (alendronate sodium)</td>
<td>3</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>FOSAMAX PLUS D ORAL TABLET (alendronate-cholecalciferol)</td>
<td>2</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>ibandronate sodium intravenous solution</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>ibandronate sodium oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 28 days)</td>
</tr>
<tr>
<td>pamidronate disodium intravenous solution 30 mg/10ml, 90 mg/10ml</td>
<td>4</td>
<td>SP</td>
</tr>
<tr>
<td>pamidronate disodium intravenous solution reconstituted</td>
<td>4</td>
<td>SP</td>
</tr>
<tr>
<td>RECLAST INTRAVENOUS SOLUTION (zoledronic acid)</td>
<td>5</td>
<td>PA; SP; QL (100 mL per 375 days)</td>
</tr>
<tr>
<td>risedronate sodium oral tablet 150 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 30 days)</td>
</tr>
<tr>
<td>risedronate sodium oral tablet 30 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>risedronate sodium oral tablet 35 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>risedronate sodium oral tablet delayed release</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 28 days)</td>
</tr>
<tr>
<td>zoledronic acid intravenous concentrate</td>
<td>1 or 1b*</td>
<td>PA; SP</td>
</tr>
<tr>
<td>ZOLEDRONIC ACID INTRAVENOUS SOLUTION 4 MG/100ML</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>zoledronic acid intravenous solution 5 mg/100ml</td>
<td>4</td>
<td>PA; SP; QL (100 mL per 375 days)</td>
</tr>
</tbody>
</table>

*B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS*** - VITAMINS AND MINERALS

<table>
<thead>
<tr>
<th>Medicamento</th>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED (belimumab)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR (belimumab)</td>
<td>5</td>
<td>PA; LD; SP; QL (4 autoinjectors per 28 days)</td>
</tr>
<tr>
<td>BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (belimumab)</td>
<td>5</td>
<td>PA; LD; SP; QL (4 pens per 28 days)</td>
</tr>
</tbody>
</table>

*BOWEL EVACUANT COMBINATIONS***

<table>
<thead>
<tr>
<th>Medicamento</th>
<th>Nivel</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLENPIQ ORAL SOLUTION (sod picosulfate-mag ox-cit acd)</td>
<td>3</td>
<td>QL (320 mL per 30 days)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>gavilyte-c oral solution reconstituted</td>
<td>1 or 1a*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>peg 3350-kcl-nabcb-naclnasulf (Gavilyte-G Oral Solution Reconstituted)</td>
<td>1 or 1a*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>bisacodyl-peg-kcl-nabicar-nacl (Gavilyte-H Oral Kit)</td>
<td>1 or 1b*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>peg 3350-kcl-na bicarb-nacl (Gavilyte-N With Flavor Pack Oral Solution Reconstituted)</td>
<td>1 or 1a*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM (peg 3350-kcl-nabcb-naclnasulf)</td>
<td>3</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM (peg 3350-kcl-nabcb-naclnasulf)</td>
<td>3</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>MOVIPREP ORAL SOLUTION RECONSTITUTED (peg-kcl-naclnasulf-naasc-c)</td>
<td>3</td>
<td>QL (1 gram per 30 days)</td>
</tr>
<tr>
<td>NULYTELY LEMON-LIME ORAL SOLUTION RECONSTITUTED (peg 3350-kcl-na bicarb-nacl)</td>
<td>3</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>NULYTELY WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED (peg 3350-kcl-na bicarb-nacl)</td>
<td>3</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</td>
<td>1 or 1a*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>peg-3350/elec trolytes oral solution reconstituted</td>
<td>1 or 1a*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
<tr>
<td>peg-3350/elec trolytes/ascorbat oral solution reconstituted</td>
<td>1 or 1b*; $0</td>
<td>QL (1 gram per 30 days)</td>
</tr>
<tr>
<td>peg-kcl-naclnasulf-na asc-c oral solution reconstituted</td>
<td>1 or 1b*; $0</td>
<td>QL (1 gram per 30 days)</td>
</tr>
<tr>
<td>bisacodyl-peg-kcl-nabicar-nacl (Peg-Prep Oral Kit)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>PLENVU ORAL SOLUTION RECONSTITUTED (peg-kcl-naclnasulf-naasc-c)</td>
<td>3</td>
<td>QL (1 gram per 30 days)</td>
</tr>
<tr>
<td>SUPREP BOWEL PREP KIT ORAL SOLUTION (na sulfate-k sulfate-mgsulf)</td>
<td>2</td>
<td>QL (1 kit per 30 days)</td>
</tr>
<tr>
<td>peg 3350-kcl-na bicarb-nacl (Trilyte Oral Solution Reconstituted)</td>
<td>1 or 1a*; $0</td>
<td>QL (4000 grams per 30 days)</td>
</tr>
</tbody>
</table>

*BRADYKININ B2 RECEPTOR ANTAGONISTS*** - DRUGS FOR THE BLOOD

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>FIRAZYR SUBCUTANEOUS SOLUTION (icatibant acetate)</td>
<td>5</td>
<td>PA; LD; SP; QL (24 syringes per 30 days)</td>
</tr>
<tr>
<td>icatibant acetate subcutaneous solution</td>
<td>4</td>
<td>PA; SP; QL (24 syringes per 30 days)</td>
</tr>
</tbody>
</table>

*BRONCHODILATORS - ANTICHOLINERGICS***

<table>
<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATROVENT HFA INHALATION AEROSOL SOLUTION (ipratropium bromide hfa)</td>
<td>2</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>ipratropium bromide inhalation solution</td>
<td>1 or 1b*</td>
<td>QL (378 ML per 30 days)</td>
</tr>
<tr>
<td>LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION (glycopyrrolate)</td>
<td>3</td>
<td>QL (2 vials per 1 day)</td>
</tr>
<tr>
<td>LONHALA MAGNAIR STARTER KIT INHALATION SOLUTION (glycopyrrolate)</td>
<td>3</td>
<td>QL (1 kit per 365 days)</td>
</tr>
<tr>
<td>SPIRIVA HANDIHALER INHALATION CAPSULE (tiotropium bromide monohydrate)</td>
<td>2</td>
<td>QL (30 capsules per 30 days)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>SPIRIVA RESPIMAT AEROSOL SOLUTION (<strong>tiotropium bromide monohydrate</strong>)</td>
<td>2</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>YUPELRI INHALATION SOLUTION (<strong>revefenacin</strong>)</td>
<td>3</td>
<td>QL (1 vial per 1 day)</td>
</tr>
<tr>
<td><strong>BURN PRODUCTS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mafenide acetate external packet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>SILVADENE EXTERNAL CREAM (<strong>silver sulfadiazine</strong>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>silver sulfadiazine external cream</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>silver sulfadiazine (Ssd External Cream)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>SULFAMYLON EXTERNAL CREAM (<strong>mafenide acetate</strong>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SULFAMYLON EXTERNAL PACKET (<strong>mafenide acetate</strong>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>BUTYROPHENONES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML (<strong>haloperidol decanoate</strong></td>
<td>3</td>
<td>QL (5 injections per 30 days)</td>
</tr>
<tr>
<td>HALDOL DECANOATE INTRAMUSCULAR SOLUTION 50 MG/ML (<strong>haloperidol decanoate</strong></td>
<td>3</td>
<td>QL (5 ampules per 30 days)</td>
</tr>
<tr>
<td>HALDOL INJECTION SOLUTION (<strong>haloperidol lactate</strong>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>haloperidol decanoate intramuscular solution 100 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (5 injections per 30 days)</td>
</tr>
<tr>
<td>haloperidol decanoate intramuscular solution 50 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (5 ampules per 30 days)</td>
</tr>
<tr>
<td>haloperidol lactate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>haloperidol lactate oral concentrate</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>haloperidol oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>C1 INHIBITORS</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BERINERT INTRAVENOUS KIT (<strong>c1 esterase inhibitor (human)</strong></td>
<td>5</td>
<td>PA; LD; SP; QL (24 vials per 30 days)</td>
</tr>
<tr>
<td>CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED (<strong>c1 esterase inhibitor (human)</strong></td>
<td>5</td>
<td>PA; LD; SP; QL (20 vials per 30 days)</td>
</tr>
<tr>
<td>HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT (<strong>c1 esterase inhibitor (human)</strong></td>
<td>5</td>
<td>PA; LD; SP; QL (24 vials per 28 days)</td>
</tr>
<tr>
<td>HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT (<strong>c1 esterase inhibitor (human)</strong></td>
<td>5</td>
<td>PA; LD; SP; QL (16 vials per 28 days)</td>
</tr>
<tr>
<td>RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED (<strong>c1 esterase inhibitor (recomb)</strong></td>
<td>5</td>
<td>PA; LD; SP; QL (16 vials per 30 days)</td>
</tr>
<tr>
<td><strong>CALCIMIMETIC AGENTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>cinacalcet hcl oral tablet 30 mg, 60 mg</td>
<td>4</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>cinacalcet hcl oral tablet 90 mg</td>
<td>4</td>
<td>PA; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>PARSABIV INTRAVENOUS SOLUTION (<strong>etelcalcetide hcl</strong>)</td>
<td>5</td>
<td>PA</td>
</tr>
<tr>
<td>SENSIPAR ORAL TABLET 30 MG, 60 MG (<strong>cinacalcet hcl</strong>)</td>
<td>5</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>SENSIPAR ORAL TABLET 90 MG (<strong>cinacalcet hcl</strong>)</td>
<td>5</td>
<td>PA; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>CALCITONINS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>calcitonin (salmon) nasal solution</td>
<td>1 or 1b*</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td>MIACALCIN INJECTION SOLUTION (calcitonin (salmon))</td>
<td>5</td>
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**CALCIO CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB***

<table>
<thead>
<tr>
<th>Medicamento</th>
<th>Nivel</th>
<th>Requisitos</th>
</tr>
</thead>
<tbody>
<tr>
<td>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-80 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-80 MG (amlodipine-atorvastatin)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>CADUET ORAL TABLET 5-10 MG, 5-20 MG, 5-40 MG (amlodipine-atorvastatin)</td>
<td>3</td>
<td>DO</td>
</tr>
</tbody>
</table>

**CALCIO CHANNEL BLOCKERS***

<table>
<thead>
<tr>
<th>Medicamento</th>
<th>Nivel</th>
<th>Requisitos</th>
</tr>
</thead>
<tbody>
<tr>
<td>nifedipine (Afeditab Cr Oral Tablet Extended Release 24 Hour 30 Mg)</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>nifedipine (Afeditab Cr Oral Tablet Extended Release 24 Hour 60 Mg)</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amlodipine besylate oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>amlodipine besylate oral tablet 2.5 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>CALAN SR ORAL TABLET EXTENDED RELEASE (verapamil hcl)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>CARDENE IV INTRAVENOUS SOLUTION (nicardipine hcl in nacl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG (diltiazem hcl coated beads)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>CARDIZEM ORAL TABLET 120 MG (diltiazem hcl)</td>
<td>3</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>CARDIZEM ORAL TABLET 30 MG, 60 MG (diltiazem hcl)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl coated beads (Cartia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg)</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl coated beads (Cartia Xt Oral Capsule Extended Release 24 Hour 240 Mg, 300 Mg)</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>CLEVIPREX INTRAVENOUS EMULSION (clevidipine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CONJUPRI ORAL TABLET 2.5 MG (levamlodipine maleate)</td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>CONJUPRI ORAL TABLET 5 MG (levamlodipine maleate)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 360 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl er beads oral capsule extended release 24 hour 240 mg, 300 mg, 420 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl er coated beads oral capsule extended release 24 hour 240 mg, 300 mg, 360 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>diltiazem hcl er coated beads oral tablet extended release 24 hour 180 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl er coated beads oral tablet extended release 24 hour 240 mg, 300 mg, 360 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>diltiazem hcl er oral capsule extended release 12 hour</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl er oral capsule extended release 24 hour 240 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>diltiazem hcl intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DILTIAZEM HCL INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>diltiazem hcl oral tablet 120 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>diltiazem hcl oral tablet 30 mg, 60 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl oral tablet 90 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>DILTIAZEM HCL-DEXTROSE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>dilt-xr oral capsule extended release 24 hour 240 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>felodipine er oral tablet extended release 24 hour 10 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>felodipine er oral tablet extended release 24 hour 2.5 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>isradipine oral capsule 2.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>isradipine oral capsule 5 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>KATERZIA ORAL SUSPENSION (amlodipine benzoate)</td>
<td>3</td>
<td>QL (300 mL per 30 days)</td>
</tr>
<tr>
<td>diltiazem hcl coated beads (Matzim La Oral Tablet Extended Release 24 Hour 180 Mg)</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>diltiazem hcl coated beads (Matzim La Oral Tablet Extended Release 24 Hour 240 Mg, 300 Mg, 360 Mg, 420 Mg)</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NICARDIPINE HCL IN NACL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NICARDIPINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>nicardipine hcl intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>nicardipine hcl oral capsule 20 mg</td>
<td>1 or 1b*</td>
<td>QL (6 capsule per 1 day)</td>
</tr>
<tr>
<td>nicardipine hcl oral capsule 30 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>nifedipine er oral tablet extended release 24 hour 30 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>nifedipine er oral tablet extended release 24 hour 60 mg, 90 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>nifedipine er osmotic release oral tablet extended release 24 hour 60 mg, 90 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>nifedipine oral capsule</td>
<td>1 or 1b*</td>
<td>QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>nimodipine oral capsule</td>
<td>1 or 1b*</td>
<td>QL (12 capsule per 1 day)</td>
</tr>
<tr>
<td>nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 8.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>nisoldipine er oral tablet extended release 24 hour 25.5 mg, 30 mg, 34 mg, 40 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NYMALIZE ORAL SOLUTION (nimodipine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROCARDIA ORAL CAPSULE (nifedipine)</td>
<td>3</td>
<td>QL (4 capsule per 1 day)</td>
</tr>
</tbody>
</table>

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<tr>
<td>PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG <em>(nifedipine)</em></td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG, 90 MG <em>(nifedipine)</em></td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 8.5 MG <em>(nisoldipine)</em></td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 34 MG <em>(nisoldipine)</em></td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>diltiazem hcl er beads</strong> <em>(Taztia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 360 Mg)</em></td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td><strong>diltiazem hcl er beads</strong> <em>(Taztia Xt Oral Capsule Extended Release 24 Hour 240 Mg, 300 Mg)</em></td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>diltiazem hcl er beads</strong> <em>(Tiadylt Er Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 360 Mg)</em></td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td><strong>diltiazem hcl er beads</strong> <em>(Tiadylt Er Oral Capsule Extended Release 24 Hour 240 Mg, 300 Mg, 420 Mg)</em></td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 360 MG <em>(diltiazem hcl er beads)</em></td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 240 MG, 300 MG, 420 MG <em>(diltiazem hcl er beads)</em></td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>verapamil hcl er oral capsule extended release 24 hour 100 mg, 120 mg, 180 mg</strong></td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td><strong>verapamil hcl er oral capsule extended release 24 hour 200 mg, 300 mg, 360 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>verapamil hcl er oral capsule extended release 24 hour 240 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td><strong>verapamil hcl er oral tablet extended release</strong></td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>verapamil hcl intravenous solution</strong></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>verapamil hcl oral tablet 120 mg, 80 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>verapamil hcl oral tablet 40 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG <em>(verapamil hcl)</em></td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 240 MG <em>(verapamil hcl)</em></td>
<td>3</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 360 MG <em>(verapamil hcl)</em></td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG <em>(verapamil hcl)</em></td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG <em>(verapamil hcl)</em></td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
</tbody>
</table>

**CALCIUM COMBINATIONS*** - DRUGS FOR NUTRITION

CALCIFOL ORAL WAFER *(ca carb-fa-d-b6-b12-boron-mg)* | 3 |
CALCIUM GLUCONATE-NAACL INTRAVENOUS SOLUTION | 3 |

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<tr>
<td><strong>CALCIUM</strong>* - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>calcium chloride intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CALCIUM GLUCONATE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CARBAMATES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>felbamate oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>felbamate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK (cenobamate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK (cenobamate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XCOPRI ORAL TABLET 100 MG, 150 MG, 50 MG (cenobamate)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>XCOPRI ORAL TABLET 200 MG (cenobamate)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>XCOPRI ORAL TABLET THERAPY PACK (cenobamate)</td>
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<td></td>
</tr>
<tr>
<td><strong>CARBAPENEM COMBINATIONS</strong>*</td>
<td></td>
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</tr>
<tr>
<td>imipenem-cilastatin intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED (imipenem-cilastatin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RECARBIO INTRAVENOUS SOLUTION RECONSTITUTED (imipenem-cilastatin-relebactam)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED (meropenem-vaborbactam)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CARBAPENEMS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ertapenem sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>INVANZ INJECTION SOLUTION RECONSTITUTED (ertapenem sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>meropenem intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MERREM INTRAVENOUS SOLUTION RECONSTITUTED (meropenem)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CARBOHYDRATES</strong>* - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>dehydrated alcohol injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>dextrose intravenous solution 10 %, 250 mg/ml, 30 %, 5 %, 50 %, 70 %</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DEXTROSE INTRAVENOUS SOLUTION 20 %, 40 %</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CARBONIC ANHYDRASE INHIBITORS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>acetazolamide er oral capsule extended release 12 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>acetazolamide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>acetazolamide sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>KEVEYIS ORAL TABLET (dichlorphenamide)</td>
<td>5</td>
<td>PA; LD; QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>methazolamide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td><strong>CARBOXYPEPTIDASE ENZYME AGENTS</strong>* - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED  
(gluarapidase) | 3 | LD |
| **CARDIAC GLYCOSIDES*** - DRUGS FOR THE HEART | | |
| *digoxin* (Digitek Oral Tablet) | 1 or 1b* | |
| *digoxin* (Digox Oral Tablet) | 1 or 1b* | |
| *digoxin injection solution* | 1 or 1b* | |
| *digoxin oral solution* | 1 or 1b* | |
| *digoxin oral tablet* | 1 or 1b* | |
| LANOXIN INJECTION SOLUTION  
(*digoxin*) | 3 | |
| LANOXIN ORAL TABLET 62.5 MCG  
(*digoxin*) | 2 | |
| LANOXIN PEDIATRIC INJECTION SOLUTION  
(*digoxin*) | 2 | |
| **CARDIAC PROTECTIVE AGENTS*** - DRUGS FOR CANCER | | |
| *dextrazoxane hcl intravenous solution reconstituted* | 1 or 1b* | SP |
| TOTECT INTRAVENOUS SOLUTION RECONSTITUTED  
(*dextrazoxane hcl*) | 3 | SP |
| **CARNITINE REPLENISHER - AGENTS*** | | |
| CARNITOR INTRAVENOUS SOLUTION  
(*levocarnitine*) | 3 | |
| CARNITOR ORAL SOLUTION  
(*levocarnitine*) | 3 | |
| CARNITOR ORAL TABLET  
(*levocarnitine*) | 3 | |
| CARNITOR SF ORAL SOLUTION  
(*levocarnitine*) | 3 | |
| LEVOCARNITINE INJECTION SOLUTION | 3 | |
| *levocarnitine oral solution* | 1 or 1b* | |
| *levocarnitine oral tablet* | 1 or 1b* | |
| *levocarnitine sf oral solution* | 1 or 1b* | |
| **CENTRAL MUSCLE RELAXANTS*** - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES | | |
| baclofen intrathecal solution | 4 | |
| baclofen oral tablet 10 mg, 5 mg | 1 or 1b* | QL (3 tablets per 1 day) |
| baclofen oral tablet 20 mg | 1 or 1b* | QL (4 tablets per 1 day) |
| carisoprodol oral tablet | 1 or 1b* | QL (4 tablets per 1 day) |
| chlorzoxazone oral tablet 375 mg, 750 mg | 1 or 1b* | ST; QL (4 tablets per 1 day) |
| chlorzoxazone oral tablet 500 mg | 1 or 1b* | QL (4 tablets per 1 day) |
| cyclobenzaprine hcl oral tablet 10 mg | 1 or 1b* | QL (3 tablets per 1 day) |
| cyclobenzaprine hcl oral tablet 5 mg, 7.5 mg | 1 or 1b* | |
| CYCLOPHENE RAPIDPAQ TRANSDERMAL CREAM  
(*cyclobenzaprine hcl*) | 3 | |
| fexmid oral tablet | 1 or 1b* | ST |

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<tbody>
<tr>
<td>GABLOFEN INTRATHECAL SOLUTION (<em>baclofen</em>)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE (<em>baclofen</em>)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>LIoresal INTRATHECAL SOLUTION (<em>baclofen</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>chlorzoxazone (<em>Lorzone Oral Tablet</em>)</td>
<td>1 or 1b*</td>
<td>ST; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>metaxalone oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>methocarbamol injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>methocarbamol oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (8 tablets per 1 day)</td>
</tr>
<tr>
<td>methocarbamol oral tablet 750 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>orphenadrine citrate er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>orphenadrine citrate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ROBAXIN INJECTION SOLUTION (<em>methocarbamol</em>)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>ROBAXIN-750 ORAL TABLET (<em>methocarbamol</em>)</td>
<td>3</td>
<td>ST; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>SKELEXIN ORAL TABLET (<em>metaxalone</em>)</td>
<td>3</td>
<td>ST; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>SOMA ORAL TABLET 250 MG (<em>carisoprodol</em>)</td>
<td>3</td>
<td>ST; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>SOMA ORAL TABLET 350 MG (<em>carisoprodol</em>)</td>
<td>3</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>TABRADOL FUSEPAQ ORAL SUSPENSION (<em>cyclobenzaprine hcl-msm</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TABRADOL RAPIDPAQ ORAL SUSPENSION (<em>cyclobenzaprine hcl-msm</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>tizanidine hcl oral capsule 2 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>tizanidine hcl oral capsule 4 mg</td>
<td>1 or 1b*</td>
<td>QL (9 capsules per 1 day)</td>
</tr>
<tr>
<td>tizanidine hcl oral capsule 6 mg</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>tizanidine hcl oral tablet 2 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>tizanidine hcl oral tablet 4 mg</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 1 day)</td>
</tr>
<tr>
<td>ZANAFLEX ORAL CAPSULE 2 MG (<em>tizanidine hcl</em>)</td>
<td>3</td>
<td>ST; QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>ZANAFLEX ORAL CAPSULE 4 MG (<em>tizanidine hcl</em>)</td>
<td>3</td>
<td>ST; QL (9 capsules per 1 day)</td>
</tr>
<tr>
<td>ZANAFLEX ORAL CAPSULE 6 MG (<em>tizanidine hcl</em>)</td>
<td>3</td>
<td>ST; QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>ZANAFLEX ORAL TABLET (<em>tizanidine hcl</em>)</td>
<td>3</td>
<td>ST; QL (9 tablets per 1 day)</td>
</tr>
</tbody>
</table>

*CENTRAL/PERIPHERAL COMT INHIBITORS***

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>TASMAR ORAL TABLET (<em>tolcapone</em>)</td>
<td>3</td>
<td>PA; QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>tolcapone oral tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablet per 1 day)</td>
</tr>
</tbody>
</table>

*CEPHALOSPORINS - 1ST GENERATION***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>cefadroxil oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefadroxil oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefadroxil oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFAZOLIN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 500 mg</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFAZOLIN SODIUM INJECTION SOLUTION RECONSTITUTED 100 GM, 300 GM</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cefazolin sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cephalexin oral capsule</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>cephalexin oral suspension reconstituted</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>cephalexin oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>KEFLEX ORAL CAPSULE (cephalexin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CEPHALOSPORINS - 2ND GENERATION</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CEFACLOR ER ORAL TABLET EXTENDED RELEASE 12 HOUR</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cefaclor oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefaclor oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFOTAN INJECTION SOLUTION RECONSTITUTED (cefotetan disodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cefotetan disodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFOTETAN DISODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cefoxitin sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefoxitin sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFOTETAN DISODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cefprozil oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefprozil oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefuroxime axetil oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefuroxime sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefuroxime sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>CEPHALOSPORINS - 3RD GENERATION</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>cefdinir oral capsule</td>
<td>1 or 1b*</td>
<td>QL (20 capsules per 1 fill)</td>
</tr>
<tr>
<td>cefdinir oral suspension reconstituted 125 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (240 mL per 1 fill)</td>
</tr>
<tr>
<td>cefdinir oral suspension reconstituted 250 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td>cefixime oral capsule</td>
<td>1 or 1b*</td>
<td>QL (10 capsules per 1 fill)</td>
</tr>
<tr>
<td>cefixime oral suspension reconstituted 100 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (200 mL per 1 fill)</td>
</tr>
<tr>
<td>cefixime oral suspension reconstituted 200 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (100 mL per 1 fill)</td>
</tr>
<tr>
<td>cefotaxime sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefpodoxime proxetil oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cefpodoxime proxetil oral tablet</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>CEFTAZIDIME AND DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
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</tr>
<tr>
<td>ceftazidime injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ceftriaxone sodium in dextrose intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</td>
<td>1 or 1b*</td>
<td>QL (1 injection per 1 fill)</td>
</tr>
<tr>
<td>CEFTRIAXONE SODIUM INJECTION SOLUTION RECONSTITUTED 100 GM</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ceftriaxone sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFTRIAXONE SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>FORTAZ INJECTION SOLUTION RECONSTITUTED (ceftizime)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>FORTAZ INTRAVENOUS SOLUTION RECONSTITUTED (ceftazidime)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SUPRAX ORAL CAPSULE (cefixime)</td>
<td>3</td>
<td>QL (10 capsules per 1 fill)</td>
</tr>
<tr>
<td>SUPRAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML (cefixime)</td>
<td>3</td>
<td>QL (200 mL per 1 fill)</td>
</tr>
<tr>
<td>SUPRAX ORAL SUSPENSION RECONSTITUTED 200 MG/5ML (cefixime)</td>
<td>3</td>
<td>QL (100 mL per 1 fill)</td>
</tr>
<tr>
<td>SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML (cefixime)</td>
<td>3</td>
<td>QL (40 mL per 1 fill)</td>
</tr>
<tr>
<td>SUPRAX ORAL TABLET CHEWABLE 100 MG (cefixime)</td>
<td>3</td>
<td>QL (40 tablets per 1 fill)</td>
</tr>
<tr>
<td>SUPRAX ORAL TABLET CHEWABLE 200 MG (cefixime)</td>
<td>3</td>
<td>QL (20 tablets per 1 fill)</td>
</tr>
<tr>
<td>ceftrazidine (Tazicef Injection Solution Reconstituted)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>TAZICEF INTRAVENOUS SOLUTION (ceftazidime sodium in dextrose)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>tazicef intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>CEPHALOSPORINS - 4TH GENERATION</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>cefepime hcl injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CEFEPIME HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CEFEPIME HCL INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CEFEPIME-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CEPHALOSPORINS - 5TH GENERATION</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED (ceftaroline fosamil)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>CERVICAL CAPS</strong>* - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FEMCAP VAGINAL DEVICE (cervical caps)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td><strong>CFTR POTENTIATORS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KALYDECO ORAL PACKET 25 MG (ivacaftor)</td>
<td>5</td>
<td>PA; LD; QL (2 packets per 1 day)</td>
</tr>
<tr>
<td>KALYDECO ORAL PACKET 50 MG, 75 MG (ivacaftor)</td>
<td>5</td>
<td>PA; LD; QL (2 packet per 1 day)</td>
</tr>
<tr>
<td>KALYDECO ORAL TABLET (ivacaftor)</td>
<td>5</td>
<td>PA; LD; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>CHELATING AGENTS</strong>* - VITAMINS AND MINERALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>trientine hcl (Clovique Oral Capsule)</td>
<td>1 or 1b*</td>
<td>PA; SP; QL (8 capsules per 1 day)</td>
</tr>
</tbody>
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</tr>
</thead>
<tbody>
<tr>
<td>DEPEN TITRATABS ORAL TABLET (<em>penicillamine</em>)</td>
<td>3</td>
<td>PA; QL (8 tablets per 1 day)</td>
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<tr>
<td>EDETATE DISODIUM INTRAVENOUS SOLUTION</td>
<td>3</td>
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</tr>
<tr>
<td><em>penicillamine oral capsule</em></td>
<td>1 or 1b*</td>
<td>PA; QL (8 capsules per 1 day)</td>
</tr>
<tr>
<td><em>penicillamine oral tablet</em></td>
<td>1 or 1b*</td>
<td>PA; QL (8 tablets per 1 day)</td>
</tr>
<tr>
<td><em>trientine hcl oral capsule</em></td>
<td>1 or 1b*</td>
<td>PA; SP; QL (8 capsules per 1 day)</td>
</tr>
<tr>
<td><em>CHEMOTHERAPY ADJUNCTS - HYPERURICEMIA AGENTS</em>** - DRUGS FOR CANCER*</td>
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<tr>
<td>ELITEK INTRAVENOUS SOLUTION RECONSTITUTED (<em>rasburicase</em>)</td>
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<td>PA; SP</td>
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<td><em>CHEMOTHERAPY ADJUNCTS - KERATINOCYTE GROWTH FACTORS</em>** - DRUGS FOR CANCER*</td>
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<tr>
<td>KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED (<em>palifermin</em>)</td>
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<tr>
<td><em>CHLORAMPHENICALS</em>**</td>
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<tr>
<td><em>chloramphenicol sod succinate intravenous solution reconstituted</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>CHLORINE ANTISEPTICS</em>** - ANTISEPTICS AND DISINFECTANTS*</td>
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<tr>
<td>BENZALKONIUM CHLORIDE EXTERNAL SOLUTION</td>
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<tr>
<td><em>CHOLINOMIMETICS - ACHE INHIBITORS</em>**</td>
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<tr>
<td>ARICEPT ORAL TABLET 10 MG, 23 MG (<em>donepezil hcl</em>)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ARICEPT ORAL TABLET 5 MG (<em>donepezil hcl</em>)</td>
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</tr>
<tr>
<td><em>donepezil hcl oral tablet 10 mg, 23 mg</em></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>donepezil hcl oral tablet 5 mg</em></td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td><em>donepezil hcl oral tablet dispersible</em></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>EXELON TRANSDERMAL PATCH 24 HOUR 13.3 MG/24HR, 9.5 MG/24HR (<em>rivastigmine</em>)</td>
<td>3</td>
<td>ST; QL (1 patch per 1 day)</td>
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<tr>
<td>EXELON TRANSDERMAL PATCH 24 HOUR 4.6 MG/24HR (<em>rivastigmine</em>)</td>
<td>3</td>
<td>ST; QL (1 gram per 1 day)</td>
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<tr>
<td><em>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg</em></td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><em>galantamine hydrobromide er oral capsule extended release 24 hour 8 mg</em></td>
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<td>DO</td>
</tr>
<tr>
<td><em>galantamine hydrobromide oral solution</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>galantamine hydrobromide oral tablet 12 mg, 8 mg</em></td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em>galantamine hydrobromide oral tablet 4 mg</em></td>
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<td>DO</td>
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<tr>
<td>RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 16 MG, 24 MG (<em>galantamine hydrobromide</em>)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 8 MG (<em>galantamine hydrobromide</em>)</td>
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<td>DO</td>
</tr>
<tr>
<td><em>rivastigmine tartrate oral capsule 1.5 mg, 3 mg</em></td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td><em>rivastigmine tartrate oral capsule 4.5 mg, 6 mg</em></td>
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<td>QL (2 capsules per 1 day)</td>
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<tr>
<td><em>rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 9.5 mg/24hr</em></td>
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<td>QL (1 patch per 1 day)</td>
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<tr>
<td><em>rivastigmine transdermal patch 24 hour 4.6 mg/24hr</em></td>
<td>1 or 1b*</td>
<td>QL (1 gram per 1 day)</td>
</tr>
</tbody>
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<tr>
<td><strong>CITRATES</strong>*</td>
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<tr>
<td><em>pot &amp; sod cit-cit ac oral solution</em></td>
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</tr>
<tr>
<td><em>potassium citrate er oral tablet extended release</em></td>
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<tr>
<td><em>potassium citrate-citric acid oral solution</em></td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>sod citrate-citric acid oral solution</em></td>
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</tr>
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<td><em>potassium citrate-citric acid</em> (Taron-Crystals Oral Packet)</td>
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<tr>
<td><em>tricitrates oral solution</em></td>
<td>1 or 1b*</td>
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<td>UROCIT-K 10 ORAL TABLET EXTENDED RELEASE (potassium citrate)</td>
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<td>UROCIT-K 15 ORAL TABLET EXTENDED RELEASE (potassium citrate)</td>
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<tr>
<td>UROCIT-K 5 ORAL TABLET EXTENDED RELEASE (potassium citrate)</td>
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<td><strong>CLARITHROMYCIN</strong>*</td>
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<tr>
<td>clarithromycin er oral tablet extended release 24 hour</td>
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</tr>
<tr>
<td>clarithromycin oral suspension reconstituted</td>
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</tr>
<tr>
<td>clarithromycin oral tablet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><strong>CMV AGENTS</strong>*</td>
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<td>cidofovir intravenous solution</td>
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<td>FOSCAVIR INTRAVENOUS SOLUTION (foscarnet sodium)</td>
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<tr>
<td>GANCICLOVIR INTRAVENOUS SOLUTION</td>
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<tr>
<td>GANCICLOVIR SODIUM INTRAVENOUS SOLUTION</td>
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<tr>
<td>ganciclovir sodium intravenous solution reconstituted</td>
<td>4 SP</td>
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<tr>
<td>PREVYMIS INTRAVENOUS SOLUTION (lettermovir)</td>
<td>5 PA; SP; QL (1 vial per 1 day)</td>
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<td>PREVYMIS ORAL TABLET (lettermovir)</td>
<td>5 PA; SP; QL (1 tablet per 1 day)</td>
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<td>VALCYTE ORAL SOLUTION RECONSTITUTED (valganciclovir hcl)</td>
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<td>VALCYTE ORAL TABLET (valganciclovir hcl)</td>
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<tr>
<td>valganciclovir hcl oral solution reconstituted</td>
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<td></td>
</tr>
<tr>
<td>valganciclovir hcl oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>COBALAMIN COMBINATIONS</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>cyanocobalamin-methylcobalamin (Abaneu-Sl Sublingual Tablet Sublingual)</td>
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<tr>
<td>LIPO-B INTRAMUSCULAR SOLUTION</td>
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<tr>
<td>NEURIN-SL SUBLINGUAL TABLET SUBLINGUAL</td>
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<tr>
<td>VIT B12-METHIONINE-INOS-CHOL INTRAMUSCULAR SOLUTION</td>
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<td><strong>COBALAMINS</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>cyanocobalamin injection solution 1000 mcg/ml</td>
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<tr>
<td>CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML</td>
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<tr>
<td>hydroxocobalamin acetate intramuscular solution</td>
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<tr>
<td>METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED</td>
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</tr>
<tr>
<td>VITAMIN DEFICIENCY SYSTEM-B12 INJECTION KIT</td>
<td>3</td>
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</tr>
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<tr>
<td><strong>CODEINE COMBINATIONS</strong>*</td>
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<tr>
<td>acetaminophen-codeine #2 oral tablet</td>
<td>1 or 1a*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>acetaminophen-codeine #3 oral tablet</td>
<td>1 or 1a*</td>
<td>QL (6 tablet per 1 day)</td>
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<tr>
<td>acetaminophen-codeine #4 oral tablet</td>
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<td>QL (6 tablet per 1 day)</td>
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<tr>
<td>acetaminophen-codeine oral solution</td>
<td>1 or 1a*</td>
<td>QL (30 mL per 1 day)</td>
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<td>acetaminophen-codeine oral tablet 300-15 mg</td>
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<td>QL (6 tablets per 1 day)</td>
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<tr>
<td>acetaminophen-codeine oral tablet 300-30 mg, 300-60 mg</td>
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<td>QL (6 tablet per 1 day)</td>
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<tr>
<td>butalbital-asa-caff-codeine (Ascomp-Codeine Oral Capsule)</td>
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<td>QL (6 capsule per 1 day)</td>
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<tr>
<td>butalbital-apap-caff-cod oral capsule 50-300-40-30 mg</td>
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<tr>
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<tr>
<td>butalbital-asa-caff-codeine oral capsule</td>
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<td>QL (6 capsule per 1 day)</td>
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<td><strong>COMBINATION CONTRACEPTIVES - ORAL</strong>*</td>
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<td>levonorgestrel-ethinyl estrad (Afirmelle Oral Tablet)</td>
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<td>levonorgestrel-ethinyl estrad (Altavera Oral Tablet)</td>
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<tr>
<td>alyacen 1/35 oral tablet</td>
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<td>norethindrone acet-ethinyl est (Larin 1.5/30 Oral Tablet)</td>
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<td>norethindrone acet-ethinyl est (Larin 1/20 Oral Tablet)</td>
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<td>norethethin acet-eth estrad-fe (Larin Fe 24 Oral Tablet)</td>
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<tbody>
<tr>
<td>norethindrone acet-ethinyl est (Larin Fe 1.5/30 Oral Tablet)</td>
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<td>norethindrone acet-ethinyl est (Larin Fe 1/20 Oral Tablet)</td>
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<td>norethindrone acet-ethinyl est (Layolis Fe Oral Tablet Chewable)</td>
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<td>levonorgestrel-ethyl estradiol (Lessina Oral Tablet)</td>
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<td>levonorgestrel-ethyl estradiol oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg</td>
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<td>levonorgestrel-ethyl estradiol (Lillow Oral Tablet)</td>
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<td>loestrin 1/20 (21) ORAL TABLET (norethindrone acet-ethinyl est)</td>
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<td>norgestrel-ethinyl estradiol (Low-Ogestrel Oral Tablet)</td>
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<td>drospirenone-ethyl estradiol (Lo-Zumandimine Oral Tablet)</td>
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<td>marlissa oral tablet</td>
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<tr>
<td>norethindrone acet-ethinyl est (Mibelas 24 Fe Oral Tablet Chewable)</td>
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<td>minastrin 24 fe oral tablet chewable (noretin acet-eth estrad-fe)</td>
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<td>norgestimate-ethyl estradiol (Mono-Linyah Oral Tablet)</td>
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<td>norgestimate-ethyl estradiol (Mononessa Oral Tablet)</td>
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<td>norethindrone-ethyl estradiol (Necon 0.5/35 (28) Oral Tablet)</td>
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<td>drospirenone-ethyl estradiol (Nikki Oral Tablet)</td>
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<tr>
<td>norethindrone acet-ethyl estradiol oral tablet</td>
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<tr>
<td>norethindrone acet-ethyl estradiol oral tablet chewable</td>
<td>1 or 1a*; $0</td>
<td></td>
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<tr>
<td>norethindrone acet-ethyl estradiol oral tablet</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>norethindrone acet-ethyl estradiol oral tablet</td>
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<tr>
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<td>norethindrone-ethyl estradiol (Nortrel 1/35 (28) Oral Tablet)</td>
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<tbody>
<tr>
<td>drospirenone-ethinyl estradiol (Ocella Oral Tablet)</td>
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<td>levonorgestrel-ethinyl estradiol (Orsythia Oral Tablet)</td>
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<td>norethindrone-eth estradiol (Philith Oral Tablet)</td>
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<td>norethindrone-eth estradiol (Pirmella 1/35 Oral Tablet)</td>
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<td>levonorgestrel-ethinyl estradiol (Portia-28 Oral Tablet)</td>
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<td>norgestimate-eth estradiol (Previmem Oral Tablet)</td>
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<td>desogestrel-ethinyl estradiol (Reclipsen Oral Tablet)</td>
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<td>SAFYRAL ORAL TABLET (drospire-eth estrad-levomefol)</td>
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<td>drospirenone-ethinyl estradiol (Syeda Oral Tablet)</td>
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<td>norethin ace-eth estrad-fe (Tarina 24 Fe Oral Tablet)</td>
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<td>norethin ace-eth estrad-fe (Tarina Fe 1/20 Eq Oral Tablet)</td>
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<td>TAYTULLA ORAL CAPSULE (norethin ace-eth estrad-fe)</td>
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<td>levonorgestrel-ethinyl estradiol (Vienva Oral Tablet)</td>
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<td>norethindrone-eth estradiol (Vylefem Oral Tablet)</td>
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<td>norgestimate-eth estradiol (Vylibra Oral Tablet)</td>
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<td>norethindrone-eth estradiol (Wera Oral Tablet)</td>
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<td>norethin-eth estradiol-fe (Wymzya Fe Oral Tablet Chewable)</td>
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<td>YASMIN 28 ORAL TABLET (drospirenone-ethinyl estradiol)</td>
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<td>YAZ ORAL TABLET (drospirenone-ethinyl estradiol)</td>
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<td>drospirenone-ethinyl estradiol (Zarah Oral Tablet)</td>
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<td>ethynodiol diac-eth estradiol (Zovia 1/35E (28) Oral Tablet)</td>
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<tr>
<td>drospirenone-ethinyl estradiol (Zumandimine Oral Tablet)</td>
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<tr>
<td><em>COMBINATION CONTRACEPTIVES - TRANSDERMAL</em>**</td>
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<tr>
<td>TWIRLA TRANSDERMAL PATCH WEEKLY (levonorgestrel-eth estradiol)</td>
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<td>xulane transdermal patch weekly</td>
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<td><em>COMBINATION CONTRACEPTIVES - VAGINAL</em>**</td>
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<td>ANNOVERA VAGINAL RING (segesterone-ethinyl estradiol)</td>
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<td>etonogestrel-ethinyl estradiol (Eluryng Vaginal Ring)</td>
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<td>etonogestrel-ethinyl estradiol vaginal ring</td>
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<td>NUVARING VAGINAL RING (etonogestrel-ethylene estradiol)</td>
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<td><em>COMPLEMENT INHIBITORS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>SOLIRIS INTRAVENOUS SOLUTION (eculizumab)</td>
<td>PA; LD; SP</td>
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<tr>
<td>ULTOMIRIS INTRAVENOUS SOLUTION 300 MG/30ML (ravulizumab-cwvz)</td>
<td>PA; LD; SP; QL (12 vials per 56 days)</td>
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</tbody>
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<tr>
<td><strong>CONDOMS - FEMALE</strong>* - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
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<td>FC FEMALE CONDOM (condoms - female)</td>
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<tr>
<td>FC2 FEMALE CONDOM (condoms - female)</td>
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<td><strong>CONTINUOUS CONTRACEPTIVES - ORAL</strong>*</td>
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<td>levonorgestrel-ethinyl estrad (Amethyst Oral Tablet)</td>
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<td>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg</td>
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<td><strong>CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS</strong>* - VITAMINS AND MINERALS</td>
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<td>PHOXILLUM B22K4/0 INTRAVENOUS SOLUTION</td>
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<tr>
<td>PHOXILLUM BK4/2.5 INTRAVENOUS SOLUTION</td>
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<tr>
<td>PRISMASOL B22GK 4/0 INTRAVENOUS SOLUTION (bicarb-dextrose-k (crrt))</td>
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<td>PRISMASOL BGK 0/2.5 INTRAVENOUS SOLUTION (bicarb-dextrose-ca (crrt))</td>
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<td>PRISMASOL BGK 2/0 INTRAVENOUS SOLUTION (bicarb-dextrose-k (crrt))</td>
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<td>TRISODIUM CITRATE/CRRT INTRAVENOUS SOLUTION</td>
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<td><strong>COPPER CONTRACEPTIVES - IUD</strong>* (NEW)</td>
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<td>PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE (copper)</td>
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<td><strong>COPPER CONTRACEPTIVES - IUD</strong>*</td>
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<td>PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE (copper)</td>
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<td><strong>CORTICOSTEROIDS - TOPICAL</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>ala-cort external cream</td>
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<tr>
<td>alclometasone dipropionate external cream</td>
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<td>QL (60 grams per 30 days)</td>
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<td>alclometasone dipropionate external ointment</td>
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<td>amcinonide external lotion</td>
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<td>ST; QL (60 mL per 30 days)</td>
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<td>fluticasone propionate (Beser External Lotion)</td>
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<td>QL (120 mL per 30 days)</td>
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<tr>
<td>betamethasone dipropionate aug external cream</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
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<tr>
<td>betamethasone dipropionate aug external gel</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
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<tr>
<td>betamethasone dipropionate aug external lotion</td>
<td>1 or 1b*</td>
<td>QL (60 mL per 30 days)</td>
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<tr>
<td>betamethasone dipropionate aug external ointment</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
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</tbody>
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<tbody>
<tr>
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<tr>
<td>betamethasone dipropionate external ointment</td>
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<td>QL (45 grams per 30 days)</td>
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<tr>
<td>betamethasone valerate external cream</td>
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<td>QL (45 grams per 30 days)</td>
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<tr>
<td>betamethasone valerate external foam</td>
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<td>ST; QL (100 grams per 30 days)</td>
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<tr>
<td>betamethasone valerate external lotion</td>
<td>1 or 1b*</td>
<td>ST; QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>betamethasone valerate external ointment</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
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<tr>
<td>clobetasol propionate e external cream</td>
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<td>QL (60 grams per 30 days)</td>
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<tr>
<td>clobetasol propionate e external foam</td>
<td>1 or 1b*</td>
<td>QL (100 grams per 30 days)</td>
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<td>clobetasol propionate external cream</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
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<tr>
<td>clobetasol propionate external foam</td>
<td>1 or 1b*</td>
<td>QL (100 mL per 30 days)</td>
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<td>clobetasol propionate external gel</td>
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<td>clobetasol propionate external liquid</td>
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<tr>
<td>clobetasol propionate external ointment</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
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<td>clobetasol propionate external shampoo</td>
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<td>clobetasol propionate external solution</td>
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<td>QL (118 mL per 30 days)</td>
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<tr>
<td>desonide external ointment</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>desoximetasone external cream</td>
<td>3</td>
<td>ST; QL (100 grams per 30 days)</td>
</tr>
<tr>
<td>desoximetasone external gel</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>desoximetasone external liquid</td>
<td>3</td>
<td>ST; QL (100 mL per 30 days)</td>
</tr>
<tr>
<td>desoximetasone external ointment</td>
<td>3</td>
<td>ST; QL (100 grams per 30 days)</td>
</tr>
<tr>
<td>diflorasone diacetate external cream</td>
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<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>diflorasone diacetate external ointment</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinolone acetonide body external oil</td>
<td>1 or 1b*</td>
<td>ST; QL (120 mL per 30 days)</td>
</tr>
<tr>
<td>fluocinolone acetonide external cream 0.01 %</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinolone acetonide external cream 0.025 %</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinolone acetonide external ointment</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinolone acetonide external solution</td>
<td>1 or 1b*</td>
<td>QL (90 mL per 30 days)</td>
</tr>
<tr>
<td>fluocinolone acetonide scalp external oil</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 30 days)</td>
</tr>
<tr>
<td>fluocinonide emulsified base external cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td>fluocinonide external cream</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinonide external gel</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinonide external ointment</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>fluocinonide external solution</td>
<td>1 or 1b*</td>
<td>QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>flurandrenolide external cream</td>
<td>3</td>
<td>ST; QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>flurandrenolide external lotion</td>
<td>3</td>
<td>ST; QL (120 mL per 30 days)</td>
</tr>
<tr>
<td>flurandrenolide external ointment</td>
<td>3</td>
<td>ST; QL (120 grams per 30 days)</td>
</tr>
<tr>
<td>fluticasone propionate external cream</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>fluticasone propionate external lotion</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 30 days)</td>
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<tr>
<td>fluticasone propionate external ointment</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
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<tr>
<td>halcinonide external cream</td>
<td>3</td>
<td>ST; QL (216 grams per 30 days)</td>
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<tr>
<td>halobetasol propionate external cream</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>halobetasol propionate external ointment</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>hydrocortisone butyrate external cream</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>hydrocortisone butyrate external lotion</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
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<tr>
<td>hydrocortisone butyrate external ointment</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>hydrocortisone external cream 1 %, 2.5 %</td>
<td>1 or 1a*</td>
<td>QL (454 grams per 30 days)</td>
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<tr>
<td>hydrocortisone external lotion 2.5 %</td>
<td>1 or 1a*</td>
<td>QL (118 mL per 30 days)</td>
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<tr>
<td>hydrocortisone external ointment 1 %, 2.5 %</td>
<td>1 or 1a*</td>
<td>QL (454 grams per 30 days)</td>
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<tr>
<td>hydrocortisone valerate external cream</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
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<tr>
<td>hydrocortisone valerate external ointment</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
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<tr>
<td>mometasone furoate external cream</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
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<tr>
<td>mometasone furoate external ointment</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>mometasone furoate external solution</td>
<td>1 or 1b*</td>
<td>QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>flurandrenolide (Nolix External Lotion)</td>
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<td>ST; QL (120 mL per 30 days)</td>
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<tr>
<td>prednicarbate external ointment</td>
<td>1 or 1b*</td>
<td>QL (60 grams per 30 days)</td>
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<tr>
<td>clobetasol propionate emulsion (Tovet External Foam)</td>
<td>1 or 1b*</td>
<td>QL (100 grams per 30 days)</td>
</tr>
<tr>
<td>triamcinolone acetonide external aerosol solution</td>
<td>3</td>
<td>ST; QL (100 grams per 30 days)</td>
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<tr>
<td>triamcinolone acetonide external cream</td>
<td>1 or 1a*</td>
<td>QL (454 grams per 30 days)</td>
</tr>
<tr>
<td>triamcinolone acetonide external lotion</td>
<td>1 or 1a*</td>
<td>QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>triamcinolone acetonide external ointment 0.025 %, 0.1 %</td>
<td>1 or 1a*</td>
<td>QL (454 grams per 30 days)</td>
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<tr>
<td>triamcinolone acetonide external ointment 0.05 %</td>
<td>3</td>
<td>ST; QL (430 grams per 30 days)</td>
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<tr>
<td>triamcinolone acetonide external ointment 0.5 %</td>
<td>1 or 1a*</td>
<td>QL (30 grams per 30 days)</td>
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<tr>
<td>triamcinolone acetonide (Trianex External Ointment)</td>
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<td>ST; QL (430 grams per 30 days)</td>
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<tr>
<td>triamcinolone acetonide (Triderm External Cream)</td>
<td>1 or 1a*</td>
<td>QL (454 grams per 30 days)</td>
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</tbody>
</table>

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<tbody>
<tr>
<td><strong>CORTICOTROPIN</strong>* - HORMONES</td>
<td></td>
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<tr>
<td>ACTHAR INJECTION GEL (corticotropin)</td>
<td>4</td>
<td>PA; LD; SP</td>
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<tr>
<td><strong>COUMARIN ANTICOAGULANTS</strong>*</td>
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<tr>
<td>warfarin sodium (Jantoven Oral Tablet)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>warfarin sodium oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td><strong>CXCR4 RECEPTOR ANTAGONIST</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>MOZOBIL SUBCUTANEOUS SOLUTION (plerixafor)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td><strong>CYCLIC LIPOPEPTIDES</strong>*</td>
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<tr>
<td>CUBICIN INTRAVENOUS SOLUTION RECONSTITUTED (daptomycin)</td>
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<tr>
<td>CUBICIN RF INTRAVENOUS SOLUTION RECONSTITUTED (daptomycin)</td>
<td>3</td>
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<tr>
<td>DAPTOMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG</td>
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<tr>
<td>daptomycin intravenous solution reconstituted 500 mg</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>CYCLOOXYGENASE 2 (COX-2) INHIBITORS</strong>*</td>
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</tr>
<tr>
<td>celecoxib oral capsule 100 mg, 200 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (2 capsules per 1 day)</td>
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<tr>
<td>celecoxib oral capsule 400 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td><strong>CYCLOPENTYLTRIAZOLOPYRIMIDINE (CPTP) DERIVATIVES</strong>* - DRUGS FOR THE BLOOD</td>
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<tr>
<td>BRILINTA ORAL TABLET (ticagrelor)</td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED (cangrelor tetrasodium)</td>
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<tr>
<td><strong>CYCLOPLEGIC MYDRIATIC COMBINATIONS</strong>* - DRUGS FOR THE EYE</td>
<td></td>
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</tr>
<tr>
<td>CYCLOMYDRIL OPHTHALMIC SOLUTION (cyclopentolate-phenylephrine)</td>
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<tr>
<td>TROPICAMIDE-CYCLOPENTOLATE-PE OPHTHALMIC SOLUTION</td>
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<tr>
<td><strong>CYCLOPLEGIC MYDRIATICS</strong>* - DRUGS FOR THE EYE</td>
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<tr>
<td>phenylephrine hcl (Altafrin Ophthalmic Solution)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %</td>
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<td></td>
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<tr>
<td>ATROPINE SULFATE OPHTHALMIC SOLUTION 1 %</td>
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<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 % (cyclopentolate hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CYCLOGYL OPHTHALMIC SOLUTION 1 % (cyclopentolate hcl)</td>
<td>3</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>cyclopentolate hcl ophthalmic solution 0.5 %, 2 %</td>
<td>1 or 1b*</td>
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<tr>
<td>cyclopentolate hcl ophthalmic solution 1 %</td>
<td>1 or 1b*</td>
<td>QL (15 mL per 30 days)</td>
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<tr>
<td>ISOPTO ATROPINE OPHTHALMIC SOLUTION (atropine sulfate)</td>
<td>3</td>
<td>QL (30 mL per 30 days)</td>
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<tr>
<td>MYDRIACYL OPHTHALMIC SOLUTION (tropicamide)</td>
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<td></td>
</tr>
<tr>
<td>phenylephrine hcl ophthalmic solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>tropicamide ophthalmic solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
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<tr>
<td><em><strong>CYCLOSPORINE ANALOGS</strong></em> - VITAMINS AND MINERALS</td>
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<tr>
<td>cyclosporine intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>cyclosporine modified oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cyclosporine modified oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cyclosporine oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cyclosporine modified (Gengraf Oral Capsule)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>cyclosporine modified (Gengraf Oral Solution)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>NEORAL ORAL CAPSULE (cyclosporine modified)</td>
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<tr>
<td>NEORAL ORAL SOLUTION (cyclosporine modified)</td>
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<tr>
<td>SANDIMMUNE INTRAVENOUS SOLUTION (cyclosporine)</td>
<td>3 SP</td>
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<td>SANDIMMUNE ORAL CAPSULE (cyclosporine)</td>
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<tr>
<td>SANDIMMUNE ORAL SOLUTION (cyclosporine)</td>
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<tr>
<td><em><strong>CYSTINOSIS AGENTS</strong></em> - DRUGS FOR THE URINARY SYSTEM</td>
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</tr>
<tr>
<td>CYSTAGON ORAL CAPSULE (cysteamine bitartrate)</td>
<td>5 LD; SP</td>
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<tr>
<td>PROCYSBI ORAL CAPSULE DELAYED RELEASE (cysteamine bitartrate)</td>
<td>5 ST; LD</td>
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<tr>
<td>PROCYSBI ORAL PACKET (cysteamine bitartrate)</td>
<td>5 ST; LD</td>
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<tr>
<td><em><strong>CYTOTOXIC AGENTS</strong></em> - DRUGS FOR NUTRITION</td>
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<tr>
<td>DROXIA ORAL CAPSULE (hydroxyurea)</td>
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<tr>
<td>SIKLOS ORAL TABLET (hydroxyurea)</td>
<td>3 PA; SP</td>
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<tr>
<td><em><strong>DECARBOXYLASE INHIBITORS</strong></em></td>
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<tr>
<td>carbidopa oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>LODOSYN ORAL TABLET (carbidopa)</td>
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<tr>
<td><em><strong>DECONGESTANT &amp; ANTIHISTAMINE</strong></em></td>
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<tr>
<td>CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR (desloratadine-pseudoephedrine)</td>
<td>3 ST; QL (2 tablets per 1 day)</td>
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<tr>
<td>promethazine-phenylephrine oral syrup</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 1 fill)</td>
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<tr>
<td>SEMPREX-D ORAL CAPSULE (acrivastine-pseudoephedrine)</td>
<td>3 ST; QL</td>
<td>(4 capsules per 1 day)</td>
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<tr>
<td><em><strong>DECONGESTANT W/ EXPECTORANT</strong></em></td>
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<tr>
<td>GILPHEX TR ORAL TABLET (phenylephrine-guaifenesin)</td>
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<tr>
<td><em><strong>DENTAL DESENSITIZING PRODUCTS</strong></em> - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
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<tr>
<td>REMSENSE DENTAL (dental desensitizing product)</td>
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<tr>
<td><em><strong>DENTAL PRODUCTS - COMBINATIONS</strong></em> - DRUGS FOR THE MOUTH AND THROAT</td>
<td></td>
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</tr>
<tr>
<td>sod fluoride-potassium nitrate (Fluoridex Sensitivity Relief Dental Paste)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NAFRINGSE DAILY ACIDULATED MOUTH/THROAT SOLUTION RECONSTITUTED (sodium fluoride-phosphoric acid)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE (sod fluoride-potassium nitrate)</td>
<td>3</td>
<td></td>
</tr>
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<tr>
<td>PREVIDENT 5000 SENSITIVE DENTAL PASTE <em>(sod fluoride-potassium nitrate)</em></td>
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<tr>
<td><em>DENTIFRICES</em>** - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
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<tr>
<td>MI PASTE DENTAL PASTE <em>(dentifrices)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MI PASTE PLUS DENTAL PASTE <em>(dentifrices)</em></td>
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<tr>
<td><em>DEPIGMENTING AGENTS</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>hydroquinone <em>(Blanche External Cream)</em></td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>EPIQUIN MICRO EXTERNAL CREAM <em>(hydroquinone microspheres)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>melplate hp external cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydroquinone <em>(Remergent Hq External Cream)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>tl hydroquinone external cream</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>DEPIGMENTING COMBINATIONS</em>** - DRUGS FOR THE SKIN</td>
<td></td>
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<tr>
<td>TRI-LUMA EXTERNAL CREAM <em>(fluocin-hydroquinone-tretinoin)</em></td>
<td>3</td>
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</tr>
<tr>
<td><em>DEPOLARIZING MUSCLE RELAXANTS</em>** - DRUGS FOR NERVES AND MUSCLES</td>
<td></td>
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<tr>
<td>ANECTINE INJECTION SOLUTION <em>(succinylcholine chloride)</em></td>
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<tr>
<td>QUELICIN INJECTION SOLUTION <em>(succinylcholine chloride)</em></td>
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<tr>
<td>SUCCINYLCHOLINE CHLORIDE INJECTION SOLUTION</td>
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<tr>
<td>SUCCINYLCHOLINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 140 MG/7ML</td>
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<tr>
<td><em>DIABETIC OTHER</em>**</td>
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<tr>
<td>BAQSIMI ONE PACK NASAL POWDER <em>(glucagon)</em></td>
<td>3</td>
<td>QL (2 packs per 30 days)</td>
</tr>
<tr>
<td>BAQSIMI TWO PACK NASAL POWDER <em>(glucagon)</em></td>
<td>3</td>
<td>QL (1 pack per 30 days)</td>
</tr>
<tr>
<td>diazoxide oral suspension</td>
<td>1 or 1b*</td>
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<tr>
<td>GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED <em>(glucagon hcl (rdna))</em></td>
<td>2</td>
<td>QL (2 kits per 30 days)</td>
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<tr>
<td>GLUCAGON EMERGENCY INJECTION KIT <em>(glucagon (rdna))</em></td>
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<td>QL (2 kits per 30 days)</td>
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<tr>
<td>GLUCAGON EMERGENCY INJECTION SOLUTION RECONSTITUTED <em>(glucagon hcl)</em></td>
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<tr>
<td>GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR <em>(glucagon)</em></td>
<td>3</td>
<td>QL (2 packs per 30 days)</td>
</tr>
<tr>
<td>GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR <em>(glucagon)</em></td>
<td>3</td>
<td>QL (2 packs per 30 days)</td>
</tr>
<tr>
<td>GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE <em>(glucagon)</em></td>
<td>3</td>
<td>QL (2 packs per 30 days)</td>
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<tr>
<td>PROGLYCEM ORAL SUSPENSION <em>(diazoxide)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>DIAGNOSTIC TESTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACCU-CHEK AVIVA PLUS IN VITRO STRIP <em>(glucose blood)</em></td>
<td>2</td>
<td>QL (204 strips per 30 days)</td>
</tr>
</tbody>
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<tr>
<td>ACCU-CHEK COMPACT PLUS IN VITRO STRIP (glucose blood)</td>
<td>2</td>
<td>QL (204 strips per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK GUIDE IN VITRO STRIP (glucose blood)</td>
<td>2</td>
<td>QL (204 strips per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK SMARTVIEW IN VITRO STRIP (glucose blood)</td>
<td>2</td>
<td>QL (204 strips per 30 days)</td>
</tr>
<tr>
<td>ACCUTREND GLUCOSE IN VITRO STRIP (glucose blood)</td>
<td>2</td>
<td>QL (204 strips per 30 days)</td>
</tr>
<tr>
<td>ONETOUCH ULTRA IN VITRO STRIP (glucose blood)</td>
<td>2</td>
<td>ST; QL (204 strips per 30 days)</td>
</tr>
<tr>
<td>ONETOUCH VERIO IN VITRO STRIP (glucose blood)</td>
<td>2</td>
<td>QL (204 strips per 30 days)</td>
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<tr>
<td><strong>DIAPHRAGMS</strong>* - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
<td></td>
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<tr>
<td>CAYA VAGINAL DIAPHRAGM (diaphragm arc-spring)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM (diaphragms)</td>
<td>3; $0</td>
<td></td>
</tr>
<tr>
<td>WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<tr>
<td>WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<tr>
<td>WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<tr>
<td>WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<tr>
<td>WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<td>WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<tr>
<td>WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<td>WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM (diaphragm wide seal)</td>
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<tr>
<td><strong>DIBENZODIAZEPINES</strong>*</td>
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</tr>
<tr>
<td>clozapine oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 1 day)</td>
</tr>
<tr>
<td>clozapine oral tablet 200 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>clozapine oral tablet 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>clozapine oral tablet dispersible 100 mg</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 1 day)</td>
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<tr>
<td>clozapine oral tablet dispersible 12.5 mg, 25 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>clozapine oral tablet dispersible 150 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>clozapine oral tablet dispersible 200 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>VERSACLOZ ORAL SUSPENSION (clozapine)</td>
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<td>QL (18 mL per 1 day)</td>
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<tr>
<td><strong>DIBENZO-OXEPINO PYRROLES</strong>*</td>
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<tr>
<td>SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG (asenapine maleate)</td>
<td>3</td>
<td>ST; QL (2 tablets per 1 day)</td>
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<tr>
<td>SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 2.5 MG, 5 MG (asenapine maleate)</td>
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<td>ST; DO</td>
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<tr>
<td>SECUADO TRANSDERMAL PATCH 24 HOUR (asenapine)</td>
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<tr>
<td><em><strong>DIBENZOTHIAZEPINES</strong></em></td>
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<tr>
<td>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg</td>
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<td>DO</td>
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<tr>
<td>quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>quetiapine fumarate oral tablet 100 mg, 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
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<tr>
<td>quetiapine fumarate oral tablet 200 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>quetiapine fumarate oral tablet 300 mg, 400 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>DIBENZOXAZEPINES</strong>*</td>
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<tr>
<td>ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED (loxapine)</td>
<td>3</td>
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<tr>
<td>loxapine succinate oral capsule</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>DIGESTIVE ENZYMES</strong>* --- DRUGS FOR THE STOMACH</td>
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<tr>
<td>CREON ORAL CAPSULE DELAYED RELEASE PARTICLES (pancrelipase (lip-prot-amyl))</td>
<td>2</td>
<td>QL (25 capsules per 1 day)</td>
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<tr>
<td>PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES (pancrelipase (lip-prot-amyl))</td>
<td>3</td>
<td>ST; QL (25 capsules per 1 day)</td>
</tr>
<tr>
<td>PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES (pancrelipase (lip-prot-amyl))</td>
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<td>ST; QL (25 capsules per 1 day)</td>
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<tr>
<td>SUCRAID ORAL SOLUTION (sacrosidase)</td>
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<td>PA; LD</td>
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<tr>
<td>VIOKACE ORAL TABLET (pancrelipase (lip-prot-amyl))</td>
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<td>QL (25 tablets per 1 day)</td>
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<tr>
<td>ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES (pancrelipase (lip-prot-amyl))</td>
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<td>QL (25 capsules per 1 day)</td>
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<tr>
<td><strong>DIHYDROCODEINE COMBINATIONS</strong>*</td>
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<tr>
<td>apap-caff-dihydrocodeine oral capsule</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td>apap-caff-dihydrocodeine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>apap-caff-dihydrocodeine (Dvorah Oral Tablet)</td>
<td>1 or 1b*</td>
<td>QL (6 capsules per 1 day)</td>
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<tr>
<td>trezix oral capsule</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
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<tr>
<td><strong>DIHYDROINDOLOINES</strong>*</td>
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<tr>
<td>molindone hcl oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS</strong>*</td>
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<tr>
<td>alogliptin benzoate oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>JANUVIA ORAL TABLET (sitagliptin phosphate)</td>
<td>2</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS</strong>*</td>
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<tr>
<td>alogliptin-metformin hcl oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>JANUMET ORAL TABLET (sitagliptin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG (sitagliptin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG (sitagliptin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
</tbody>
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<td><strong>DIRECT FACTOR XA INHIBITORS</strong>*</td>
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</tr>
<tr>
<td>ELIQUISS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK (apixaban)</td>
<td>2</td>
<td>QL (74 tablets per 30 days)</td>
</tr>
<tr>
<td>ELIQUISS ORAL TABLET 2,5 MG (apixaban)</td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ELIQUISS ORAL TABLET 5 MG (apixaban)</td>
<td>2</td>
<td>QL (74 tablets per 30 days)</td>
</tr>
<tr>
<td>XARELTO ORAL TABLET 10 MG, 20 MG (rivaroxaban)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>XARELTO ORAL TABLET 15 MG (rivaroxaban)</td>
<td>2</td>
<td>QL (42 tablet per 1 fill)</td>
</tr>
<tr>
<td>XARELTO STARTER PACK ORAL TABLET THERAPY PACK (rivaroxaban)</td>
<td>2</td>
<td>QL (1 pack per 365 days)</td>
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<tr>
<td><strong>DIRECT MUSCLE RELAXANTS</strong>* - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</td>
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<tr>
<td>DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED (dantrolene sodium)</td>
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<tr>
<td>DANTRIUM ORAL CAPSULE (dantrolene sodium)</td>
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<tr>
<td>dantrolene sodium intravenous solution reconstituted</td>
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<tr>
<td>dantrolene sodium oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>dantrolene sodium (Revonto Intravenous Solution Reconstituted)</td>
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<tr>
<td>RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED (dantrolene sodium)</td>
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<tr>
<td><strong>DIRECT RENIN INHIBITORS &amp; THIAZIDE/THIAZIDE-LIKE COMB</strong>*</td>
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<tr>
<td>TEKTURNA HCT ORAL TABLET 150-12,5 MG (aliskiren-hydrochlorothiazide)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>TEKTURNA HCT ORAL TABLET 150-25 MG, 300-12,5 MG, 300-25 MG (aliskiren-hydrochlorothiazide)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>DIRECT RENIN INHIBITORS</strong>*</td>
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<tr>
<td>aliskiren fumarate oral tablet 150 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>aliskiren fumarate oral tablet 300 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>DIURETIC COMBINATIONS</strong>*</td>
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<tr>
<td>ALDACTAZIDE ORAL TABLET (spironolactone-hctz)</td>
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<td>amiloride-hydrochlorothiazide oral tablet</td>
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<td>DYAZIDE ORAL CAPSULE (triamterene-hctz)</td>
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<td>MAXZIDE ORAL TABLET (triamterene-hctz)</td>
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<td>MAXZIDE-25 ORAL TABLET (triamterene-hctz)</td>
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<tr>
<td>spironolactone-hctz oral tablet</td>
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<tr>
<td>triamterene-hctz oral capsule</td>
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<td>triamterene-hctz oral tablet</td>
<td>1 or 1a*</td>
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<tr>
<td><strong>DOPAMINE D1 RECEPTOR AGONISTS</strong>*</td>
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<tr>
<td>CORLOPAM INTRAVENOUS SOLUTION (fenoldopam mesylate)</td>
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<td><em>DOPAMINE RECEPTOR AGONISTS - ERGOT DERIVATIVES</em>**</td>
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<td>CYCLOSET ORAL TABLET (bromocriptine mesylate)</td>
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<tr>
<td><em>DOPAMINE RECEPTOR AGONISTS</em>**</td>
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<td>cabergoline oral tablet</td>
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<td><em>DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS</em>**</td>
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<tr>
<td>alogliptin-pioglitazone oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>ELECTROLYTES &amp; DEXTROSE</em>** - DRUGS FOR NUTRITION</td>
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<td>DEXTROSE 5%/ELECTROLYTE #48 INTRAVENOUS SOLUTION</td>
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<tr>
<td>dextrose in lactated ringers intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>DEXTROSE-NACL INTRAVENOUS SOLUTION 10-0.2 %, 5-0.3 %</td>
<td>3</td>
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<tr>
<td>dextrose-nacl intravenous solution 10-0.45 %, 2.5-0.45 %, 5-0.2 %, 5-0.33 %, 5-0.45 %, 5-0.9 %</td>
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<tr>
<td>DEXTROSE-SODIUM CHLORIDE INTRAVENOUS SOLUTION 5-0.225 %, 5-0.3 %</td>
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<td>dextrose-sodium chloride intravenous solution 5-0.45 %, 5-0.9 %</td>
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<td>ELLIOTTS B INTRATHecal SOLUTION (intrathecal elec-dextrose)</td>
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<td>IONOSOL-MB IN D5W INTRAVENOUS SOLUTION (electrolyte-mb in dextrose)</td>
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<tr>
<td>ISOLYTE-P IN D5W INTRAVENOUS SOLUTION (electrolyte-p in dextrose)</td>
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<tr>
<td>kcl in dextrose-nacl intravenous solution 0.15-5-0.45 %, 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%</td>
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<td>KCL IN DEXTROSE-NACL INTRAVENOUS SOLUTION 20-5-0.225 MEQ/L-%-%, 40-5-0.9 MEQ/L-%-%</td>
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<td>KCL-LACTATED RINGERS-D5W INTRAVENOUS SOLUTION</td>
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<tr>
<td>NORMOSOL-M IN D5W INTRAVENOUS SOLUTION (electrolyte-m in dextrose)</td>
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<td>NORMOSOL-R IN D5W INTRAVENOUS SOLUTION (electrolyte-r in dextrose)</td>
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<tr>
<td>potassium chloride in dextrose intravenous solution</td>
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<td><em>ELECTROLYTES PARENTERAL</em>** - DRUGS FOR NUTRITION</td>
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<td>ISOLYTE-S INTRAVENOUS SOLUTION (electrolyte-s)</td>
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<td>ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION (electrolyte-s (ph 7.4))</td>
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<td>KCL-LIDOCAINE-NACL INTRAVENOUS SOLUTION</td>
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<tr>
<td>lactated ringers intravenous solution</td>
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<tr>
<td>NORMOSOL-R INTRAVENOUS SOLUTION (electrolyte-r)</td>
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<tr>
<td>NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION (electrolyte-r (ph 7.4))</td>
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<td>PLASMA-LYTE 148 INTRAVENOUS SOLUTION (electrolyte-148)</td>
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<td>PLASMA-LYTE A INTRAVENOUS SOLUTION (electrolyte-a)</td>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>potassium chloride in nacl intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ringers intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>TPN ELECTROLYTES INTRAVENOUS CONCENTRATE (parenteral electrolytes)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em><strong>EMERGENCY CONTRACEPTIVES</strong></em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>aftera oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>econtra ez oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>econtra one-step oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>ELLA ORAL TABLET (ulipristal acetate)</td>
<td>3; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgestrel oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>my choice oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>my way oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>new day oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>opcicon one-step oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>option 2 oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>preventeza oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>react oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>take action oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td><em><strong>EMOLLIENT COMBINATIONS</strong></em> - DRUGS FOR THE SKIN**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>lactic acid e external cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em><strong>EMOLLIENT/KERATOLYTIC AGENTS</strong></em> - DRUGS FOR THE SKIN**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>urea (Cerovel External Lotion)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>HYDRO 40 EXTERNAL FOAM (urea)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>urea external cream 40 %</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>UREA EXTERNAL FOAM</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>urea external suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>urea nail external gel</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>urea-c40 external lotion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>urea (Uredeb External Cream)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>uremez-40 external cream</td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>URESOL EXTERNAL CREAM (urea)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em><strong>EMOLLIENT/KERATOLYTIC COMBINATIONS</strong></em> - DRUGS FOR THE SKIN**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LATRIX XM EXTERNAL EMULSION (urea in zn undecyl-lactic acid)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em><strong>EMOLLIENTS</strong></em> - DRUGS FOR THE SKIN**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ammonium lactate external cream</td>
<td>1 or 1b*</td>
<td>QL (450 grams per 30 days)</td>
</tr>
<tr>
<td>ammonium lactate external lotion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>lactic acid external lotion</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>sodium hyaluronate external gel</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>ENZYMES - TOPICAL</strong>* - DRUGS FOR THE SKIN**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SANTYL EXTERNAL OINTMENT <em>(collagenase)</em></td>
<td>3</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td><strong>ENZYMES</strong>* - VITAMINS AND MINERALS**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMPHADASE INJECTION SOLUTION <em>(hyaluronidase bovine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>HYLENEX INJECTION SOLUTION <em>(hyaluronidase human)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>VITRASE INJECTION SOLUTION <em>(hyaluronidase ovine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XIAFLEX INJECTION SOLUTION RECONSTITUTED <em>(collagenase clostrid histolyt)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><strong>ERGOT COMBINATIONS</strong>*</td>
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<td></td>
</tr>
<tr>
<td>ergotamine-caffeine oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>migergot rectal suppository</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>ERYTHROMYCINS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.e.s. 400 oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin base <em>(Ery-Tab Oral Tablet Delayed Release)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED <em>(erythromycin lactobionate)</em></td>
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<td></td>
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<tr>
<td>erythromycin stearate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin base oral capsule delayed release particles</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin base oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin base oral tablet delayed release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin ethylsuccinate oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin ethylsuccinate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>erythromycin oral tablet delayed release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>ERYTHROPOIESIS-STIMULATING AGENTS (ESAS)</strong>* - DRUGS FOR NUTRITION**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ARANESP (ALBUMIN FREE) INJECTION SOLUTION <em>(darbepoetin alfa)</em></td>
<td>4</td>
<td>PA; SP; QL (4 vials per 28 days)</td>
</tr>
<tr>
<td>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 60 MCG/0.3ML <em>(darbepoetin alfa)</em></td>
<td>4</td>
<td>PA; SP; QL (4 syringes per 28 days)</td>
</tr>
<tr>
<td>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 500 MCG/ML <em>(darbepoetin alfa)</em></td>
<td>4</td>
<td>PA; SP; QL (4 syringes per 30 days)</td>
</tr>
<tr>
<td>EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML <em>(epoetin alfa)</em></td>
<td>5</td>
<td>PA; SP; QL (12 mL per 28 days)</td>
</tr>
<tr>
<td>EPOGEN INJECTION SOLUTION 20000 UNIT/ML <em>(epoetin alfa)</em></td>
<td>5</td>
<td>PA; SP; QL (24 vials per 28 days)</td>
</tr>
<tr>
<td>MIRCERA INJECTION SOLUTION PREFILLED SYRINGE <em>(methoxy peg-epoetin beta)</em></td>
<td>5</td>
<td>PA; LD; QL (2 syringes per 28 days)</td>
</tr>
</tbody>
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<tr>
<td>PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (epoetin alfa)</td>
<td>4</td>
<td>PA; SP; QL (12 mL per 28 days)</td>
</tr>
<tr>
<td>PROCRIT INJECTION SOLUTION 2000 UNIT/ML (epoetin alfa)</td>
<td>4</td>
<td>PA; SP; QL (24 vials per 28 days)</td>
</tr>
<tr>
<td>RETACRIT INJECTION SOLUTION (epoetin alfa-epbx)</td>
<td>4</td>
<td>PA; SP; QL (12 mL per 28 days)</td>
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</tbody>
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**ERYTHROPOIETINS*** - DRUGS FOR NUTRITION

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<tr>
<td>ARANESP (ALBUMIN FREE) INJECTION SOLUTION (darbepoetin alfa)</td>
<td>4</td>
<td>PA; SP; QL (4 vials per 28 days)</td>
</tr>
<tr>
<td>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 60 MCG/0.3ML (darbepoetin alfa)</td>
<td>4</td>
<td>PA; SP; QL (4 syringes per 28 days)</td>
</tr>
<tr>
<td>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 500 MCG/ML (darbepoetin alfa)</td>
<td>4</td>
<td>PA; SP; QL (4 syringes per 30 days)</td>
</tr>
<tr>
<td>EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML (epoetin alfa)</td>
<td>5</td>
<td>PA; SP; QL (12 mL per 28 days)</td>
</tr>
<tr>
<td>EPOGEN INJECTION SOLUTION 20000 UNIT/ML (epoetin alfa)</td>
<td>5</td>
<td>PA; SP; QL (24 vials per 28 days)</td>
</tr>
<tr>
<td>MIRCERA INJECTION SOLUTION PREFILLED SYRINGE (methoxy peg-epoetin beta)</td>
<td>5</td>
<td>PA; LD; QL (2 syringes per 28 days)</td>
</tr>
<tr>
<td>PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (epoetin alfa)</td>
<td>4</td>
<td>PA; SP; QL (12 mL per 28 days)</td>
</tr>
<tr>
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<td>4</td>
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<td>RETACRIT INJECTION SOLUTION (epoetin alfa-epbx)</td>
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<td>PA; SP; QL (12 mL per 28 days)</td>
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**ESTROGEN & PROGESTIN***

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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>ACTIVELLA ORAL TABLET (estradiol-norethindrone acet)</td>
<td>3</td>
</tr>
<tr>
<td>estradiol-norethindrone acet (Amabelz Oral Tablet)</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>ANGELIQ ORAL TABLET (drospirenone-estradiol)</td>
<td>3</td>
</tr>
<tr>
<td>BIJUVA ORAL CAPSULE (estradiol-progesterone)</td>
<td>2</td>
</tr>
<tr>
<td>CLIMARA PRO TRANSDERMAL PATCH WEEKLY (estradiol-levonorgestrel)</td>
<td>2</td>
</tr>
<tr>
<td>COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY (estradiol-norethindrone acet)</td>
<td>2</td>
</tr>
<tr>
<td>estradiol-norethindrone acet oral tablet</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>FEMHRT LOW DOSE ORAL TABLET (norethindrone-eth estradiol)</td>
<td>3</td>
</tr>
<tr>
<td>norethindrone-eth estradiol (Fyavolv Oral Tablet)</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>norethindrone-eth estradiol (Jinteli Oral Tablet)</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>estradiol-norethindrone acet (Lopreeza Oral Tablet)</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>estradiol-norethindrone acet (Mimvey Oral Tablet)</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>norethindrone-eth estradiol oral tablet</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>PREFEST ORAL TABLET (estradiol-norgestimate)</td>
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</tr>
<tr>
<td>PREMPHASE ORAL TABLET (conj estrog-medroxyprogest ace)</td>
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</tr>
<tr>
<td>PREMPORO ORAL TABLET (conj estrog-medroxyprogest ace)</td>
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<tr>
<td><em><strong>ESTROGEN RECEPTOR ANTAGONIST</strong></em> - DRUGS FOR CANCER</td>
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<tr>
<td>FASLODEX INTRAMUSCULAR SOLUTION (fulvestrant)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>fulvestrant intramuscular solution</td>
<td>1 or 1b*</td>
<td>PA; SP</td>
</tr>
<tr>
<td><em><strong>ESTROGENS</strong></em></td>
<td></td>
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</tr>
<tr>
<td>ALORA TRANSDERMAL PATCH TWICE WEEKLY (estradiol)</td>
<td>3</td>
<td>QL (8 patch per 28 days)</td>
</tr>
<tr>
<td>CLIMARA TRANSDERMAL PATCH WEEKLY (estradiol)</td>
<td>3</td>
<td>QL (4 patches per 28 days)</td>
</tr>
<tr>
<td>DELESTROGEN INTRAMUSCULAR OIL (estradiol valerate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DEPO-ESTRADIO INTRAMUSCULAR OIL (estradiol cypionate)</td>
<td>3</td>
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</tr>
<tr>
<td>DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM (estradiol)</td>
<td>2</td>
<td>QL (1 packet per 1 day)</td>
</tr>
<tr>
<td>DIVIGEL TRANSDERMAL GEL 1.25 MG/1.25GM (estradiol)</td>
<td>2</td>
<td>QL (30 packets per 30 days)</td>
</tr>
<tr>
<td>estradiol (Dotti Transdermal Patch Twice Weekly)</td>
<td>1 or 1b*</td>
<td>QL (8 patch per 28 days)</td>
</tr>
<tr>
<td>ELESTRIN TRANSDERMAL GEL (estradiol)</td>
<td>3</td>
<td>QL (1 pump per 30 days)</td>
</tr>
<tr>
<td>estradiol oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>estradiol transdermal patch twice weekly</td>
<td>1 or 1b*</td>
<td>QL (8 patch per 28 days)</td>
</tr>
<tr>
<td>estradiol transdermal patch weekly</td>
<td>1 or 1b*</td>
<td>QL (4 patches per 28 days)</td>
</tr>
<tr>
<td>estradiol valerate intramuscular oil</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ESTROGEL TRANSDERMAL GEL (estradiol)</td>
<td>3</td>
<td>QL (1 pump per 30 days)</td>
</tr>
<tr>
<td>EVAMIST TRANSDERMAL SOLUTION (estradiol)</td>
<td>2</td>
<td>QL (2 bottles per 30 days)</td>
</tr>
<tr>
<td>MENEST ORAL TABLET (esterified estrogens)</td>
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</tr>
<tr>
<td>MENOSTAR TRANSDERMAL PATCH WEEKLY (estradiol)</td>
<td>3</td>
<td>QL (4 patch per 28 days)</td>
</tr>
<tr>
<td>PREMARIN INJECTION SOLUTION RECONSTITUTED (estrogens conjugated)</td>
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<tr>
<td>PREMARIN ORAL TABLET (estrogens conjugated)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em><strong>ESTROGENS-ANTINEOPLASTIC</strong></em> - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EMCYT ORAL CAPSULE (estramustine phosphate sodium)</td>
<td>2; OC</td>
<td>PA</td>
</tr>
<tr>
<td><em><strong>EXTENDED-CYCLE CONTRACEPTIVES - ORAL</strong></em></td>
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<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Amethia Lo Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
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<tr>
<td>levonorgest-eth estrad 91-day (Amethia Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Ashlyna Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Camrese Lo Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Camrese Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Daysee Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Fayosim Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
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<tr>
<td>levonorgest-eth estrad 91-day (Introval Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Jaimiss Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth estrad 91-day (Jolressa Oral Tablet)</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>levonorgest-eth est &amp; eth est oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
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<tr>
<td><em>Fabry Disease - Agents</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fabrazyme Intravenous Solution Reconstituted (agalsidase beta)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>Galafold Oral Capsule (migalastat hcl)</td>
<td>5</td>
<td>PA; LD; QL (14 capsules per 30 days)</td>
</tr>
<tr>
<td><em>Fecal Incontinence Bulking Agent - Combinations</em>** - Vitamins and Minerals</td>
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<tr>
<td>Solesta Injection Gel (dextranomer-sodium hyaluronate)</td>
<td>5</td>
<td>LD; SP</td>
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<tr>
<td><em>Fibrin Acid Derivatives</em>**</td>
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<tr>
<td>fenofibrate micronized oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>fenofibrate oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg, 54 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>fenofibrate acid oral capsule delayed release</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>FenoGlide Oral Tablet (fenofibrate)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>Fibricor Oral Tablet (fenofibric acid)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>gemfibrozil oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>Lipofen Oral Capsule (fenofibrate)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>Lopid Oral Tablet (gemfibrozil)</td>
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<td>ST; QL (2 tablets per 1 day)</td>
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<tr>
<td>Tricor Oral Tablet (fenofibrate)</td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>Trilipix Oral Capsule Delayed Release (choline fenofibrate)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<td><em>Fibromyalgia Agent - SNRIS</em>**</td>
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<td>S Avella Oral Tablet (milnacipran hcl)</td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>SAvella Titration Pack Oral (milnacipran hcl)</td>
<td>2</td>
<td>QL (1 pack per 365 days)</td>
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<td><em>Fidaxomicin</em>**</td>
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<td>Dificid Oral Tablet (fidaxomicin)</td>
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<tr>
<td><em>Fluoride Combinations</em>** - Drugs for Nutrition</td>
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<tr>
<td>Floriva Oral Liquid (sodium fluoride-vitamin d)</td>
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<tr>
<td><em>Fluoride Dental Products</em>** - Drugs for the Mouth and Throat</td>
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<tr>
<td>Sodium fluoride (Cavarest Dental Gel)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>Sodium fluoride (Clinpro 5000 Dental Paste)</td>
<td>1 or 1b*</td>
<td></td>
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</tbody>
</table>

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<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>sodium fluoride (Denta 5000 Plus Dental Cream)</td>
<td>1 or 1b*</td>
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<tr>
<td>sodium fluoride (Dentagel Dental Gel)</td>
<td>1 or 1a*</td>
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<tr>
<td>easygel dental gel</td>
<td>1 or 1b*</td>
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<tr>
<td>sodium fluoride (Fluoridex Dental Paste)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium fluoride (Fluoridex Enhanced Whitening Dental Paste)</td>
<td>1 or 1b*</td>
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<tr>
<td>NAFRINSE DAILY/NEUTRAL MOUTH/THROAT SOLUTION RECONSTITUTED (sodium fluoride)</td>
<td>3</td>
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<tr>
<td>NAFRINSE WEEKLY MOUTH/THROAT SOLUTION RECONSTITUTED (sodium fluoride)</td>
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<tr>
<td>PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE (sodium fluoride)</td>
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<tr>
<td>PREVIDENT 5000 DRY MOUTH DENTAL GEL (sodium fluoride)</td>
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<tr>
<td>PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE (sodium fluoride)</td>
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<tr>
<td>PREVIDENT 5000 PLUS DENTAL CREAM (sodium fluoride)</td>
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<tr>
<td>PREVIDENT DENTAL GEL (sodium fluoride)</td>
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<tr>
<td>PREVIDENT MOUTH/THROAT SOLUTION (sodium fluoride)</td>
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<tr>
<td>sf 5000 plus dental cream</td>
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<tr>
<td>sf dental gel</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>sodium fluoride 5000 plus dental cream</td>
<td>1 or 1b*</td>
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<tr>
<td>sodium fluoride 5000 ppm dental cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium fluoride 5000 ppm dental paste</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>sodium fluoride dental cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium fluoride dental gel</td>
<td>1 or 1b*</td>
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<tr>
<td><em>FLUORIDE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>FLURABON ORAL SOLUTION (sodium fluoride)</td>
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<tr>
<td>fluoritab oral solution</td>
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<tr>
<td>fluoritab oral tablet chewable</td>
<td>1 or 1a*; $0</td>
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</tr>
<tr>
<td>flura-drops oral solution</td>
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</tr>
<tr>
<td>sodium fluoride (Nafrinse Drops Oral Solution)</td>
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</tr>
<tr>
<td>sodium fluoride (Nafrinse Oral Tablet Chewable)</td>
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</tr>
<tr>
<td>sodium fluoride oral solution</td>
<td>1 or 1a*; $0</td>
<td>QL (2 mL per 1 day)</td>
</tr>
<tr>
<td>sodium fluoride oral tablet</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>sodium fluoride oral tablet chewable</td>
<td>1 or 1a*; $0</td>
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<td><em>FLUOROQUINOLONES</em>**</td>
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<tr>
<td>BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED (delafloxacin meglumine)</td>
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<tr>
<td>BAXDELA ORAL TABLET (delafloxacin meglumine)</td>
<td>3</td>
<td>PA; QL (28 tablets per 30 days)</td>
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<tr>
<td>CIRO PRO ORAL SUSPENSION RECONSTITUTED (ciprofloxacin)</td>
<td>3</td>
<td>QL (3 bottle per 30 days)</td>
</tr>
<tr>
<td>CIRO PRO ORAL TABLET (ciprofloxacin hcl)</td>
<td>3</td>
<td>QL (28 tablets per 30 days)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>ciprofloxacin hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (28 tablets per 30 days)</td>
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<tr>
<td>ciprofloxacin in d5w intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>LEVAQUIN ORAL TABLET 500 MG, 750 MG (levofloxacin)</td>
<td>3</td>
<td>QL (14 tablets per 30 days)</td>
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<tr>
<td>levofloxacin in d5w intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>levofloxacin intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>levofloxacin oral solution</td>
<td>1 or 1b*</td>
<td>QL (480 mL per 30 days)</td>
</tr>
<tr>
<td>levofloxacin oral tablet</td>
<td>1 or 1b*</td>
<td>QL (14 tablets per 30 days)</td>
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<tr>
<td>moxifloxacin hcl in nacl intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>MOXIFLOXACIN HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>QL (21 tablet per 30 days)</td>
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<tr>
<td>moxifloxacin hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (28 tablet per 30 days)</td>
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<tr>
<td><em>FOLIC ACID ANTAGONISTS RESCUE AGENTS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED (levoleucovorin)</td>
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<tr>
<td>leucovorin calcium injection solution</td>
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<tr>
<td>leucovorin calcium injection solution reconstituted</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>leucovorin calcium oral tablet</td>
<td>1 or 1b*; OC</td>
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</tr>
<tr>
<td>levoleucovorin calcium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>levoleucovorin calcium pf intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td><em>FOLIC ACID/FOLATE COMBINATIONS</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>folic acid-vit b6-vit b12 (Airavite Oral Tablet)</td>
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<tr>
<td>B-6 FOLIC ACID ORAL CAPSULE</td>
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<td>BP VIT 3 ORAL CAPSULE</td>
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<tr>
<td>CENFOL ORAL TABLET (folic acid-vit b6-vit b12)</td>
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<td>fabb oral tablet</td>
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<tr>
<td>fa-vitamin b-6-vitamin b-12 oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>folbee oral tablet</td>
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<tr>
<td>FOLGARD RX ORAL TABLET (folic acid-vit b6-vit b12)</td>
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<tr>
<td>FOLI-D ORAL TABLET (folic acid-cholecalciferol)</td>
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<td>FOLIXAPURE ORAL TABLET (folic acid-cholecalciferol)</td>
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<tr>
<td>folplex 2.2 oral tablet</td>
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<tr>
<td>foltabs 800 oral tablet</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>millguard oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>folic acid-vit b6-vit b12 (Nufol Oral Tablet)</td>
<td>1 or 1b*</td>
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<tr>
<td>folic acid-vit b6-vit b12 (Virt-Gard Oral Tablet)</td>
<td>1 or 1b*</td>
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<tr>
<td>VITAMEZ ORAL CAPSULE (fa-b6-b12-omega 3-phytosterols)</td>
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</tbody>
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<tr>
<td><strong>FOLIC ACID/FOLATES</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>cvs folic acid oral tablet</td>
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<tr>
<td>fa-8 oral capsule</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>fa-8 oral tablet</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>folate oral tablet</td>
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<tr>
<td>folic acid injection solution</td>
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<tr>
<td>folic acid oral capsule 0.8 mg</td>
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<td>folic acid oral tablet 1 mg</td>
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<td>folic acid oral tablet 400 mcg, 800 mcg</td>
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<tr>
<td>gnp folic acid oral tablet</td>
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<tr>
<td>hm folic acid oral tablet</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>kp folic acid oral tablet 800 mcg</td>
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<tr>
<td>px folic acid oral tablet</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>qc folic acid oral tablet</td>
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<tr>
<td>ra folic acid oral tablet</td>
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<td>sm folic acid oral tablet</td>
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<tr>
<td>yl folic acid oral tablet</td>
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<td><strong>FOUR PHASE CONTRACEPTIVES - ORAL</strong>*</td>
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<td>NATAZIA ORAL TABLET (estradiol valerate-dienogest)</td>
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<td><strong>GAA DEFICIENCY TREATMENT - AGENTS</strong>*</td>
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<td>LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED (agalucosidase alfα)</td>
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<tr>
<td><strong>GABA MODULATORS</strong>*</td>
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<tr>
<td>tiagabine hcl oral tablet</td>
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<tr>
<td>vigabatrin oral packet</td>
<td>1 or 1b*</td>
<td>LD; SP; QL (6 packets per 1 day)</td>
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<tr>
<td>vigabatrin oral tablet</td>
<td>1 or 1b*</td>
<td>LD; SP; QL (6 tablets per 1 day)</td>
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<tr>
<td>vigabatrin (Vigadrone Oral Packet)</td>
<td>1 or 1b*</td>
<td>LD; QL (6 packets per 1 day)</td>
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<td><strong>GALLSTONE SOLUBILIZING AGENTS</strong>* - DRUGS FOR THE STOMACH</td>
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<tr>
<td>ACTIGALL ORAL CAPSULE (ursodiol)</td>
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<td>CHENODAL ORAL TABLET (chenodiol)</td>
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<td>URSO 250 ORAL TABLET (ursodiol)</td>
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<td>URSO FORTE ORAL TABLET (ursodiol)</td>
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<td>ursodiol oral capsule</td>
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<tr>
<td>ursodiol oral tablet</td>
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<td><strong>GASTROINTESTINAL ANTIALERGY AGENTS</strong>* - DRUGS FOR THE STOMACH</td>
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<tr>
<td>cromolyn sodium oral concentrate</td>
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<tr>
<td>GASTROCROM ORAL CONCENTRATE (cromolyn sodium)</td>
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<td><strong>GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS</strong>*</td>
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<td>AMITIZA ORAL CAPSULE (lubiprostone)</td>
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<td>QL (2 capsules per 1 day)</td>
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<td><strong>GASTROINTESTINAL STIMULANTS</strong>* - DRUGS FOR THE STOMACH</td>
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<td>DEXPANTHENOL INJECTION SOLUTION</td>
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<tr>
<td>metoclopramide hcl injection solution</td>
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<td>metoclopramide hcl oral solution</td>
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<td>metoclopramide hcl oral tablet</td>
<td>1 or 1a*</td>
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<td>METOCLOPRAMIDE HCL ORAL TABLET DISPERCIBLE 10 MG</td>
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<tr>
<td>metoclopramide hcl oral tablet dispersible 5 mg</td>
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<td>REGLAN ORAL TABLET (metoclopramide hcl)</td>
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<td><strong>GENITOURINARY IRRIGANTS</strong>* - DRUGS FOR THE URINARY SYSTEM</td>
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<td>acetic acid irrigation solution</td>
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<tr>
<td>aminoacetic acid irrigation solution</td>
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<tr>
<td>sodium chloride (gu irrigant) (Argyle Sterile Saline Irrigation Solution)</td>
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<tr>
<td>sodium chloride (gu irrigant) (Curity Sterile Saline Irrigation Solution)</td>
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<td>glycine irrigation solution</td>
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<tr>
<td>glycine urologic irrigation solution</td>
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<td>RENACIDIN IRRIGATION SOLUTION (citric ac-gluconolact-mg carb)</td>
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<td>RESECTISOL IRRIGATION SOLUTION (mannitol (gu irrigant))</td>
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<td>SORBITOL IRRIGATION SOLUTION</td>
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<td>SORBITOL-MANNITOL IRRIGATION SOLUTION</td>
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<td><strong>GLABELLAR LINES (FROWN LINES) AGENTS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>BOTOX COSMETIC INTRAMUSCULAR SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA</td>
</tr>
<tr>
<td>(onabotulinumtoxina (cosmetic))</td>
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<tr>
<td><strong>GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOGS</strong>* - DRUGS FOR THE STOMACH</td>
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<tr>
<td>GATTEX SUBCUTANEOUS KIT (teduglutide (rdna))</td>
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<td>PA; LD; SP</td>
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<td><strong>GLUCOCORTICOSTEROIDS</strong>*</td>
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<tr>
<td>budesonide er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>budesonide oral capsule delayed release particles</td>
<td>1 or 1b*</td>
<td>QL (3 capsule per 1 day)</td>
</tr>
<tr>
<td>CORTEF ORAL TABLET (hydrocortisone)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>cortisone acetate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>dexamethasone (Decadron Oral Tablet)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>DEPO-MEDROL INJECTION SUSPENSION (methylprednisolone acetate)</td>
<td>3</td>
<td></td>
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<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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<tr>
<td>DEXABLISS ORAL TABLET THERAPY PACK</td>
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<td>DEXAMETHASONE (LA) INJECTION SUSPENSION</td>
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<td>DEXAMETHASONE INTENSOL ORAL CONCENTRATE (dexamethasone)</td>
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<tr>
<td>dexamethasone oral elixir</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>dexamethasone oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>dexamethasone oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>dexamethasone oral tablet therapy pack</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>dexamethasone sod phosphate pf injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DEXAMETHASONE SOD PHOSPHATE PF INJECTION SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
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<tr>
<td>DEXAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION 10 MG/ML, 4 MG/ML</td>
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</tr>
<tr>
<td>dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml</td>
<td>1 or 1b*</td>
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<td>DXEVO 11-DAY ORAL TABLET THERAPY PACK (dexamethasone)</td>
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<td>ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES (budesonide)</td>
<td>3</td>
<td>QL (3 capsule per 1 day)</td>
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<tr>
<td>HEMADY ORAL TABLET (dexamethasone)</td>
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<tr>
<td>hydrocortisone oral tablet</td>
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<td>KENALOG INJECTION SUSPENSION (triamcinolone acetonide)</td>
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<tr>
<td>KENALOG-80 INJECTION SUSPENSION (triamcinolone acetonide)</td>
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<tr>
<td>MEDROL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG (methylprednisolone)</td>
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<tr>
<td>MEDROL ORAL TABLET 2 MG (methylprednisolone)</td>
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<tr>
<td>MEDROL ORAL TABLET THERAPY PACK (methylprednisolone)</td>
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<tr>
<td>methylprednisolone acetate injection suspension 40 mg/ml</td>
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<td>METHYLPRREINSOLONE ACETATE INJECTION SUSPENSION 80 MG/ML</td>
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<td>methylprednisolone oral tablet</td>
<td>1 or 1a*</td>
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<tr>
<td>methylprednisolone oral tablet therapy pack</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>methylprednisolone sodium succ injection solution reconstituted</td>
<td>1 or 1b*</td>
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<tr>
<td>MILLIPRED DP 12-DAY ORAL TABLET THERAPY PACK (prednisolone)</td>
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<tr>
<td>MILLIPRED ORAL TABLET (prednisolone)</td>
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<tr>
<td>ORAPRED ODT ORAL TABLET DISPERSIBLE 10 MG, 30 MG (prednisolone sodium phosphate)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>ORAPRED ODT ORAL TABLET DISPERSIBLE 15 MG (prednisolone sodium phosphate)</td>
<td>3</td>
<td>DO</td>
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<tr>
<td>ORTIKOS ORAL CAPSULE EXTENDED RELEASE 24 HOUR (budesonide)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>PEDIAPRED ORAL SOLUTION (prednisolone sodium phosphate)</td>
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<tbody>
<tr>
<td>prednisolone oral solution</td>
<td>1 or 1a</td>
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<tr>
<td>prednisolone sodium phosphate oral solution</td>
<td>1 or 1a</td>
<td></td>
</tr>
<tr>
<td>prednisolone sodium phosphate oral tablet dispersible 10 mg, 30 mg</td>
<td>1 or 1a</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>prednisolone sodium phosphate oral tablet dispersible 15 mg</td>
<td>1 or 1a</td>
<td>DO</td>
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<td>PREDNISONE INTENSOL ORAL CONCENTRATE (prednisone)</td>
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</tr>
<tr>
<td>prednisone oral solution</td>
<td>1 or 1a</td>
<td></td>
</tr>
<tr>
<td>prednisone oral tablet</td>
<td>1 or 1a</td>
<td></td>
</tr>
<tr>
<td>prednisone oral tablet therapy pack</td>
<td>1 or 1a</td>
<td></td>
</tr>
<tr>
<td>SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED (hydrocortisone sod succinate)</td>
<td>3</td>
<td></td>
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<tr>
<td>SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED (methylprednisolone sodium succ)</td>
<td>3</td>
<td></td>
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<tr>
<td>taperdex 12-day oral tablet therapy pack</td>
<td>1 or 1b</td>
<td></td>
</tr>
<tr>
<td>dexamethasone (Taperdex 6-Day Oral Tablet Therapy Pack)</td>
<td>1 or 1b</td>
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</tr>
<tr>
<td>taperdex 7-day oral tablet therapy pack</td>
<td>1 or 1b</td>
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<tr>
<td>TOPIDEX INJECTION KIT</td>
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<td></td>
</tr>
<tr>
<td>TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION</td>
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<tr>
<td>TRIAMCINOLONE DIACETATE INJECTION SUSPENSION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR (budesonide)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ZCORT 7-DAY ORAL TABLET THERAPY PACK</td>
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<tr>
<td>ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER (triamcinolone acetonide)</td>
<td>5</td>
<td>PA; LD; QL (1 injection per 1 knee)</td>
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**GLUCOSE MONITORING TEST SUPPLIES*** - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT

<table>
<thead>
<tr>
<th>Nombre del dispositivo</th>
<th>Nivel</th>
<th>Requisitos de cobertura y límite</th>
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<tbody>
<tr>
<td>1ST TIER UNILET COMFORTOUCH</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>ACCU-CHEK FASTCLIX LANCET KIT (lancets misc.)</td>
<td>2</td>
<td>QL (200 units per 30 days)</td>
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<tr>
<td>ACCU-CHEK FASTCLIX LANCETS (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK MULTICLIJI LANCET DEV KIT (lancets misc.)</td>
<td>2</td>
<td>QL (200 units per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK MULTICLIJI LANCETS (lancets)</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK SAFE-T PRO LANCETS (lancets)</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK SOFTCLIX LANCET DEV KIT (lancets misc.)</td>
<td>2</td>
<td>QL (200 units per 30 days)</td>
</tr>
<tr>
<td>ACCU-CHEK SOFTCLIX LANCETS (lancets)</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACTI-LANCE 28G</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACTI-LANCE LITE LANCETS 28G</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACTI-LANCE SPECIAL LANCETS 17G</td>
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<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>ACTI-LANCE UNIVERSAL 23G</td>
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<tr>
<td>ADJUSTABLE LANCING DEVICE</td>
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<tr>
<td>ADVANCED MOBILE LANCET</td>
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<tr>
<td>ADVOCATE LANCETS (lancets)</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>ADVOCATE LANCETS 30G (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>ADVOCATE LANCING DEVICE (lancet devices)</td>
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<tr>
<td>ADVOCATE RAPID-SAFE LANCING (lancet devices)</td>
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<td>ADVOCATE SAFETY LANCETS (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>ADVOCATE SAFETY LANCETS 26G (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>AGAMATRIX ULTRA-THIN LANCETS (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>AIMSCO TWIST LANCETS 32G</td>
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<tr>
<td>AIMSCO TWIST LANCETS 33G (lancets)</td>
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<tr>
<td>ALTERNATE SITE LANCING DEVICE</td>
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<td>AQUA LANCE ADJUSTABLE LANCING DEVICE</td>
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<td>AQUALANCE LANCETS 30G (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<td>ASSURE COMFORT LANCETS 28G</td>
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<td>ASSURE HAEMOLANCE PLUS MICRO (lancets)</td>
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<td>ASSURE HAEMOLANCE PLUS NORMAL (lancets)</td>
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<td>ASSURE HAEMOLANCE PLUS PED (lancets)</td>
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<td>ASSURE LANCE LANCETS (lancets)</td>
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<td>ASSURE LANCE LANCETS 21G (lancets)</td>
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<td>ASSURE LANCE PLUS SAFETY 25G (lancets)</td>
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<td>ASSURE LANCE PLUS SAFETY 30G (lancets)</td>
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<td>AUTOLET LITE CLINISAFE KIT (lancets misc.)</td>
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<td>BD MICROTAINER LANCETS (lancets)</td>
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<tr>
<td>BULLEYE MINI SAFETY LANCETS</td>
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<td>CAREONE LANCET ULTRA THIN 28G</td>
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<td>QL (200 lancets per 30 days)</td>
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<td>CARETOUCH TWIST LANCETS 28G (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>CARETOUCH TWIST LANCETS 30G (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>CARETOUCH TWIST LANCETS 33G (lancets)</td>
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<td>CLEANLET LANCETS 28G (lancets)</td>
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<td>COAGUCHEK LANCETS (lancets)</td>
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<td>CVS LANCETS 21G</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>CVS LANCETS MICRO THIN 33G</td>
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<td>QL (200 lancets per 30 days)</td>
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<td>PA; QL (2 units per 28 days)</td>
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<td>UNIVERSAL 1 LANCETS ULTRA THIN (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>VALUE PLUS LANCET STANDARD 21G</td>
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<tr>
<td>VALUE PLUS LANCETS SUPER THIN</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
</tr>
<tr>
<td>VALUE PLUS LANCETS THIN 26G</td>
<td>2</td>
<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>VALUE PLUS LANCING DEVICE</td>
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<tr>
<td>VALUMARK LANCET SUPER THIN 30G</td>
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<tr>
<td>VALUMARK LANCET ULTRA THIN 28G</td>
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<tr>
<td>VIDA MIA AUTOLET LANCING DEV (lancet devices)</td>
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<tr>
<td>VIDA MIA UNILET LANCETS 28G (lancets)</td>
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<tr>
<td>VIDA MIA UNILET LANCETS 30G (lancets)</td>
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<td>QL (200 lancets per 30 days)</td>
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<tr>
<td>VIVAGUARD LANCETS (lancets)</td>
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<td>VIVAGUARD LANCING DEVICE (lancet devices)</td>
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<td>WALGREENS ADV TRAVEL LANCETS</td>
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<td>QL (200 lancets per 30 days)</td>
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<td>WALGREENS LANCETS (lancets)</td>
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<td>WALGREENS LANCETS MICRO THIN</td>
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<tr>
<td>WALGREENS LANCETS SUPER THIN</td>
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<td>WALGREENS THIN LANCETS (lancets)</td>
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<td>WALGREENS ULTRA THIN LANCETS (lancets)</td>
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<td><em>GLYCO PROTEIN IIB/IIIA RECEPTOR INHIBITORS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>AGGRASTAT INTRAVENOUS CONCENTRATE (tirofiban hcl)</td>
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<tr>
<td>AGGRASTAT INTRAVENOUS SOLUTION (tirofiban hcl in nacl)</td>
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<tr>
<td>eptifibatide intravenous solution</td>
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<tr>
<td>INTEGRILIN INTRAVENOUS SOLUTION (eptifibatide)</td>
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<tr>
<td><em>GLYC CYCLINES</em>**</td>
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<tr>
<td>TIGECYCLINE INTRAVENOUS SOLUTION RECONSTITUTED</td>
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<tr>
<td>TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED (tigecycline)</td>
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<tr>
<td><em>GNRH/LHRH ANTAGONISTS</em>**</td>
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<tr>
<td>CETROTIDE SUBCUTANEOUS KIT (cetrorelix acetate)</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td>GANIRELIX ACETATE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td>ORILISSA ORAL TABLET 150 MG (elagolix sodium)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td>ORILISSA ORAL TABLET 200 MG (elagolix sodium)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
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<tr>
<td><em>GOLD COMPOUNDS</em>**</td>
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<tr>
<td>RIDAURA ORAL CAPSULE (auranofin)</td>
<td>2</td>
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<tr>
<td><em>GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED (degarelix acetate)</td>
<td>3</td>
<td>SP</td>
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<td>FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED (degarelix acetate)</td>
<td>3</td>
<td>PA; SP; QL (1 kit per 28 days)</td>
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<tr>
<td><em>GOUT AGENT COMBINATIONS</em>**</td>
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<tr>
<td>colchicine-probenecid oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>GOUT AGENTS</strong>*</td>
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<tr>
<td>allopurinol oral tablet</td>
<td>1 or 1a*</td>
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<tr>
<td>allopurinol sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
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<td>ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED (allopurinol sodium)</td>
<td>3</td>
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<tr>
<td>colchicine oral tablet</td>
<td>2</td>
<td>QL (2.3 tablet per 1 day)</td>
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<tr>
<td>febuxostat oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>GLOPERBA ORAL SOLUTION (colchicine)</td>
<td>3</td>
<td>ST; QL (2 bottles per 30 days)</td>
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<tr>
<td>KRYSTEXXA INTRAVENOUS SOLUTION (pegloticase)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td>ZYLOPRIM ORAL TABLET (allopurinol)</td>
<td>3</td>
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<tr>
<td><strong>GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF)</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (pegfilgrastim-jmdb)</td>
<td>5</td>
<td>PA; SP; QL (2 syringes per 30 days)</td>
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<tr>
<td>GRANIX SUBCUTANEOUS SOLUTION (tbo-filgrastim)</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td>GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (tbo-filgrastim)</td>
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<td>PA; SP</td>
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<tr>
<td>NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT (pegfilgrastim)</td>
<td>4</td>
<td>PA; SP; QL (2 injectors/kits per 28 days)</td>
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<tr>
<td>NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (pegfilgrastim)</td>
<td>4</td>
<td>PA; SP; QL (2 syringes per 28 days)</td>
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<tr>
<td>NEUPOGEN INJECTION SOLUTION (filgrastim)</td>
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<td>PA; SP</td>
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<tr>
<td>NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE (filgrastim)</td>
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<td>PA; SP</td>
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<tr>
<td>NIVESTYM INJECTION SOLUTION (filgrastim-aafi)</td>
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<td>PA; SP</td>
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<tr>
<td>NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE (filgrastim-aafi)</td>
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<td>PA; SP</td>
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<tr>
<td>UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (pegfilgrastim-cbqv)</td>
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<td>PA; SP</td>
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<tr>
<td>ZARXIO INJECTION SOLUTION PREFILLED SYRINGE (filgrastim-sndz)</td>
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<td>PA; SP</td>
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<tr>
<td>ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (pegfilgrastim-bmez)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 injections per 30 days)</td>
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<tr>
<td><strong>GRANULOCYTE/MACROPHAGE COLONY-STIMULATING FACTOR (GM-CSF)</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>LEUKINE INJECTION SOLUTION RECONSTITUTED (sargramostim)</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td><strong>GROWTH HORMONE RECEPTOR ANTAGONISTS</strong>*</td>
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<tr>
<td>SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED (pegvisomant)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 vial per 1 day)</td>
</tr>
<tr>
<td><strong>GROWTH HORMONE RELEASING HORMONES (GHRH)</strong>*</td>
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<tr>
<td>EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED (tesamorelin acetate)</td>
<td>5</td>
<td>PA; LD; QL (1 package per 30 days)</td>
</tr>
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<tr>
<td><strong>GROWTH HORMONES</strong>*</td>
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<tr>
<td>GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED (somatropin)</td>
<td>4</td>
<td>PA; SP; QL (1 syringe per 1 day)</td>
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<tr>
<td>GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED (somatropin)</td>
<td>4</td>
<td>PA; SP; QL (1 vial per 1 day)</td>
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<tr>
<td>HUMATROPE INJECTION SOLUTION RECONSTITUTED 12 MG, 5 MG, 6 MG (somatropin)</td>
<td>4</td>
<td>PA; SP; QL (1 vial per 1 day)</td>
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<tr>
<td>HUMATROPE INJECTION SOLUTION RECONSTITUTED 24 MG (somatropin)</td>
<td>4</td>
<td>PA; SP; QL (1 injection per 1 day)</td>
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<tr>
<td>SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG (somatropin (non-refrigerated))</td>
<td>5</td>
<td>PA; LD; QL (1 vial per 1 day)</td>
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<tr>
<td>SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 5 MG, 6 MG (somatropin (non-refrigerated))</td>
<td>5</td>
<td>PA; LD; QL (1 solution per 1 day)</td>
</tr>
<tr>
<td>ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED (somatropin (non-refrigerated))</td>
<td>5</td>
<td>PA; SP; QL (1 injection per 1 day)</td>
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<tr>
<td><strong>H-2 ANTAGONISTS</strong>*</td>
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<tr>
<td>cimetidine hcl oral solution</td>
<td>1 or 1b*</td>
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<tr>
<td>cimetidine oral tablet 200 mg, 400 mg</td>
<td>1 or 1b*</td>
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<tr>
<td>cimetidine oral tablet 300 mg</td>
<td>1 or 1b*</td>
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<tr>
<td>cimetidine oral tablet 800 mg</td>
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<tr>
<td>famotidine intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>famotidine oral suspension reconstituted</td>
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<td>famotidine oral tablet 20 mg</td>
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<td>famotidine oral tablet 40 mg</td>
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<td>famotidine premixed intravenous solution</td>
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<td>nizatidine oral capsule</td>
<td>1 or 1b*</td>
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<tr>
<td>nizatidine oral solution</td>
<td>1 or 1b*</td>
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<tr>
<td>PEPCID ORAL TABLET 20 MG (famotidine)</td>
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<td>(QL (4 tablets per 1 day)</td>
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<tr>
<td>PEPCID ORAL TABLET 40 MG (famotidine)</td>
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<td>(QL (2 tablets per 1 day)</td>
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<td><strong>HEMATORHEOLOGIC AGENTS</strong>* - DRUGS FOR THE BLOOD</td>
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<tr>
<td>pentoxifylline er oral tablet extended release</td>
<td>1 or 1b*</td>
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<td><strong>HEMIN</strong>* - DRUGS FOR THE BLOOD</td>
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<td>PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED (hemin)</td>
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<td><strong>HEMOSTATIC COMBINATIONS - TOPICAL</strong>*</td>
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<tr>
<td>ARTISS EXTERNAL SOLUTION (fibrin sealant component)</td>
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<tr>
<td>THROMBI-GEL 10 EXTERNAL PAD (thrombin-cmc-cacl-gelatin)</td>
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<td>THROMBI-GEL 100 EXTERNAL PAD (thrombin-cmc-cacl-gelatin)</td>
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<td>THROMBI-GEL 40 EXTERNAL PAD (thrombin-cmc-cacl-gelatin)</td>
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<td>THROMBI-PAD EXTERNAL PAD (thrombin-cmc-cacl)</td>
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<tr>
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<td>TISSEEL EXTERNAL SOLUTION (<em>fibrin sealant component</em>)</td>
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<td><strong>HEMOSTATICS - SYSTEMIC</strong>*</td>
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<tr>
<td>AMICAR ORAL SOLUTION (<em>aminocaproic acid</em>)</td>
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<td>QL (120 mL per 1 day)</td>
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<tr>
<td>AMICAR ORAL TABLET 1000 MG (<em>aminocaproic acid</em>)</td>
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<tr>
<td>AMICAR ORAL TABLET 500 MG (<em>aminocaproic acid</em>)</td>
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<tr>
<td>aminocaproic acid intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>aminocaproic acid oral solution</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 1 day)</td>
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<tr>
<td>aminocaproic acid oral tablet 1000 mg</td>
<td>1 or 1b*</td>
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<td>aminocaproic acid oral tablet 500 mg</td>
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<td>QL (60 tablets per 1 day)</td>
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<td>CYKLOKAPRON INTRAVENOUS SOLUTION (<em>tranexamic acid</em>)</td>
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<td>LYSTEDA ORAL TABLET (<em>tranexamic acid</em>)</td>
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<td>QL (6 tablets per 1 day)</td>
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<td>tranexamic acid intravenous solution</td>
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</tr>
<tr>
<td>tranexamic acid oral tablet</td>
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<td>QL (6 tablets per 1 day)</td>
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<td>TRANEXAMIC ACID-NACL INTRAVENOUS SOLUTION</td>
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<td><strong>HEMOSTATICS - TOPICAL</strong>*</td>
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<td>ACTIFOAM COLLAGEN SPONGE EXTERNAL (<em>absorbable collagen hemostat</em>)</td>
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<td>AVITENE EXTERNAL PAD (<em>microfibrillar coll hemostat</em>)</td>
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<td>AVITENE FLOUR EXTERNAL POWDER (<em>microfibrillar coll hemostat</em>)</td>
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<td>ENDO AVITENE EXTERNAL (<em>absorbable collagen hemostat</em>)</td>
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<td>GEL-FLOW NT EXTERNAL PREFILLED SYRINGE (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM COMPRESSED SIZE 100 EXTERNAL (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM DENTAL PACK SIZE 4 EXTERNAL (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM MOUTH/THROAT POWDER (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM SPONGE EXTERNAL (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM SPONGE SIZE 100 EXTERNAL (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM SPONGE SIZE 200 EXTERNAL (<em>gelatin absorbable</em>)</td>
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<td>GELFOAM SPONGE SIZE 50 EXTERNAL (<em>gelatin absorbable</em>)</td>
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<tr>
<td>INSTAT EXTERNAL PAD (<em>absorbable collagen hemostat</em>)</td>
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<tr>
<td>INTERCEED (TC7) EXTERNAL PAD (<em>oxidized cellulose</em>)</td>
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<tr>
<td>INTERCEED EXTERNAL PAD (<em>oxidized cellulose</em>)</td>
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<tr>
<td>RECOTHROM EXTERNAL SOLUTION RECONSTITUTED (*thrombin (recombinant))</td>
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<tr>
<td>RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED (*thrombin (recombinant))</td>
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<tr>
<td>SURGICEL FIBRILLAR EXTERNAL PAD (<em>oxidized cellulose</em>)</td>
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<tr>
<td>SURGICEL NU-KNIT EXTERNAL PAD (<em>oxidized cellulose</em>)</td>
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<tbody>
<tr>
<td>SYRINGE AVITENE EXTERNAL (absorbable collagen hemostat)</td>
<td>3</td>
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</tr>
<tr>
<td>TACHOSIL EXTERNAL PATCH (absorbable fibrin sealant)</td>
<td>3</td>
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</tr>
<tr>
<td>THROMBIN-JMI EPISTAXIS EXTERNAL KIT (thrombin)</td>
<td>3</td>
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<tr>
<td>THROMBIN-JMI EXTERNAL KIT (thrombin)</td>
<td>3</td>
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<tr>
<td>THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED (thrombin)</td>
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<tr>
<td>THROMBOGEN EXTERNAL KIT (thrombin)</td>
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<tr>
<td>THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED (thrombin)</td>
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</tr>
<tr>
<td>ULTRAFOAM SPONGE 2X6.25X7CM EXTERNAL (microfibrillar coll hemostat)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRAFOAM SPONGE 8X12.5X1CM EXTERNAL (microfibrillar coll hemostat)</td>
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<td></td>
</tr>
<tr>
<td>ULTRAFOAM SPONGE 8X12.5X3CM EXTERNAL (microfibrillar coll hemostat)</td>
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<tr>
<td>ULTRAFOAM SPONGE 8X25X1CM EXTERNAL (microfibrillar coll hemostat)</td>
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<td></td>
</tr>
<tr>
<td>ULTRAFOAM SPONGE 8X6.25X1CM EXTERNAL (microfibrillar coll hemostat)</td>
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<tr>
<td><strong>HEPARINS AND HEPARINOID-LIKE AGENTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>heparin lock flush intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>HEPARIN SOD (PORCINE) IN D5W INTRAVENOUS SOLUTION 100 UNIT/ML, 25000-5 UT/500ML-%</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>heparin sod (porcine) in d5w intravenous solution 40-5 unit/ml-%</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>heparin sodium (porcine) injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>HEPARIN SODIUM (PORCINE) INJECTION SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>heparin sodium (porcine) pf injection solution 5000 unit/0.5ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>HEPARIN SODIUM (PORCINE) PF INJECTION SOLUTION 5000 UNIT/ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>heparin sodium lock flush intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>HEPMED COMBINATION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>HEPATITIS B AGENTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>adefovir dipivoxil oral tablet</td>
<td>4</td>
<td>SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>BARACLUDE ORAL SOLUTION (entecavir)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>entecavir oral tablet</td>
<td>4</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>EPIVIR HBV ORAL SOLUTION (lamivudine)</td>
<td>5</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>EPIVIR HBV ORAL TABLET (lamivudine)</td>
<td>5</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>HEPSERA ORAL TABLET (adefovir dipivoxil)</td>
<td>5</td>
<td>SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>lamivudine oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>VEMLDY ORAL TABLET (tenofovir alafenamide fumarate)</td>
<td>5</td>
<td>SP; QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td><em>HEPATITIS C AGENTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PEGASYS PROCLICK SUBCUTANEOUS SOLUTION (peginterferon alfa-2a)</td>
<td>4</td>
<td>SP; QL (4 pen per 28 days)</td>
</tr>
<tr>
<td>PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/0.5ML (peginterferon alfa-2a)</td>
<td>4</td>
<td>SP; QL (2 syringe per 28 days)</td>
</tr>
<tr>
<td>PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML (peginterferon alfa-2a)</td>
<td>4</td>
<td>SP; QL (4 vials per 28 days)</td>
</tr>
<tr>
<td>PEGINTRON SUBCUTANEOUS KIT (peginterferon alfa-2b)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>ribavirin oral capsule</td>
<td>4</td>
<td>SP</td>
</tr>
<tr>
<td>ribavirin oral tablet</td>
<td>4</td>
<td>SP</td>
</tr>
<tr>
<td>SOVALDI ORAL PACKET 150 MG (sofosbuvir)</td>
<td>5</td>
<td>PA; QL (1 packet per 1 day)</td>
</tr>
<tr>
<td>SOVALDI ORAL PACKET 200 MG (sofosbuvir)</td>
<td>5</td>
<td>PA; QL (2 packets per 1 day)</td>
</tr>
<tr>
<td>SOVALDI ORAL TABLET 200 MG (sofosbuvir)</td>
<td>4</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SOVALDI ORAL TABLET 400 MG (sofosbuvir)</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS</em>**</td>
<td></td>
<td></td>
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<tr>
<td>nitisinone oral capsule</td>
<td>4</td>
<td>PA; LD</td>
</tr>
<tr>
<td>NITYR ORAL TABLET (nitisinone)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>ORFADIN ORAL CAPSULE (nitisinone)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>ORFADIN ORAL SUSPENSION (nitisinone)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><em>HERPES AGENTS - PURINE ANALOGUES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>acyclovir oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>acyclovir oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>acyclovir oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>acyclovir sodium intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>valacyclovir hcl oral tablet 1 gm</td>
<td>1 or 1b*</td>
<td>QL (30 tablets per 1 fill)</td>
</tr>
<tr>
<td>valacyclovir hcl oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (60 tablets per 1 fill)</td>
</tr>
<tr>
<td>ZOVIRAX ORAL SUSPENSION (acyclovir)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ZOVIRAX ORAL TABLET (acyclovir)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>HERPES AGENTS - THYMIDINE ANALOGUES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>famciclovir oral tablet 125 mg, 250 mg</td>
<td>1 or 1b*</td>
<td>QL (60 tablets per 1 fill)</td>
</tr>
<tr>
<td>famciclovir oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (21 tablets per 1 fill)</td>
</tr>
<tr>
<td><em>HMG COA REDUCTASE INHIBITORS</em>**</td>
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</tr>
<tr>
<td>atorvastatin calcium oral tablet 10 mg, 20 mg</td>
<td>1 or 1b*; $0</td>
<td>DO</td>
</tr>
<tr>
<td>atorvastatin calcium oral tablet 40 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>atorvastatin calcium oral tablet 80 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>fluvastatin sodium er oral tablet extended release 24 hour</td>
<td>1 or 1b*; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>fluvastatin sodium oral capsule</td>
<td>1 or 1b*; $0</td>
<td>DO</td>
</tr>
<tr>
<td>lovastatin oral tablet 10 mg, 20 mg</td>
<td>1 or 1b*; $0</td>
<td>DO</td>
</tr>
<tr>
<td>* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.</td>
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<tbody>
<tr>
<td>lovastatin oral tablet 40 mg</td>
<td>1 or 1b*; $0</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg</td>
<td>1 or 1b*; $0</td>
<td>DO</td>
</tr>
<tr>
<td>pravastatin sodium oral tablet 80 mg</td>
<td>1 or 1b*; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>rosuvastatin calcium oral tablet 10 mg, 5 mg</td>
<td>1 or 1b*; $0</td>
<td>DO</td>
</tr>
<tr>
<td>rosuvastatin calcium oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</td>
<td>1 or 1b*; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>simvastatin oral tablet 80 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
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**HOMEOPATHIC PRODUCTS*** - VITAMINS AND MINERALS

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<thead>
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<th>Nivel de medicamento</th>
<th>Requisitos de cobertura y límite</th>
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<tbody>
<tr>
<td>RAPID GEL RX EXTERNAL GEL</td>
<td>3</td>
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<tr>
<td>WELLMIND VERTIGO ORAL TABLET (homeopathic products)</td>
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**HOMOCYSTINURIA TREATMENT - AGENTS***

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<tbody>
<tr>
<td>CYSTADANE ORAL POWDER (betaine)</td>
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**HUMAN INSULIN***

<table>
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<th>Nivel de medicamento</th>
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<tbody>
<tr>
<td>BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>INJECTOR (insulin lispro)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>(insulin lispro)</td>
<td></td>
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</tr>
<tr>
<td>HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>PEN-INJECTOR (insulin lispro prot &amp; lispro)</td>
<td></td>
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<tr>
<td>HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION (insulin</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
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<tr>
<td>lispro prot &amp; lispro)</td>
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<tr>
<td>HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>PEN-INJECTOR (insulin lispro prot &amp; lispro)</td>
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<td></td>
</tr>
<tr>
<td>HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (insulin</td>
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<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>lispro prot &amp; lispro)</td>
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<tr>
<td>HUMALOG SUBCUTANEOUS SOLUTION (insulin lispro)</td>
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<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE (insulin</td>
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<tr>
<td>lispro)</td>
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<tr>
<td>HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>INJECTOR (insulin nph isophane &amp; regular)</td>
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</tr>
<tr>
<td>HUMULIN 70/30 SUBCUTANEOUS SUSPENSION (insulin nph</td>
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<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>isophane &amp; regular)</td>
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<tr>
<td>HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>INJECTOR (insulin nph human (isophane))</td>
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<tr>
<td>HUMULIN N SUBCUTANEOUS SUSPENSION (insulin nph</td>
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<td>QL (30 mL per 30 days)</td>
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<tr>
<td>human (isophane))</td>
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<tr>
<td>HUMULIN R INJECTION SOLUTION (insulin regular</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
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<tr>
<td>human)</td>
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<tr>
<td>HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION</td>
<td>2</td>
<td>PA; QL (20 mL per 30 days)</td>
</tr>
<tr>
<td>(insulin regular human)</td>
<td></td>
<td></td>
</tr>
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<tr>
<td>HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR (insulin regular human)</td>
<td>2</td>
<td>PA; QL (18 mL per 30 days)</td>
</tr>
<tr>
<td>LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR (insulin detemir)</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>LEVEMIR SUBCUTANEOUS SOLUTION (insulin detemir)</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>MYXREDLIN INTRAVENOUS SOLUTION (insulin regular(human) in nacl)</td>
<td>3</td>
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<tr>
<td>TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR (insulin glargine)</td>
<td>2</td>
<td>QL (12 mL per 30 days)</td>
</tr>
<tr>
<td>TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR (insulin glargine)</td>
<td>2</td>
<td>QL (13.5 mL per 30 days)</td>
</tr>
<tr>
<td>TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (insulin degludec)</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td>TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 UNIT/ML (insulin degludec)</td>
<td>2</td>
<td>QL (18 mL per 30 days)</td>
</tr>
<tr>
<td>TRESIBA SUBCUTANEOUS SOLUTION (insulin degludec)</td>
<td>2</td>
<td>QL (30 mL per 30 days)</td>
</tr>
<tr>
<td><em>HUMAN PROTEIN C</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED (protein c concentrate (human))</td>
<td>5</td>
<td>LD; SP</td>
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<td><em>HYDANTOINS</em>**</td>
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<td>CEREBYX INJECTION SOLUTION (fosphenytoin sodium)</td>
<td>3</td>
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</tr>
<tr>
<td>DILANTIN INFATABS ORAL TABLET CHEWABLE (phenytoin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DILANTIN ORAL CAPSULE 100 MG (phenytoin sodium extended)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DILANTIN ORAL CAPSULE 30 MG (phenytoin sodium extended)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>DILANTIN ORAL SUSPENSION (phenytoin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>fosphenytoin sodium injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PEGANONE ORAL TABLET (ethotoin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PHENYTEK ORAL CAPSULE (phenytoin sodium extended)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>phenytoin (Phenytoin Infatabs Oral Tablet Chewable)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>phenytoin oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>phenytoin oral tablet chewable</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>phenytoin sodium extended oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>phenytoin sodium injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>HYDROCODONE COMBINATIONS</em>**</td>
<td></td>
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</tr>
<tr>
<td>HYDROCODONE-ACETAMINOPHEN ORAL SOLUTION 10-325 MG/15ML</td>
<td>3</td>
<td>QL (90 mL per 1 day)</td>
</tr>
<tr>
<td>hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml</td>
<td>1 or 1b*</td>
<td>QL (90 mL per 1 day)</td>
</tr>
<tr>
<td>hydrocodone-acetaminophen oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>hydrocodone-ibuprofen oral tablet</td>
<td>1 or 1b*</td>
<td>QL (5 tablets per 1 day)</td>
</tr>
</tbody>
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</tr>
</thead>
<tbody>
<tr>
<td><em>HYDROLYTIC ENZYMES</em>** - DRUGS FOR THE LUNGS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PULMOZYME INHALATION SOLUTION (dornase alfa)</td>
<td>5</td>
<td>SP; QL (150 mL per 30 days)</td>
</tr>
<tr>
<td><em>HYPERAMMONEMIA TREATMENT - AGENTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CARBAGLU ORAL TABLET (carglumic acid)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><em>HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>calcitriol intravenous solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>calcitriol oral capsule</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>calcitriol oral solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>doxercalciferol intravenous solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>doxercalciferol oral capsule</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>HECTOROL INTRAVENOUS SOLUTION (doxercalciferol)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>paricalcitol intravenous solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>paricalcitol oral capsule</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>RAYALDEE ORAL CAPSULE EXTENDED RELEASE (calcifediol)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ROCALTROL ORAL CAPSULE (calcitriol)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>ROCALTROL ORAL SOLUTION (calcitriol)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>ZEMPLAR INTRAVENOUS SOLUTION (paricalcitol)</td>
<td>3</td>
<td>PA</td>
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<tr>
<td>ZEMPLAR ORAL CAPSULE (paricalcitol)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td><em>HYPNOTICS - TRICYCLIC AGENTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>doxepin hcl oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SILENOR ORAL TABLET (doxepin hcl)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LINZESS ORAL CAPSULE (linaclotide)</td>
<td>2</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><em>IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>alosetron hcl oral tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>LOTRONEX ORAL TABLET (alosetron hcl)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em>IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>clotrimazole external cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>clotrimazole external solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>econazole nitrate external cream</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ECOZA EXTERNAL FOAM (econazole nitrate)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>ERTACZO EXTERNAL CREAM (sertaconazole nitrate)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>EXELDERM EXTERNAL CREAM (sulconazole nitrate)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>EXELDERM EXTERNAL SOLUTION (sulconazole nitrate)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>EXTINA EXTERNAL FOAM (ketoconazole)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>JUBLIA EXTERNAL SOLUTION (efinaconazole)</td>
<td>3</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>ketoconazole external cream</td>
<td>1 or 1b*</td>
<td>QL (120 grams per 30 days)</td>
</tr>
</tbody>
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<tr>
<td>ketoconazole external foam</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ketoconazole external shampoo</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 30 days)</td>
</tr>
<tr>
<td>luliconazole external cream</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>LUZU EXTERNAL CREAM (luliconazole)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>oxiconazole nitrate external cream</td>
<td>1 or 1b*</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>OXISTAT EXTERNAL CREAM (oxiconazole nitrate)</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>OXISTAT EXTERNAL LOTION (oxiconazole nitrate)</td>
<td>3</td>
<td>ST; QL (60 mL per 30 days)</td>
</tr>
<tr>
<td>sulconazole nitrate external solution</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>sulconazole nitrate external solution</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>XOLEGEL EXTERNAL GEL (ketoconazole)</td>
<td>3</td>
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</tr>
<tr>
<td><em>IMIDAZOLE-RELATED ANTIFUNGALS</em>**</td>
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<tr>
<td>GYNAZOLE-1 VAGINAL CREAM (butoconazole nitrate (1 dose))</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>miconazole 3 vaginal suppository</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>terconazole vaginal cream 0.4 %</td>
<td>1 or 1b*</td>
<td>QL (90 grams per 30 days)</td>
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<tr>
<td>terconazole vaginal cream 0.8 %</td>
<td>1 or 1b*</td>
<td>QL (40 grams per 30 days)</td>
</tr>
<tr>
<td>terconazole vaginal suppository</td>
<td>1 or 1b*</td>
<td>QL (6 suppositories per 30 days)</td>
</tr>
<tr>
<td><em>IMIDAZOLES</em>**</td>
<td></td>
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</tr>
<tr>
<td>ketoconazole oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em>IMIDAZOTETRAZINES</em>** - DRUGS FOR CANCER</td>
<td></td>
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</tr>
<tr>
<td>TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED (temozolomide)</td>
<td>2</td>
<td>PA; SP</td>
</tr>
<tr>
<td>TEMODAR ORAL CAPSULE 100 MG, 140 MG, 180 MG, 250 MG (temozolomide)</td>
<td>3; OC</td>
<td>PA; SP; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>TEMODAR ORAL CAPSULE 20 MG (temozolomide)</td>
<td>3; OC</td>
<td>PA; SP; QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>TEMODAR ORAL CAPSULE 5 MG (temozolomide)</td>
<td>3; OC</td>
<td>PA; SP; QL (3 capsule per 1 day)</td>
</tr>
<tr>
<td>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 250 mg</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>temozolomide oral capsule 20 mg</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>temozolomide oral capsule 5 mg</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (3 capsule per 1 day)</td>
</tr>
<tr>
<td><em>IMMUNE GLOBULIN IMMUNOSUPPRESSANTS</em>** - VITAMINS AND MINERALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATGAM INTRAVENOUS INJECTABLE (lymphocyte,anti-thymo imm glob)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED (anti-thymocyte glob (rabbit))</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td><em>IMMUNE SERUMS</em>** - BIOLOGICAL AGENTS</td>
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</tr>
<tr>
<td>ASCENIV INTRAVENOUS SOLUTION (immune globulin (human)-stra)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>BIVIGAM INTRAVENOUS SOLUTION (immune globulin (human))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED (immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
</tbody>
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<tr>
<td>CUTAQUIG SUBCUTANEOUS SOLUTION <em>(immune globulin (human)-hipp)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>CUVITRU SUBCUTANEOUS SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>CYTOGAM INTRAVENOUS INJECTABLE <em>(cytomegalovirus immune glob)</em></td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>FLEBOGAMMA DIF INTRAVENOUS SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GAMASTAN INTRAMUSCULAR INJECTABLE *(immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GAMMAGARD INJECTION SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED *(immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GAMMAKED INJECTION SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GAMMAPLEX INTRAVENOUS SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>GAMUNEX-C INJECTION SOLUTION *(immune globulin (human))</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>HEPAGAM B INJECTION SOLUTION *(hepatitis b immune globulin)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>HIZENTRA SUBCUTANEOUS SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE *(immune globulin (human))</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>HYPERHEP B S/D INTRAMUSCULAR SOLUTION *(hepatitis b immune globulin)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>HYPPERRAB INJECTION SOLUTION *(rabies immune globulin)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>HYPPERRAB S/D INJECTION SOLUTION *(rabies immune globulin)</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>HYPPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE *(rho d immune globulin)</td>
<td>5</td>
<td>SP; QL (2 syringes per 365 days)</td>
</tr>
<tr>
<td>HYPERTET S/D INTRAMUSCULAR INJECTABLE <em>(tetanus immune globulin)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>IMOGAM RABIES-HT INJECTION SOLUTION <em>(rabies immune globulin)</em></td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>KEDRAB INJECTION SOLUTION</td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE <em>(rho d immune globulin)</em></td>
<td>5</td>
<td>SP; QL (2 syringes per 365 days)</td>
</tr>
<tr>
<td>NABI-HB INTRAMUSCULAR SOLUTION <em>(hepatitis b immune globulin)</em></td>
<td>5</td>
<td>SP</td>
</tr>
<tr>
<td>OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 25 GM/500ML, 5 GM/100ML, 5 GM/50ML *(immune globulin (human))</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>OCTAGAM INTRAVENOUS SOLUTION 30 GM/300ML *(immune globulin (human))</td>
<td>4</td>
<td>PA</td>
</tr>
<tr>
<td>PANZYGA INTRAVENOUS SOLUTION *(immune globulin (human)-ifas)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>PRIVIGEN INTRAVENOUS SOLUTION *(immune globulin (human))</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE <em>(rho d immune globulin)</em></td>
<td>5</td>
<td>SP; QL (2 syringes per 365 days)</td>
</tr>
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<tr>
<td>RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE <em>(rho d immune globulin)</em></td>
<td>5</td>
<td>SP; QL (2 fills per 365 days)</td>
</tr>
<tr>
<td>VARIZIG INTRAMUSCULAR SOLUTION <em>(varicella-zoster immune glob)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WINRHO SDF INJECTION SOLUTION <em>(rho d immune globulin)</em></td>
<td>5</td>
<td>SP; QL (2 fills per 365 days)</td>
</tr>
<tr>
<td>XEMBIFY SUBCUTANEOUS SOLUTION <em>(immune globulin (human)-klhw)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><em>IMMUNOMODULATORS FOR MYELODYSPLASTIC SYNDROMES</em> - VITAMINS AND MINERALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>REVLIMID ORAL CAPSULE <em>(lenalidomide)</em></td>
<td>2; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><em>IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL</em> - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALDARA EXTERNAL CREAM <em>(imiquimod)</em></td>
<td>3</td>
<td>ST; QL (48 packet per 365 days)</td>
</tr>
<tr>
<td>imiquimod external cream</td>
<td>1 or 1b*</td>
<td>QL (48 packet per 365 days)</td>
</tr>
<tr>
<td>imiquimod pump external cream</td>
<td>1 or 1b*</td>
<td>ST; QL (2 bottle per 365 days)</td>
</tr>
<tr>
<td>ZYCLARA EXTERNAL CREAM <em>(imiquimod)</em></td>
<td>3</td>
<td>ST; QL (28 packet per 365 days)</td>
</tr>
<tr>
<td>ZYCLARA PUMP EXTERNAL CREAM <em>(imiquimod)</em></td>
<td>3</td>
<td>ST; QL (2 bottle per 365 days)</td>
</tr>
<tr>
<td><em>IN VITRO ANTICOAGULANTS</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACD FORMULA A IN VITRO SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>ACD-A NOCLOT-50 IN VITRO SOLUTION <em>(anticoagulant cit dext soln a)</em></td>
<td>3</td>
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<tr>
<td>ANTICOAGULANT CIT DEXT SOLN A IN VITRO SOLUTION</td>
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<tr>
<td>ANTICOAGULANT SODIUM CITRATE IN VITRO SOLUTION</td>
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</tr>
<tr>
<td>TRICITRASOL IN VITRO CONCENTRATE <em>(anticoagulant sodium citrate)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(semaglutide)</em></td>
<td>2</td>
<td>ST; QL (1 pen per 28 days)</td>
</tr>
<tr>
<td>OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(semaglutide)</em></td>
<td>2</td>
<td>ST; QL (2 pens per 28 days)</td>
</tr>
<tr>
<td>TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML <em>(dulaglutide)</em></td>
<td>2</td>
<td>ST; QL (4 pens per 28 days)</td>
</tr>
<tr>
<td>TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 3 MG/0.5ML, 4.5 MG/0.5ML <em>(dulaglutide)</em></td>
<td>2</td>
<td>QL (4 syringes per 28 days)</td>
</tr>
<tr>
<td>VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(liraglutide)</em></td>
<td>2</td>
<td>ST; QL (1 box per 30 days)</td>
</tr>
<tr>
<td><em>INFLAMMATORY BOWEL AGENTS</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR <em>(mesalazine)</em></td>
<td>3</td>
<td>QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE <em>(sulfasalazine)</em></td>
<td>3</td>
<td>QL (8 tablet per 1 day)</td>
</tr>
<tr>
<td>AZULFIDINE ORAL TABLET <em>(sulfasalazine)</em></td>
<td>3</td>
<td>QL (8 tablet per 1 day)</td>
</tr>
<tr>
<td>balsalazide disodium oral capsule</td>
<td>1 or 1b*</td>
<td>QL (9 capsule per 1 day)</td>
</tr>
<tr>
<td>CANASA RECTAL SUPPOSITORY <em>(mesalamine)</em></td>
<td>3</td>
<td>QL (1 suppository per 1 day)</td>
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<tr>
<td>DELZICOL ORAL CAPSULE DELAYED RELEASE (<em>mesalamine</em>)</td>
<td>3</td>
<td>ST; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>DIPENTUM ORAL CAPSULE (<em>olsalazine sodium</em>)</td>
<td>3</td>
<td>ST; QL (4 capsule per 1 day)</td>
</tr>
<tr>
<td>mesalamine er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>mesalamine oral capsule delayed release</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>mesalamine oral tablet delayed release 1.2 gm</td>
<td>1 or 1b*</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>mesalamine oral tablet delayed release 800 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>mesalamine rectal enema</td>
<td>1 or 1b*</td>
<td>QL (60 mL per 1 day)</td>
</tr>
<tr>
<td>mesalamine rectal suppository</td>
<td>1 or 1b*</td>
<td>QL (1 suppository per 1 day)</td>
</tr>
<tr>
<td>mesalamine-cleanser rectal kit</td>
<td>1 or 1b*</td>
<td>QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG (<em>mesalamine</em>)</td>
<td>2</td>
<td>QL (8 capsule per 1 day)</td>
</tr>
<tr>
<td>PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG (<em>mesalamine</em>)</td>
<td>2</td>
<td>QL (8 capsule per 1 day)</td>
</tr>
<tr>
<td>ROWASA RECTAL KIT (<em>mesalamine-cleanser</em>)</td>
<td>3</td>
<td>QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>SFROWASA RECTAL ENEMA (<em>mesalamine</em>)</td>
<td>3</td>
<td>QL (60 mL per 1 day)</td>
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<tr>
<td>sulfasalazine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 1 day)</td>
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<tr>
<td>sulfasalazine oral tablet delayed release</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 1 day)</td>
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<tr>
<td><em>INFLUENZA AGENTS</em>**</td>
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<tr>
<td>rimantadine hcl oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><em>INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS</em>**</td>
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<td></td>
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<tr>
<td>- VITAMINS AND MINERALS</td>
<td></td>
<td></td>
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<tr>
<td>CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED (<em>mofetil</em>)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>CELLCEPT ORAL CAPSULE (<em>mofetil</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CELLCEPT ORAL SUSPENSION RECONSTITUTED (<em>mofetil</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CELLCEPT ORAL TABLET (<em>mofetil</em>)</td>
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<td></td>
</tr>
<tr>
<td>mycophenolate mofetil hcl intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>mycophenolate mofetil oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>mycophenolate mofetil oral suspension reconstituted</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>mycophenolate mofetil oral tablet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>mycophenolate sodium oral tablet delayed release</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>MYFORTIC ORAL TABLET DELAYED RELEASE (<em>mofetil sodium</em>)</td>
<td>3</td>
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<tr>
<td><em>INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)</em>* - HORMONES</td>
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<tr>
<td>INCRELEX SUBCUTANEOUS SOLUTION (<em>mecasermin</em>)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><em>INTERLEUKIN-1 BLOCKERS</em>**</td>
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<tr>
<td>ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED (<em>rilonacept</em>)</td>
<td>5</td>
<td>PA; LD; SP; QL (4 vials per 28 days)</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td><strong>INTERLEUKIN-IBETA BLOCKERS</strong>*</td>
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<tr>
<td>ILARIS SUBCUTANEOUS SOLUTION (<em>canakinumab</em>)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 vials per 28 days)</td>
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<tr>
<td><strong>INTERSTITIAL CYSTITIS AGENTS</strong>* - DRUGS FOR THE URINARY SYSTEM</td>
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<tr>
<td>ELMIRON ORAL CAPSULE (<em>pentosan polysulfate sodium</em>)</td>
<td>3</td>
<td>QL (3 capsules per 1 day)</td>
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<tr>
<td>RIMSO-50 INTRAVESICAL SOLUTION (<em>dimethyl sulfoxide</em>)</td>
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<tr>
<td><strong>INTEST CHOLEST ABSORB HMG COA REDUCTASE INHIB COMB</strong>*</td>
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<tr>
<td>ezetimibe-simvastatin oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>INTESTINAL ACIDIERS</strong>* - DRUGS FOR THE STOMACH</td>
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<tr>
<td>enulose oral solution</td>
<td>1 or 1b*</td>
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<tr>
<td>generlac oral solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>lactulose encephalopathy oral solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><strong>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</strong>*</td>
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</tr>
<tr>
<td>ezetimibe oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>INTRARECTAL STEROIDS</strong>* - RECTAL PREPARATIONS</td>
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<tr>
<td>CORTENEMA RECTAL ENEMA (<em>hydrocortisone</em>)</td>
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<tr>
<td>CORTIFOAM EXTERNAL FOAM (<em>hydrocortisone acetate</em>)</td>
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<tr>
<td>hydrocortisone rectal enema</td>
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<tr>
<td>UCERIS RECTAL FOAM (<em>budesonide</em>)</td>
<td>2</td>
<td>QL (4.78 gm per 1 day)</td>
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<tr>
<td><strong>IODINE ANTISEPTICS</strong>* - ANTISEPTICS AND DISINFECTANTS</td>
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<tr>
<td>IODINE TINCTURE EXTERNAL TINCTURE 2 %</td>
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<tr>
<td>IODOFLEX EXTERNAL PAD (<em>cadexomer iodine</em>)</td>
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<tr>
<td>IODOSORB EXTERNAL GEL (<em>cadexomer iodine</em>)</td>
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<tr>
<td><strong>IODINE EXPECTORANTS</strong>*</td>
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<tr>
<td>SSKI ORAL SOLUTION (<em>potassium iodide (expectorant]</em>)</td>
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<tr>
<td><strong>IRON COMBINATIONS</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>ACTIVE FE ORAL TABLET</td>
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<tr>
<td>iron-folic acid-c-b6-b12-zinc (Corvita 150 Oral Tablet)</td>
<td>1 or 1b*</td>
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<tr>
<td>CORVITE 150 ORAL TABLET 150-1.25 MG (<em>iron-folic acid-c-b6-b12-zinc</em>)</td>
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<tr>
<td>ferocon oral capsule</td>
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<tr>
<td>ferotrinsic oral capsule</td>
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<tr>
<td>fe fum-fa-b cmp-c-zn-mg-mn-cu (Ferrocite Plus Oral Tablet)</td>
<td>1 or 1b*</td>
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<tr>
<td>FERRO-PLEX HEMATINIC ORAL TABLET (*fe fum-dss-c-e-b12-if-fa)</td>
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<tr>
<td>FERROTRIN ORAL CAPSULE (<em>iron-b12-vit c-fa-ifc</em>)</td>
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<tr>
<td>FOLIVANE-PLUS ORAL CAPSULE (<em>fefum-fepoly-fa-b cmp-c-biot</em>)</td>
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<tr>
<td>foltrin oral capsule</td>
<td>1 or 1b*</td>
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<tr>
<td>FUSION PLUS ORAL CAPSULE (iron-fa-b cmp-c-biot-probiotic)</td>
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<tr>
<td>hematinic plus vit/minerals oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>HEMATRON-AF ORAL TABLET (iron-dss-b12-fa-c-e-cu-biotin)</td>
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<tr>
<td>HEMOCYTE PLUS ORAL CAPSULE (fe fum-fa-b cmp-c-zn-mg-mm-cu)</td>
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<tr>
<td>hemocyte-plus oral tablet</td>
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<tr>
<td>ICAR-C PLUS ORAL TABLET (iron-vit c-vit b12-folic acid)</td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>INTEGRA PLUS ORAL CAPSULE (fefum-fepoly-fa-b cmp-c-biot)</td>
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<tr>
<td>IS 24/6 ORAL (fe-succ ac-b cmpx-c-ca-fa)</td>
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<tr>
<td>fefum-fepo-fa-b cmp-c-zn-mm-cu (K-Tan Plus Oral Capsule)</td>
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<tr>
<td>MULTIGEN FOLIC ORAL TABLET (fe asp gly-succ-c-thre-b12-fa)</td>
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<tr>
<td>MULTIGEN ORAL TABLET (fe-succ-c-thre-b12-des stomach)</td>
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<td>MULTIGEN PLUS ORAL TABLET (feasp-fefum -suc-c-thre-b12-fa)</td>
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<tr>
<td>polysaccharide iron forte oral capsule</td>
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<tr>
<td>purevit dualfe plus oral capsule</td>
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<tr>
<td>TARON FORTE ORAL CAPSULE</td>
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<td>tl-hem 150 oral tablet</td>
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<tr>
<td>fe fumarate-b12-vit c-fa-ifc (Tricon Oral Capsule)</td>
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<tr>
<td>trigels-f forte oral capsule</td>
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<tr>
<td>VIRT-FEFA PLUS ORAL CAPSULE</td>
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<tr>
<td><em>IRON W/ FOLIC ACID</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>FOLIVANE-F ORAL CAPSULE (fe fum-fepoly-fa-vit c-vit b3)</td>
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<tr>
<td>hematinic/folic acid oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>ferrous fumarate-folic acid (Hemocyte-F Oral Tablet)</td>
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<tr>
<td>INTEGRA F ORAL CAPSULE (fe fum-fepoly-fa-vit c-vit b3)</td>
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<tr>
<td><em>IRON</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>FERAHEME INTRAVENOUS SOLUTION (ferumoxytol)</td>
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<tr>
<td>FERRLECIT INTRAVENOUS SOLUTION (na ferric glue cplx in sucrose)</td>
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<tr>
<td>INFED INJECTION SOLUTION (iron dextran)</td>
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<tr>
<td>INJECTAFER INTRAVENOUS SOLUTION (ferric carboxymaltose)</td>
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<tr>
<td>MONOFERRIC INTRAVENOUS SOLUTION (ferric derisomaltose)</td>
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<tr>
<td>na ferric glue cplx in sucrose intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>TRIFERIC HEMODIALYSIS PACKET (ferric pyrophosphate citrate)</td>
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<tr>
<td>TRIFERIC HEMODIALYSIS SOLUTION (ferric pyrophosphate citrate)</td>
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<tr>
<td>VENOFER INTRAVENOUS SOLUTION (iron sucrose)</td>
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<tr>
<td><em>IRON-B12-FOLATE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>FERIVA 21/7 ORAL TABLET (feasp-b12-fa-c-dss-succac-zn)</td>
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<tr>
<td>FERRAPLUS 90 ORAL TABLET</td>
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<tr>
<td><em><strong>IRRIGATION SOLUTIONS</strong></em> - VITAMINS AND MINERALS</td>
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<tr>
<td>water for irrigation, sterile (Argyle Sterile Water Irrigation Solution)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>lactated ringers irrigation solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>irrigation solns physiological (Physiolyte Irrigation Solution)</td>
<td>1 or 1b*</td>
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<tr>
<td>irrigation solns physiological (Physiosol Irrigation Irrigation Solution)</td>
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<tr>
<td>ringers irrigation solution</td>
<td>1 or 1b*</td>
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<tr>
<td>sterile water for irrigation irrigation solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ringers irrigation (Tis-U-Sol Irrigation Solution)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>water for irrigation, sterile irrigation solution</td>
<td>1 or 1b*</td>
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<tr>
<td><em><strong>JANUS ASSOCIATED KINASE (JAK) INHIBITORS</strong></em> - DRUGS FOR CANCER</td>
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<tr>
<td>INREBIC ORAL CAPSULE (fedratinib hcl)</td>
<td>3; OC</td>
<td>PA; LD; SP</td>
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<tr>
<td>JAKAFI ORAL TABLET 10 MG (ruxolitinib phosphate)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (5 tablet per 1 day)</td>
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<tr>
<td>JAKAFI ORAL TABLET 15 MG (ruxolitinib phosphate)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (100 tablets per 30 days)</td>
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<tr>
<td>JAKAFI ORAL TABLET 20 MG (ruxolitinib phosphate)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (2.5 tablet per 1 day)</td>
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<td>JAKAFI ORAL TABLET 25 MG (ruxolitinib phosphate)</td>
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<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td>JAKAFI ORAL TABLET 5 MG (ruxolitinib phosphate)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (10 tablet per 1 day)</td>
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<td><em><strong>KERATOLYTIC AND/OR ANTIMITOTIC COMBINATIONS</strong></em> - DRUGS FOR THE SKIN</td>
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<tr>
<td>GORDOFILM EXTERNAL SOLUTION (salicylic acid-lactic acid)</td>
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<td>PYROGALLIC ACID EXTERNAL OINTMENT</td>
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<tr>
<td>SALVAX DUO PLUS EXTERNAL KIT (salicylic acid-urea in lactac)</td>
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<tr>
<td><em><strong>KERATOLYTIC/ANTIMITOTIC AGENTS</strong></em> - DRUGS FOR THE SKIN</td>
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<tr>
<td>CONDYLOX EXTERNAL GEL (podofilox)</td>
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<tr>
<td>podofilox external solution</td>
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<tr>
<td>salicylic acid external lotion</td>
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<td><em><strong>LAXATIVES - MISCELLANEOUS</strong></em></td>
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<tr>
<td>clearlax oral powder</td>
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<td>constulose oral solution</td>
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</tr>
<tr>
<td>cvs purelax oral packet</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>cvs purelax oral powder</td>
<td>1 or 1b*; $0</td>
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<td>eq clearlax oral powder</td>
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<td>eql clearlax oral powder</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>gavilax oral powder</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>gentle lax oral powder</td>
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<td>glycolax oral powder</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>gnp clearlax oral packet</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>gnp clearlax oral powder</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>goodsense clearlax oral powder</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>healthy lax oral packet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>hm clearlax oral packet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>hm clearlax oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>kls laxaclear oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>KRISTALOSE ORAL PACKET (lactulose)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lactulose oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>peg 3350 oral packet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>peg 3350 oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>polyethylene glycol 3350 oral packet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>polyethylene glycol 3350 oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>qc natura-lax oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>ra laxative oral packet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>ra laxative oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>sb polyethylene glycol 3350 oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>sm clearlax oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>smooth lax oral packet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>smooth lax oral powder</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td><strong>LEPROSTATICS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>dapsone oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>LEUKOTRIENE RECEPTOR ANTAGONISTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACCOLATE ORAL TABLET (zafirlukast)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>montelukast sodium oral packet</td>
<td>1 or 1b*</td>
<td>QL (1 packet per 1 day)</td>
</tr>
<tr>
<td>montelukast sodium oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>montelukast sodium oral tablet chewable</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>zafirlukast oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>LEVODOPA COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>carbidopa-levodopa er oral tablet extended release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>carbidopa-levodopa oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>carbidopa-levodopa oral tablet dispersible</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>carbidopa-levodopa-entacapone oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>DUOPA ENTERAL SUSPENSION (carbidopa-levodopa)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>RYTARY ORAL CAPSULE EXTENDED RELEASE <em>(carbidopa-levodopa)</em></td>
<td>3</td>
<td></td>
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<tr>
<td>SINEMET ORAL TABLET <em>(carbidopa-levodopa)</em></td>
<td>3</td>
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<tr>
<td>STALEVO 100 ORAL TABLET <em>(carbidopa-levodopa-entacapone)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>STALEVO 125 ORAL TABLET <em>(carbidopa-levodopa-entacapone)</em></td>
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<td></td>
</tr>
<tr>
<td>STALEVO 150 ORAL TABLET <em>(carbidopa-levodopa-entacapone)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>STALEVO 200 ORAL TABLET <em>(carbidopa-levodopa-entacapone)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>STALEVO 50 ORAL TABLET <em>(carbidopa-levodopa-entacapone)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>STALEVO 75 ORAL TABLET <em>(carbidopa-levodopa-entacapone)</em></td>
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**LHRH ANALOGS*** - **DRUGS FOR CANCER**

<table>
<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ELIGARD SUBCUTANEOUS KIT 22.5 MG <em>(leuprolide acetate (3 month))</em></td>
<td>3</td>
<td>PA; SP; QL (1 syringe per 84 days)</td>
</tr>
<tr>
<td>ELIGARD SUBCUTANEOUS KIT 30 MG <em>(leuprolide acetate (4 month))</em></td>
<td>3</td>
<td>PA; SP; QL (1 syringe per 112 days)</td>
</tr>
<tr>
<td>ELIGARD SUBCUTANEOUS KIT 45 MG <em>(leuprolide acetate (6 month))</em></td>
<td>3</td>
<td>PA; SP; QL (1 syringe per 168 days)</td>
</tr>
<tr>
<td>ELIGARD SUBCUTANEOUS KIT 7.5 MG <em>(leuprolide acetate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 syringe per 28 days)</td>
</tr>
<tr>
<td>leuprolide acetate injection kit</td>
<td>1 or 1b*</td>
<td>PA; SP</td>
</tr>
<tr>
<td>LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG <em>(leuprolide acetate)</em></td>
<td>5</td>
<td>PA; SP; QL (1 syringe kit per 28 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG <em>(leuprolide acetate)</em></td>
<td>2</td>
<td>SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG <em>(leuprolide acetate (3 month))</em></td>
<td>5</td>
<td>PA; SP; QL (1 kit per 84 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG <em>(leuprolide acetate (3 month))</em></td>
<td>2</td>
<td>SP; QL (1 kit per 84 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT <em>(leuprolide acetate (4 month))</em></td>
<td>2</td>
<td>SP; QL (1 kit per 112 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT <em>(leuprolide acetate (6 month))</em></td>
<td>2</td>
<td>SP; QL (1 syringe kit per 168 days)</td>
</tr>
<tr>
<td>TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG <em>(triptorelin pamoate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 vial per 84 days)</td>
</tr>
<tr>
<td>TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG <em>(triptorelin pamoate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 syringe per 168 days)</td>
</tr>
<tr>
<td>TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG <em>(triptorelin pamoate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>VANTAS SUBCUTANEOUS KIT <em>(histrelin acetate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 implant per 365 days)</td>
</tr>
<tr>
<td>ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG <em>(goserelin acetate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 EA per 84 days)</td>
</tr>
<tr>
<td>ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG <em>(goserelin acetate)</em></td>
<td>3</td>
<td>PA; SP; QL (1 unit per 28 days)</td>
</tr>
</tbody>
</table>

**LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS***

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>FENSOLVI (6 MONTH) SUBCUTANEOUS KIT <em>(leuprolide acetate (6 month))</em></td>
<td>3</td>
<td>PA; LD; QL (1 kit per 24 weeks)</td>
</tr>
</tbody>
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</tr>
</thead>
<tbody>
<tr>
<td>LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG (leuprolide acetate)</td>
<td>5</td>
<td>PA; SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 7.5 MG (leuprolide acetate)</td>
<td>5</td>
<td>PA; SP; QL (1 syringe kit per 28 days)</td>
</tr>
<tr>
<td>LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED) (leuprolide acetate (3 month))</td>
<td>5</td>
<td>PA; SP; QL (1 kit per 12 weeks)</td>
</tr>
<tr>
<td>LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG (PED) (leuprolide acetate (3 month))</td>
<td>5</td>
<td>PA; SP; QL (1 kit per 84 days)</td>
</tr>
<tr>
<td>SUPPRELIN LA SUBCUTANEIOUS KIT (histrelin acetate (cpp))</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 365 days)</td>
</tr>
<tr>
<td>SYNAREL NASAL SOLUTION (nafarelin acetate)</td>
<td>5</td>
<td>PA; SP; QL (5 bottle per 30 days)</td>
</tr>
<tr>
<td>TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER (triptorelin pamoate)</td>
<td>5</td>
<td>PA; LD; QL (1 vial per 168 days)</td>
</tr>
<tr>
<td><strong>LINCOSAMIDES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CLEOCIN ORAL CAPSULE (clindamycin hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLEOCIN ORAL SOLUTION RECONSTITUTED (clindamycin palmitate hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CLEOCIN PHOSPHATE INJECTION SOLUTION (clindamycin phosphate)</td>
<td>3</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>clindamycin hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>clindamycin palmitate hcl oral solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>clindamycin phosphate in d5w intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CLINDAMYCIN PHOSPHATE IN NAACL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>clindamycin phosphate injection solution</td>
<td>1 or 1b*</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>LINOCIN INJECTION SOLUTION (lincomycin hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lincomycin hcl injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>LINIMENT COMBINATIONS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEDROX-RX EXTERNAL OINTMENT (capsaicin-menthol-methyl sal)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>LINIMENTS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>METHYL SALICYLATE EXTERNAL LIQUID</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TURPENTINE EXTERNAL SPIRIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>LIPASE INHIBITORS</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>XENICAL ORAL CAPSULE (orlistat)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td><strong>LIPIDS</strong>* - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CLINOLIPID INTRAVENOUS EMULSION (fat emulsion plant based)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DOJOLVI ORAL LIQUID (triheptanoin)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>INTRALIPID INTRAVENOUS EMULSION (fat emulsion plant based)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NEOKE MCT70 ORAL POWDER (medium chain triglycerides)</td>
<td>2</td>
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<tr>
<td>NUTRILIPID INTRAVENOUS EMULSION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>OMEGADEVN INTRAVENOUS EMULSION (fish oil triglyceride based)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
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<tr>
<td>SMOFLIPID INTRAVENOUS EMULSION <em>(fat emul fish oil/plant based)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>LIPOTROPIC COMBINATIONS</em>** - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LECITHIN ORAL GRANULES</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LIPO INTRAMUSCULAR SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LIPO-C INTRAMUSCULAR SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>LOCAL ANESTHETIC &amp; SYMPATHOMIMETIC</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>articaine-epinephrine <em>(Articadent Dental Injection Solution Cartridge)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bupivacaine-epinephrine *(pf) injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bupivacaine-epinephrine injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CITANEST FORTE DENTAL INJECTION SOLUTION <em>(prilocaine-epinephrine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine-epinephrine injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MARCAINE/EPINEPHRINE INJECTION SOLUTION <em>(bupivacaine-epinephrine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MARCAINE/EPINEPHRINE PF INJECTION SOLUTION <em>(bupivacaine-epinephrine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ORABLOC INJECTION SOLUTION CARTRIDGE <em>(articaine-epinephrine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RECK SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bupivacaine-epinephrine <em>(Sensorcaine/Epinephrine Injection Solution)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bupivacaine-epinephrine <em>(Sensorcaine-Mpf/Epinephrine Injection Solution 0.25% -1:200000, 0.5% -1:200000)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.75-1.200000 % <em>(bupivacaine-epinephrine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine-epinephrine <em>(Xylocaine Dental Injection Solution)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>XYLOCAINE/EPINEPHRINE INJECTION SOLUTION <em>(lidocaine-epinephrine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION <em>(lidocaine-epinephrine)</em></td>
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<tr>
<td><em>LOCAL ANESTHETIC COMBINATIONS</em>**</td>
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<tr>
<td>ACTIVE INJECTION LM-2 INJECTION KIT</td>
<td>3</td>
<td></td>
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<tr>
<td>LIDOCAINE-SODIUM BICARBONATE INJECTION SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>P-CARE 100MX INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>POINT OF CARE LM-2.2 INJECTION KIT <em>(lidocaine hcl-bupivacaine hcl)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>POINT OF CARE LM-2.5 INJECTION KIT <em>(lidocaine hcl-bupivacaine hcl)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>READYSHARP-A INJECTION KIT <em>(lidocaine hcl-bupivacaine hcl)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>LOCAL ANESTHETICS - AMIDES</em>**</td>
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<tr>
<td>BUPIVACAINE FISIOPHARMA INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bupivacaine hcl *(pf) injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BUPIVACAINE HCL INJECTION SOLUTION 0.125 %</td>
<td>3</td>
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<tr>
<td>bupivacaine hcl injection solution 0.25 %, 0.5 %</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>BUPIVACAINE HCL-NACL EPIDURAL SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bupivacaine in dextrose intrathecal solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bupivacaine spinal intrathecal solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>CARBOCAINE INJECTION SOLUTION (mepivacaine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CARBOCAINE PRESERVATIVE-FREE INJECTION SOLUTION (mepivacaine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CITANEST PLAIN DENTAL INJECTION SOLUTION (prilocaine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl (pf) injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl injection solution 0.5 %</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LIDOCAINE HCL INJECTION SOLUTION 1 %, 2 %</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl intradermal jet-injector</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LIDOCAINE IN DEXTROSE SOLUTION</td>
<td>3</td>
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</tr>
<tr>
<td>MARCAINE INJECTION SOLUTION (bupivacaine hcl)</td>
<td>3</td>
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</tr>
<tr>
<td>MARCAINE PRESERVATIVE FREE INJECTION SOLUTION (bupivacaine hcl)</td>
<td>3</td>
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</tr>
<tr>
<td>MARCAINE SPINAL INTRATHECAL SOLUTION (bupivacaine in dextrose)</td>
<td>3</td>
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</tr>
<tr>
<td>MONOJECT BONE MARROW BIOPSY INJECTION KIT (lidocaine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NAROPIN INJECTION SOLUTION (ropivacaine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>mepivacaine hcl (Polocaine Injection Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>mepivacaine hcl (Polocaine-Mpf Injection Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>READYSHARP LIDOCAINE INJECTION KIT (lidocaine hcl)</td>
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<tr>
<td>ropivacaine hcl injection solution</td>
<td>1 or 1b*</td>
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<tr>
<td>ROPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGEN</td>
<td>3</td>
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<tr>
<td>ROPIVACAINE HCL-NACL EPIDURAL SOLUTION</td>
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<tr>
<td>ROPIVACAINE HCL-NACL INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bupivacaine hcl (Sensorcaine Injection Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bupivacaine hcl (Sensorcaine-Mpf Injection Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>XYLOCAINE INJECTION SOLUTION (lidocaine hcl)</td>
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</tr>
<tr>
<td>XYLOCAINE-MPF INJECTION SOLUTION (lidocaine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ZINGO INTRADERMAL JET-INJECTOR (lidocaine hcl)</td>
<td>3</td>
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*LOCAL ANESTHETICS - ESTERS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>chloroprocaine hcl (pf) injection solution</td>
<td>1 or 1b*</td>
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<tr>
<td>CLOROTEKAL INTRATHECAL SOLUTION (chloroprocaine hcl)</td>
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<tr>
<td>NESACAINE INJECTION SOLUTION (chloroprocaine hcl)</td>
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<tr>
<td>NESACAINE-MPF INJECTION SOLUTION (chloroprocaine hcl)</td>
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</tr>
</thead>
<tbody>
<tr>
<td>tetracaine hcl injection solution</td>
<td>1 or 1b*</td>
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*LOCAL ANESTHETICS - TOPICAL*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>GEN7T EXTERNAL PATCH</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl (Glydo External Prefilled Syringe)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lidocaine external ointment</td>
<td>1 or 1b*</td>
<td>QL (5 grams per 1 day)</td>
</tr>
<tr>
<td>lidocaine external patch 5 %</td>
<td>1 or 1b*</td>
<td>QL (3 patches per 1 day)</td>
</tr>
<tr>
<td>LIDOCAINE HCL EXTERNAL CREAM 4.12 %</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl external lotion</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl external solution</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 1 day)</td>
</tr>
<tr>
<td>lidocaine hcl urethral/mucosal external gel</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lidocaine hcl urethral/mucosal external prefilled syringe</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LIDOPIN EXTERNAL CREAM 3.25 %</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PRAMOX EXTERNAL GEL (pramoxine hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>QUTENZA (2 PATCH) EXTERNAL KIT (capsaicin-cleansing gel)</td>
<td>2</td>
<td>LD</td>
</tr>
<tr>
<td>QUTENZA EXTERNAL KIT (capsaicin-cleansing gel)</td>
<td>2</td>
<td>LD</td>
</tr>
<tr>
<td>zionodil 100 external lotion</td>
<td>1 or 1b*</td>
<td></td>
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*LOOP DIURETICS***

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<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>bumetanide injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>bumetanide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BUMEX ORAL TABLET (bumetanide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EDECRIN ORAL TABLET (ethacrynic acid)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ethacrynate sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ethacrynate acid oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>furosemide injection solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>furosemide oral solution</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>furosemide oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>LASIX ORAL TABLET (furosemide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>SODIUM EDECRIN INTRAVENOUS SOLUTION RECONSTITUTED (ethacrynate sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>torsemide oral tablet</td>
<td>1 or 1b*</td>
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*LOW MOLECULAR WEIGHT HEPARINS***

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<thead>
<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>enoxaparin sodium injection solution</td>
<td>4</td>
<td>QL (30 syringes per 30 days)</td>
</tr>
<tr>
<td>enoxaparin sodium subcutaneous solution</td>
<td>4</td>
<td>QL (30 syringes per 30 days)</td>
</tr>
<tr>
<td>FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNIT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML (dalteparin sodium)</td>
<td>4</td>
<td>QL (30 syringes per 30 days)</td>
</tr>
<tr>
<td>FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML (dalteparin sodium)</td>
<td>4</td>
<td>QL (6 vials per 30 days)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td><em>LUBRICANT LAXATIVES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mineral oil heavy oral oil</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>MACROLIDE IMMUNOSUPPRESSANTS - TOPOCAL</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>pimecrolimus external cream</td>
<td>1 or 1b*</td>
<td>ST; QL (100 grams per 90 days)</td>
</tr>
<tr>
<td>tacrolimus external ointment</td>
<td>1 or 1b*</td>
<td>ST; QL (100 grams per 90 days)</td>
</tr>
<tr>
<td><em>MACROLIDE IMMUNOSUPPRESSANTS</em>** - VITAMINS AND MINERALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR (tacrolimus)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR (tacrolimus)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>PROGRAF INTRAVENOUS SOLUTION (tacrolimus)</td>
<td>2 SP</td>
<td></td>
</tr>
<tr>
<td>PROGRAF ORAL CAPSULE (tacrolimus)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PROGRAF ORAL PACKET (tacrolimus)</td>
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<td></td>
</tr>
<tr>
<td>RAPAMUNE ORAL SOLUTION (sirolimus)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RAPAMUNE ORAL TABLET (sirolimus)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>sirolimus oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sirolimus oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>tacrolimus oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ZORTRESS ORAL TABLET (everolimus)</td>
<td>3</td>
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</tr>
<tr>
<td><em>MAGNESIUM</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>MAGNESIUM SULFATE IN D5W INTRAVENOUS SOLUTION</td>
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<tr>
<td>magnesium sulfate injection solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>MAGNESIUM SULFATE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MAGNESIUM SULFATE-NACL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>MANGANESE</em>** - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
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<tr>
<td>manganese chloride intravenous solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>MEGLITINIDE ANALOGUES</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>nateglinide oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>repaglinide oral tablet 0.5 mg, 1 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>repaglinide oral tablet 2 mg</td>
<td>1 or 1b*</td>
<td>QL (8 tablets per 1 day)</td>
</tr>
<tr>
<td>STARLIX ORAL TABLET (nateglinide)</td>
<td>3</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td><em>MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS</em>**</td>
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</tr>
<tr>
<td>JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG (lomitapide mesylate)</td>
<td>3</td>
<td>PA; DO; LD</td>
</tr>
<tr>
<td>JUXTAPID ORAL CAPSULE 40 MG, 60 MG (lomitapide mesylate)</td>
<td>3</td>
<td>PA; LD; QL (1 capsule per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>MIGRAINE PRODUCTS</strong>*</td>
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<tr>
<td>dihydroergotamine mesylate injection solution</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td><strong>MINERALOCORTICOID</strong>*</td>
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</tr>
<tr>
<td>fludrocortisone acetate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>MIOTICS - CHOLINESTERASE INHIBITORS</strong>*</td>
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<tr>
<td>PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED (echothiophate iodide)</td>
<td>3</td>
<td>QL (5 mL per 30 days)</td>
</tr>
<tr>
<td><strong>MIOTICS - DIRECT ACTING</strong>*</td>
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<tr>
<td>ISOPTO CARPINE OPHTHALMIC SOLUTION (<em>pilocarpine hcl</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED (acyetylcholine chloride)</td>
<td>3</td>
<td></td>
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<tr>
<td>MIOSTAT INTRAOCULAR SOLUTION (<em>carbachol</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>pilocarpine hcl opthalmic solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><strong>MISC. ANTI-ULCER</strong>*</td>
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<tr>
<td>CARAFATE ORAL SUSPENSION (<em>sucralfate</em></td>
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<tr>
<td>CARAFATE ORAL TABLET (<em>sucralfate</em></td>
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<td></td>
</tr>
<tr>
<td>sucralfate oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sucralfate oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>MISC. DERMATOLOGICAL PRODUCTS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>ALEVAMAX EXTERNAL CREAM</td>
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<tr>
<td>EMULSION SB EXTERNAL EMULSION (<em>dermatological products, misc.</em></td>
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</tr>
<tr>
<td>HYLATOPIC PLUS EXTERNAL CREAM (<em>dermatological products, misc.</em></td>
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<tr>
<td>HYLATOPIC PLUS EXTERNAL LOTION (<em>dermatological products, misc.</em></td>
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<tr>
<td>ILIDERM EXTERNAL EMULSION</td>
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<tr>
<td>NEOSALUS EXTERNAL FOAM (<em>dermatological products, misc.</em></td>
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<tr>
<td>NUVAIL EXTERNAL SOLUTION (<em>dermatological products, misc.</em></td>
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</tr>
<tr>
<td>PENLEN EXTERNAL EMULSION (<em>dermatological products, misc.</em></td>
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<tr>
<td>PRESERA EXTERNAL FOAM (<em>dermatological products, misc.</em></td>
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<tr>
<td>REMIGEN EXTERNAL CREAM</td>
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</tr>
<tr>
<td>TETRIX EXTERNAL CREAM (<em>dermatological products, misc.</em></td>
<td>3</td>
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<tr>
<td>XERALUX EXTERNAL CREAM (<em>dermatological products, misc.</em></td>
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<tr>
<td><strong>MISC. DEVICES</strong>* - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
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</tr>
<tr>
<td>folding paddle walker</td>
<td>1 or 1b*; $0</td>
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<tr>
<td><strong>MISC. NUTRITIONAL SUBSTANCES COMBINATIONS</strong>* - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CARDIOVID PLUS ORAL CAPSULE (<em>dha-epa-vit b6-b12-folic acid</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>MISC. RESPIRATORY INHALANTS</strong>*</td>
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<tr>
<td>HYPERSONAL INHALATION NEBULIZATION SOLUTION (<em>sodium chloride</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>sodium chloride inhalation nebulization solution</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>MISC. TOPICAL COMBINATIONS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PRE &amp; POST SX POUCH EXTERNAL THERAPY PACK (<em>chlorhex-mupirocin-dimethicone</em>)</td>
<td>3</td>
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</tr>
<tr>
<td><strong>MISC. TOPICAL</strong>* - DRUGS FOR THE SKIN</td>
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<td></td>
</tr>
<tr>
<td>BORIC ACID EXTERNAL GRANULES</td>
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<td></td>
</tr>
<tr>
<td>QBREXZA EXTERNAL PAD (<em>glycopyrronium tosylate</em>)</td>
<td>3</td>
<td>PA; QL (1 cloth per 1 day)</td>
</tr>
<tr>
<td><strong>MISCELLANEOUS THERAPEUTIC CLASSES</strong>* - VITAMINS AND MINERALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEXAVIR INJECTION SOLUTION (<em>liver derivative complex</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>MISCELLANEOUS VAGINAL PRODUCTS</strong>* - DRUGS FOR WOMEN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>INTRAROSA VAGINAL INSERT (<em>prasterone</em>)</td>
<td>3</td>
<td>ST; QL (1 insert per 1 day)</td>
</tr>
<tr>
<td><strong>MITOTIC INHIBITORS</strong>* - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED (<em>paclitaxel protein-bound part</em>)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>DOCETAXEL INTRAVENOUS CONCENTRATE</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>DOCETAXEL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>PA; SP</td>
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<tr>
<td>ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED (<em>etoposide phosphate</em>)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>etoposide intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>etoposide oral capsule</td>
<td>1 or 1b*; OC</td>
<td>SP</td>
</tr>
<tr>
<td>HALAVEN INTRAVENOUS SOLUTION (<em>eribulin mesylate</em>)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED (<em>ixabepilone</em>)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>JEVITANA INTRAVENOUS SOLUTION (<em>cabazitaxel</em>)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>MARQIBO INTRAVENOUS SUSPENSION (<em>vincristine sulfate liposome</em>)</td>
<td>3</td>
<td>LD</td>
</tr>
<tr>
<td>NAVELBINE INTRAVENOUS SOLUTION (<em>vinorelbine tartrate</em>)</td>
<td>3</td>
<td>SP</td>
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<tr>
<td>PACLITAXEL INTRAVENOUS CONCENTRATE 100 MG/16.67ML</td>
<td>3</td>
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<tr>
<td>paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml</td>
<td>1 or 1b*</td>
<td>SP</td>
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<tr>
<td>TAXOTERE INTRAVENOUS CONCENTRATE (<em>docetaxel</em>)</td>
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<td>PA; SP</td>
</tr>
<tr>
<td>TENIPOSIDE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>etoposide (Toposar Intravenous Solution)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>vinblastine sulfate intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>vincristine sulfate intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>vinorelbine tartrate intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td><em>MODIFIED CYCLICS</em>**</td>
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<tr>
<td>nefazodone hcl oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>trazodone hcl oral tablet</td>
<td>1 or 1a*</td>
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<tr>
<td>TRINTELLIX ORAL TABLET 10 MG, 5 MG (vortioxetine hbr)</td>
<td>3</td>
<td>DO</td>
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<tr>
<td>TRINTELLIX ORAL TABLET 20 MG (vortioxetine hbr)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>VIIBRYD ORAL TABLET 10 MG, 20 MG (vilazodone hcl)</td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>VIIBRYD ORAL TABLET 40 MG (vilazodone hcl)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>VIIBRYD STARTER PACK ORAL KIT (vilazodone hcl)</td>
<td>3</td>
<td>ST; QL (1 pack per 365 days)</td>
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<tr>
<td><em>MONOAMINE OXIDASE INHIBITORS (MAOIS)</em>**</td>
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<tr>
<td>EMSAM TRANSDERMAL PATCH 24 HOUR (selegilene)</td>
<td>3</td>
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<tr>
<td>MARPLAN ORAL TABLET (isocarboxazid)</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
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<tr>
<td>NARDIL ORAL TABLET (phenelzine sulfate)</td>
<td>3</td>
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</tr>
<tr>
<td>PARNATE ORAL TABLET (tranylcypromine sulfate)</td>
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<td></td>
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<tr>
<td>phenelzine sulfate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>tranylcypromine sulfate oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><em>MONOCLONAL ANTIBODIES</em>** - VITAMINS AND MINERALS</td>
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<tr>
<td>ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (satralizumab-mwge)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 syringe per 28 days)</td>
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<tr>
<td>GAMIFANT INTRAVENOUS SOLUTION (emapalumab-lzsg)</td>
<td>3</td>
<td>PA; LD; SP</td>
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<tr>
<td>SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED (basiliximab)</td>
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<td>SP</td>
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<tr>
<td>UPLIZNA INTRAVENOUS SOLUTION (inebilizumab-cdon)</td>
<td>5</td>
<td>PA; LD; QL (30 mL per 180 days)</td>
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<td><em>MOVEMENT DISORDER DRUG THERAPY</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>AUSTEDO ORAL TABLET (deutetrabenazine)</td>
<td>5</td>
<td>PA; SP; QL (4 tablets per 1 day)</td>
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<tr>
<td>INGREZZA ORAL CAPSULE 40 MG (valbenazine tosylate)</td>
<td>5</td>
<td>PA; DO; LD</td>
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<tr>
<td>INGREZZA ORAL CAPSULE 80 MG (valbenazine tosylate)</td>
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<tr>
<td>INGREZZA ORAL CAPSULE THERAPY PACK (valbenazine tosylate)</td>
<td>5</td>
<td>PA; LD; QL (1 pack per 1 year)</td>
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<tr>
<td>tetrabenazine oral tablet</td>
<td>1 or 1b*</td>
<td>PA; SP</td>
</tr>
<tr>
<td>XENAZINE ORAL TABLET (tetrabenazine)</td>
<td>3</td>
<td>PA; LD; SP</td>
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<tr>
<td><em>MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS</em>**</td>
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<tr>
<td>AUBAGIO ORAL TABLET (teriflunomide)</td>
<td>4</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td><em>MUCOLYTICS</em>** - DRUGS FOR THE LUNGS</td>
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<tr>
<td>acetylcysteine inhalation solution</td>
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<tr>
<td><em>MUCOPOLYSACCHARIDOSIS I (MPS I) - AGENTS</em>**</td>
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<tr>
<td>ALDURAZYME INTRAVENOUS SOLUTION (laronidase)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<td><em>MUCOPOLYSACCHARIDOSIS II (MPS II) - AGENTS</em>**</td>
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<tr>
<td>ELAPRAZE INTRAVENOUS SOLUTION (idursulfase)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td><strong>MUCOPOLYSACCHARIDOSIS VI (MPS VI) - AGENTS</strong>*</td>
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<tr>
<td>NAGLAZYME INTRAVENOUS SOLUTION (galsulfase)</td>
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<td>PA; LD; SP</td>
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<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS - INTERFERONS</strong>*</td>
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<tr>
<td>BETASERON SUBCUTANEOUS KIT (interferon beta-1b)</td>
<td>4</td>
<td>PA; SP; QL (15 kits per 30 days)</td>
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<tr>
<td>REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR (interferon beta-1a)</td>
<td>4</td>
<td>PA; SP</td>
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<tr>
<td>REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</td>
<td>4</td>
<td>PA; SP</td>
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<tr>
<td>REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (interferon beta-1a)</td>
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<td>PA; SP</td>
</tr>
<tr>
<td>REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</td>
<td>4</td>
<td>PA; SP</td>
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<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES</strong>*</td>
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<tr>
<td>KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR (ofatumumab)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 syringe per 28 days)</td>
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<tr>
<td>LEMTRADA INTRAVENOUS SOLUTION (alemtuzumab)</td>
<td>5</td>
<td>PA; LD; SP; QL (3 vials per 365 days)</td>
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<tr>
<td>TYSABRI INTRAVENOUS CONCENTRATE (natalizumab)</td>
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<td>PA; LD; SP</td>
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<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS</strong>*</td>
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<tr>
<td>dimethyl fumarate oral capsule delayed release 120 mg</td>
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<td>PA; SP; QL (14 capsules per 365 days)</td>
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<tr>
<td>dimethyl fumarate oral capsule delayed release 240 mg</td>
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<td>PA; SP; QL (2 capsules per 1 day)</td>
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<tr>
<td>dimethyl fumarate starter pack oral</td>
<td>4</td>
<td>PA; SP; QL (1 kit per 365 days)</td>
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<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS</strong>*</td>
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<tr>
<td>AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR (dalfampridine)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>dalfampridine er oral tablet extended release 12 hour</td>
<td>4</td>
<td>PA; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS</strong>*</td>
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<tr>
<td>COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML (glatiramer acetate)</td>
<td>4</td>
<td>PA; SP; QL (1 syringe per 1 day)</td>
</tr>
<tr>
<td>COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML (glatiramer acetate)</td>
<td>4</td>
<td>PA; SP</td>
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<tr>
<td><strong>MULTIPLE VITAMINS W/ IRON</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>daily multiple vitamins/iron oral tablet</td>
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<tr>
<td>daily vitamin formula+iron oral tablet</td>
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<tr>
<td>daily vite multivitamin/iron oral tablet</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>daily-vitamin/iron oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp one daily plus iron oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
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<tr>
<td><em>MULTIPLE VITAMINS W/ MINERALS &amp; CALCIUM-FOLIC ACID</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>FOLGARD OS ORAL TABLET (multiple vit-min-calcium-fa)</td>
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<td><em>MULTIPLE VITAMINS W/ MINERALS &amp; FOLIC ACID</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>corvita oral tablet</td>
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<td>ONEVITE ORAL TABLET</td>
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<tr>
<td>SYNAGEX ORAL CAPSULE (multiple vitamins-minerals-fa)</td>
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<tr>
<td>SYNATEK ORAL CAPSULE (multiple vitamins-minerals-fa)</td>
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<tr>
<td>THRIVITE 19 ORAL TABLET</td>
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<tr>
<td>UDAMIN SP ORAL TABLET (multiple vitamins-minerals-fa)</td>
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<td><em>MULTIPLE VITAMINS W/ MINERALS</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>biocel oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>b-plex plus oral tablet</td>
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<td>FORTAVIT ORAL CAPSULE (multiple vitamins-minerals)</td>
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<td>HYLAZINC ORAL TABLET</td>
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<td>multiple vitamins-minerals (Lysiplex Plus Oral Tablet)</td>
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<td>MULTIVITAMIN ADULT ORAL TABLET</td>
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<tr>
<td>NICAZEL FORTE ORAL TABLET (multiple vitamins-minerals)</td>
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<td>NICAZEL ORAL TABLET (multiple vitamins-minerals)</td>
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<tr>
<td>NUTRICAP ORAL TABLET (multiple vitamins-minerals)</td>
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<tr>
<td>multiple vitamins-minerals (Nutrifac Zx Oral Tablet)</td>
<td>1 or 1b*</td>
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<tr>
<td>one daily multivitamin adult oral tablet</td>
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<td>REQ 49+ ORAL TABLET (multiple vitamins-minerals)</td>
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<td>SIDEROL ORAL TABLET (multiple vitamins-minerals)</td>
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<td>SUPPORT ORAL LIQUID</td>
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<td>tab-a-vite oral tablet</td>
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<tr>
<td>v-c forte oral capsule</td>
<td>1 or 1b*</td>
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<td>multiple vitamins-minerals (Vic-Forte Oral Capsule)</td>
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<tr>
<td>multiple vitamins-minerals (Vita S Forte Oral Tablet)</td>
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<tr>
<td>multiple vitamins-minerals (Vitacel Oral Tablet)</td>
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<tr>
<td>vita-min oral capsule</td>
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<tr>
<td>VITAROCA PLUS ORAL TABLET (multiple vitamins-minerals)</td>
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<td><em>MULTIVITAMINS</em>** - DRUGS FOR NUTRITION</td>
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<td>anti-oxidant oral tablet</td>
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<td>daily vitamin oral tablet</td>
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<td>daily vitae oral tablet</td>
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<tr>
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<td>daily-vite multivitamin oral tablet</td>
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<tr>
<td>daily-vite oral tablet</td>
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<tr>
<td>ESTROFACTORS ORAL TABLET (multiple vitamin)</td>
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<td>gnp essential one daily oral tablet</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>healthy hair/skin/nails oral tablet</td>
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<td>M.V.I. ADULT INTRAVENOUS INJECTABLE (multiple vitamin)</td>
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<td>multi-day oral tablet</td>
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<tr>
<td>multiple vitamin-folic acid oral tablet</td>
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<td>multiple vitamins essential oral tablet</td>
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<td>multiple vitamins oral tablet</td>
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<td>multivitamin iron-free oral tablet</td>
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<tr>
<td>MULTIVITAMIN ORAL TABLET</td>
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<td>multi-vitamin oral tablet</td>
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<tr>
<td>multi-vitamins oral tablet</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>NEOMULTIVITVE ORAL TABLET <em>(multiple vitamin)</em></td>
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</tr>
<tr>
<td>OMNICAP ORAL TABLET</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>once daily oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>one daily essential oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>one daily oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>one-daily multi vitamins oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>one-daily multi-vitamin oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>qc essentials oral tablet</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>QUINTABS ORAL TABLET</td>
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</tr>
<tr>
<td>ra one daily essential oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>ra one daily multi-vitamin oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>sigtab oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>sm multiple vitamins essential oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>stresstabs energy oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>tab-a-vite/beta carotene oral tablet</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>THERA ORAL TABLET <em>(multiple vitamin)</em></td>
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<tr>
<td>theramill oral tablet</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>therapeutic oral tablet</td>
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<tr>
<td>thera-tabs oral tablet</td>
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<tr>
<td>THEREMS ORAL TABLET <em>(multiple vitamin)</em></td>
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<tr>
<td>vit e-vit c-beta carotene oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>vitalee oral tablet</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td><em>MUSCLE RELAXANT COMBINATIONS</em>** - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>carisoprodol-aspirin-codeine oral tablet</td>
<td>1 or 1b*</td>
<td>QL (40 tablets per 30 days)</td>
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<tr>
<td>CYCLO/GABA 10/300 ORAL THERAPY PACK</td>
<td>3</td>
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<tr>
<td>METAXALL CP COMBINATION KIT <em>(metaxalone-capsaicin)</em></td>
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<tr>
<td>orphenadrine-asa-caffeine oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>orphenadrine-aspirin-caffeine (Orphengesic Forte Oral Tablet)</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td><em>MUSCLE RELAXANT-LINIMENTS COMBINATIONS</em>** - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</td>
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<tr>
<td>NOPIOID-TC KIT COMBINATION THERAPY PACK <em>(cyclobenzaprine-lidocaine-ment)</em></td>
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<tr>
<td><em>NASAL ANTICHOLINERGICS</em>**</td>
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<td></td>
</tr>
<tr>
<td>ipratropium bromide nasal solution 0.03 %</td>
<td>1 or 1b*</td>
<td>QL (2 bottles per 30 days)</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td>ipratropium bromide nasal solution 0.06 %</td>
<td>1 or 1b*</td>
<td>QL (1 mL per 1 day)</td>
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<tr>
<td><em>NASAL ANTIHISTAMINES</em>**</td>
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<tr>
<td>azelastine hcl nasal solution 0.1 %, 137 mcg/spray</td>
<td>1 or 1b*</td>
<td>QL (1 package per 25 days)</td>
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<tr>
<td>azelastine hcl nasal solution 0.15 %</td>
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<td>QL (1 bottle per 25 days)</td>
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<tr>
<td>olopatadine hcl nasal solution</td>
<td>1 or 1b*</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td>PATANASE NASAL SOLUTION (olopatadine hcl)</td>
<td>3</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td><em>NASAL STEROIDS</em>**</td>
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<tr>
<td>flunisolide nasal solution</td>
<td>3</td>
<td>ST; QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td>fluticasone propionate nasal suspension</td>
<td>1 or 1a*</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td>mometasone furoate nasal suspension</td>
<td>3</td>
<td>ST; QL (1 bottle per 30 days)</td>
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<tr>
<td>PROPEL MINI NASAL IMPLANT (mometasone furoate)</td>
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</tr>
<tr>
<td>PROPEL NASAL IMPLANT (mometasone furoate)</td>
<td>3</td>
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</tr>
<tr>
<td><em>NATURAL PENICILLINS</em>**</td>
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<tr>
<td>BICILLIN L-A INTRAMUSCULAR SUSPENSION (penicillin g benzathine)</td>
<td>3</td>
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</tr>
<tr>
<td>PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>penicillin g potassium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PENICILLIN G PROCAINE INTRAMUSCULAR SUSPENSION</td>
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<td></td>
</tr>
<tr>
<td>penicillin g sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>penicillin v potassium oral solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>penicillin v potassium oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pfizerpen injection solution reconstituted</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>NEEDLES &amp; SYRINGES</em>** - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</td>
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<tr>
<td>1ST TIER UNIFINE PENTIPS</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
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<tr>
<td>1ST TIER UNIFINE PENTIPS PLUS</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ABOUTTIME PEN NEEDLE (insulin pen needle)</td>
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<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ADVOCATE INSULIN PEN NEEDLES (insulin pen needle)</td>
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<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ADVOCATE INSULIN SYRINGE (insulin syringe-needle u-100)</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ASSURE ID INSULIN SAFETY SYR (insulin syringe-needle u-100)</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ASSURE ID SAFETY PEN NEEDLES (insulin pen needle)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>AURORA PEN NEEDLES</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
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<tr>
<td>AURORA UNIFINE PENTIPS</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>BD AUTOSHIELD (insulin pen needle)</td>
<td>2</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>BD AUTOSHIELD DUO (insulin pen needle)</td>
<td>2</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYR ULTRAFINE II (insulin syringe-needle u-100)</td>
<td>2</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYRINGE 25G X 1” 1 ML, 25G X 5/8” 1 ML, 26G X 1/2” 1 ML, 27.5G X 5/8” 2 ML (insulin syringe-needle u-100)</td>
<td>2</td>
<td>QL (200 syringes per 30 days)</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td>BD INSULIN SYRINGE 27G X 1/2&quot; 1 ML, 29G X 1/2&quot; 0.3 ML, 29G X 1/2&quot; 0.5 ML, 29G X 1/2&quot; 1 ML (insulin syringe-needle u-100)</td>
<td>2</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYRINGE MICROFINE 27G X 5/8&quot; 1 ML (insulin syringe-needle u-100)</td>
<td>2</td>
<td>QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYRINGE MICROFINE 28G X 1/2&quot; 0.5 ML, 28G X 1/2&quot; 1 ML (insulin syringe-needle u-100)</td>
<td>2</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYRINGE U/F (insulin syringe-needle u-100)</td>
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<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYRINGE U/F 1/2UNIT (insulin syringe-needle u-100)</td>
<td>2</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD INSULIN SYRINGE U-100 1 ML (insulin syringes (disposable))</td>
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<td>ST; QL (200 syringes per 30 days)</td>
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<tr>
<td>BD INSULIN SYRINGE U-500 (insulin syringe/needle u-500)</td>
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<tr>
<td>BD INSULIN SYRINGE ULTRAFINE (insulin syringe-needle u-100)</td>
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<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD PEN NEEDLE MICRO U/F (insulin pen needle)</td>
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</tr>
<tr>
<td>BD PEN NEEDLE MINI U/F (insulin pen needle)</td>
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<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>BD PEN NEEDLE NANO 2ND GEN (insulin pen needle)</td>
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</tr>
<tr>
<td>BD PEN NEEDLE ORIGINAL U/F (insulin pen needle)</td>
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<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>BD PEN NEEDLE SHORT U/F (insulin pen needle)</td>
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<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2&quot; 0.3 ML, 29G X 1/2&quot; 0.5 ML, 30G X 5/16&quot; 0.5 ML, 31G X 15/64&quot; 0.3 ML, 31G X 15/64&quot; 0.5 ML, 31G X 5/16&quot; 0.3 ML (insulin syringe-needle u-100)</td>
<td>2</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64&quot; 1 ML (insulin syringe-needle u-100)</td>
<td>2</td>
<td>QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>BD SAFETY-LOK INSULIN SYRINGE (insulin syringe-needle u-100)</td>
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<tr>
<td>BD VEO INSULIN SYR U/F 1/2UNIT (insulin syringe-needle u-100)</td>
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<td>ST; QL (200 syringes per 30 days)</td>
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<tr>
<td>BD VEO INSULIN SYRINGE U/F 31G X 15/64&quot; 0.3 ML, 31G X 15/64&quot; 0.5 ML (insulin syringe-needle u-100)</td>
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<td>QL (200 syringes per 30 days)</td>
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<tr>
<td>BD VEO INSULIN SYRINGE U/F 31G X 15/64&quot; 1 ML (insulin syringe-needle u-100)</td>
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<td>QL (200 syringes per 30 days)</td>
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<tr>
<td>CAREFINE PEN NEEDLES (insulin pen needle)</td>
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<tr>
<td>CAREONE INSULIN SYRINGE</td>
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<td>CAREONE UNIFINE PENTIPS</td>
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<tr>
<td>CAREONE UNIFINE PENTIPS PLUS</td>
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<tr>
<td>CARETOUCH INSULIN SYRINGE (insulin syringe-needle u-100)</td>
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<td>ST; QL (200 syringes per 30 days)</td>
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<tr>
<td>CARETOUCH PEN NEEDLES (insulin pen needle)</td>
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<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>CLEVER CHOICE COMFORT EZ (insulin pen needle)</td>
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<tr>
<td>CLICKFINE PEN NEEDLES (insulin pen needle)</td>
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<tr>
<td>COMFORT ASSIST INSULIN SYRINGE (insulin syringe-needle u-100)</td>
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<tr>
<td>COMFORT EZ INSULIN SYRINGE (insulin syringe-needle u-100)</td>
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<tr>
<td>COMFORT EZ MICRO PEN NEEDLES (insulin pen needle)</td>
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<td>COMFORT EZ PEN NEEDLES (insulin pen needle)</td>
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<tr>
<td>COMFORT EZ SHORT PEN NEEDLES (<em>insulin pen needle</em>)</td>
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<tr>
<td>DIATHERM PEN NEEDLE (<em>insulin pen needle</em>)</td>
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<tr>
<td>DROPLET INSULIN SYRINGE 29G X 1/2&quot; 0.3 ML, 29G X 1/2&quot; 0.5 ML, 29G X 1/2&quot; 1 ML, 30G X 1/2&quot; 0.5 ML, 30G X 1/2&quot; 1 ML, 30G X 15/64&quot; 0.3 ML, 30G X 15/64&quot; 1 ML, 30G X 5/16&quot; 0.3 ML, 30G X 5/16&quot; 0.5 ML, 30G X 5/16&quot; 1 ML, 31G X 15/64&quot; 0.3 ML, 31G X 15/64&quot; 0.5 ML, 31G X 15/64&quot; 1 ML, 31G X 5/16&quot; 0.3 ML, 31G X 5/16&quot; 0.5 ML, 31G X 5/16&quot; 1 ML (<em>insulin syringe-needle u-100</em>)</td>
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<td>DROPLET INSULIN SYRINGE 30G X 15/64&quot; 0.5 ML (<em>insulin syringe-needle u-100</em>)</td>
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<td>QL (200 syringes per 30 days)</td>
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<td>DROPLET MICRON (<em>insulin pen needle</em>)</td>
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<td>DROPLET PEN NEEDLES (<em>insulin pen needle</em>)</td>
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<td>DROPSAFE SAFETY PEN NEEDLES</td>
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<td>EASY COMFORT PEN NEEDLES</td>
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<td>EASY GLIDE PEN NEEDLES</td>
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<tr>
<td>EASY TOUCH FLIPLOCK INSULIN SY (<em>insulin syringe-needle u-100</em>)</td>
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<tr>
<td>EASY TOUCH INSULIN SAFETY SYR (<em>insulin syringe-needle u-100</em>)</td>
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<td>EASY TOUCH INSULIN SYRINGE (<em>insulin syringe-needle u-100</em>)</td>
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<td>EASY TOUCH PEN NEEDLES (<em>insulin pen needle</em>)</td>
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<tr>
<td>EASY TOUCH SAFETY PEN NEEDLES (<em>insulin pen needle</em>)</td>
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</tr>
<tr>
<td>EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2&quot; 1 ML, 30G X 1/2&quot; 1 ML, 30G X 5/16&quot; 1 ML, 31G X 5/16&quot; 1 ML (<em>insulin syringe-needle u-100</em>)</td>
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<tr>
<td>ELITE-THIN INSULIN SYRINGE 28G X 1/2&quot; 0.5 ML, 28G X 1/2&quot; 1 ML, 28G X 5/16&quot; 1 ML, 29G X 1/2&quot; 0.5 ML, 29G X 1/2&quot; 1 ML, 29G X 5/16&quot; 1 ML, 30G X 5/16&quot; 0.5 ML, 30G X 5/16&quot; 1 ML, 31G X 5/16&quot; 0.3 ML, 31G X 5/16&quot; 0.5 ML, 31G X 5/16&quot; 1 ML (<em>insulin syringe-needle u-100</em>)</td>
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<td>ELITE-THIN INSULIN SYRINGE 28G X 5/16&quot; 0.5 ML, 29G X 5/16&quot; 0.5 ML</td>
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<td>EQL INSULIN SYRINGE</td>
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</tr>
<tr>
<td>EXEL COMFORT POINT INSULIN SYR (<em>insulin syringe-needle u-100</em>)</td>
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<tr>
<td>EXEL COMFORT POINT PEN NEEDLE (<em>insulin pen needle</em>)</td>
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<td>FIFTY50 PEN NEEDLES (<em>insulin pen needle</em>)</td>
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<tr>
<td>FIFTY50 SUPERIOR COMFORT SYR (<em>insulin syringe-needle u-100</em>)</td>
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<td>ST; QL (200 syringes per 30 days)</td>
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<tr>
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<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ULTRA FLO INSULIN PEN NEEDLES (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ULTRA FLO INSULIN SYRINGE (<em>insulin syringe-needle u-100</em>)</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ULTRA THIN PEN NEEDLES (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ULTRACARE INSULIN SYRINGE</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ULTRACARE PEN NEEDLES</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ULTRA-COMFORT INSULIN SYRINGE</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ULTRA-THIN II INS SYR SHORT (<em>insulin syringe-needle u-100</em>)</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ULTRA-THIN II INSULIN SYRINGE (<em>insulin syringe-needle u-100</em>)</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>ULTRA-THIN II MINI PEN NEEDLE (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ULTRA-THIN II PEN NEEDLE SHORT (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>ULTRA-THIN II PEN NEEDLES (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>UNIFINE PENTIPS (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>UNIFINE PENTIPS PLUS (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>UNIFINE SAFECONTROL PEN NEEDLE (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>VALUE HEALTH INSULIN SYRINGE</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>VALUMARK PEN NEEDLES</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>VANISHPOINT INSULIN SYRINGE 29G X 1/2&quot; 1 ML, 29G X 5/16&quot; 1 ML, 30G X 1/2&quot; 0.5 ML, 30G X 5/16&quot; 0.5 ML, 30G X 5/16&quot; 1 ML (<em>insulin syringe-needle u-100</em>)</td>
<td>3</td>
<td>ST; QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>VANISHPOINT INSULIN SYRINGE 30G X 3/16&quot; 0.5 ML, 30G X 3/16&quot; 1 ML (<em>insulin syringe-needle u-100</em>)</td>
<td>3</td>
<td>QL (200 syringes per 30 days)</td>
</tr>
<tr>
<td>VIDA MIA UNIFINE PENTIPS (<em>insulin pen needle</em>)</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>VP INSULIN SYRINGE</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
<tr>
<td>WEGMANS UNIFINE PENTIPS PLUS</td>
<td>3</td>
<td>ST; QL (200 needles per 30 days)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>NEURAMINIDASE INHIBITORS</strong>*</td>
<td></td>
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</tr>
<tr>
<td>oseltamivir phosphate oral capsule 30 mg</td>
<td>1 or 1b*</td>
<td>QL (20 capsule per 90 days)</td>
</tr>
<tr>
<td>oseltamivir phosphate oral capsule 45 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>QL (10 capsule per 90 days)</td>
</tr>
<tr>
<td>oseltamivir phosphate oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td>QL (180 mL per 90 days)</td>
</tr>
<tr>
<td>RAPIVAB INTRAVENOUS SOLUTION (peramivir)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED (zanamivir)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TAMIFLU ORAL CAPSULE 30 MG (oseltamivir phosphate)</td>
<td>3</td>
<td>QL (20 capsule per 90 days)</td>
</tr>
<tr>
<td>TAMIFLU ORAL CAPSULE 45 MG, 75 MG (oseltamivir phosphate)</td>
<td>3</td>
<td>QL (10 capsule per 90 days)</td>
</tr>
<tr>
<td>TAMIFLU ORAL SUSPENSION RECONSTITUTED (oseltamivir phosphate)</td>
<td>3</td>
<td>QL (180 mL per 90 days)</td>
</tr>
<tr>
<td><strong>NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS</strong>* - DRUGS FOR NERVES AND MUSCLES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOTOX INJECTION SOLUTION RECONSTITUTED (onabotulinumtoxina)</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td>DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED (abobotulinumtoxina)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>MYOBLOC INTRAMUSCULAR SOLUTION (rimabotulinumtoxinb)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED (incobotulinumtoxina)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><strong>NICOTINIC ACID DERIVATIVES</strong>*</td>
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<td></td>
</tr>
<tr>
<td>niacin (antihyperlipidemic) oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 750 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>niacin er (antihyperlipidemic) oral tablet extended release 500 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>niacor oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>NIASPAN ORAL TABLET EXTENDED RELEASE 1000 MG, 750 MG (niacin (antihyperlipidemic))</td>
<td>3</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>NIASPAN ORAL TABLET EXTENDED RELEASE 500 MG (niacin (antihyperlipidemic))</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>NITRATE &amp; VASODILATOR COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BIDIL ORAL TABLET (isosorb dinitrate-hydralazine)</td>
<td>2</td>
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<tr>
<td><strong>NITRATE VASODILATING AGENTS</strong>* - RECTAL PREPARATIONS</td>
<td></td>
<td></td>
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<tr>
<td>RECTIV RECTAL OINTMENT (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>NITRATES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE (isosorbide dinitrate)</td>
<td>2</td>
<td></td>
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<tr>
<td>GONITRO SUBLINGUAL PACKET (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ISORDIL TITRADOSE ORAL TABLET (isosorbide dinitrate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>isosorbide dinitrate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>isosorbide mononitrate er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tr>
<td>isosorbide mononitrate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>nitroglycerin (Minitran Transdermal Patch 24 Hour)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NITRO-BID TRANSDERMAL OINTMENT (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR (nitroglycerin)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>nitroglycerin in d5w intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NITROGLYCERIN INTRAVENTOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>nitroglycerin sublingual tablet sublingual</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>nitroglycerin transdermal patch 24 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>nitroglycerin translingual solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NITROLINGUAL TRANSLINGUAL SOLUTION (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NITROMIST TRANSLINGUAL AEROSOL SOLUTION (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NITROSTAT SUBLINGUAL TABLET SUBLINGUAL (nitroglycerin)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>nitro-time oral capsule extended release</td>
<td>1 or 1b*</td>
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*NITROGEN MUSTARDS*** - DRUGS FOR CANCER

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<tr>
<td>ALKERAN INTRAVENOUS SOLUTION RECONSTITUTED (melphalan hcl)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>ALKERAN ORAL TABLET (melphalan)</td>
<td>3; OC; OC</td>
<td>SP</td>
</tr>
<tr>
<td>cyclophosphamide injection solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>CYCLOPHOSPHAMIDE INTRAVENTOUS SOLUTION</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>cyclophosphamide oral capsule</td>
<td>1 or 1b*; OC; OC</td>
<td>SP</td>
</tr>
<tr>
<td>EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED (melphalan hcl)</td>
<td>3</td>
<td>LD; SP</td>
</tr>
<tr>
<td>IFEX INTRAVENOUS SOLUTION RECONSTITUTED (ifosfamide)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>ifosfamide intravenous solution</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>ifosfamide intravenous solution reconstituted 1 gm</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>IFOSFAMIDE INTRAVENTOUS SOLUTION RECONSTITUTED 3 GM</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>LEUKERAN ORAL TABLET (chlorambucil)</td>
<td>2; OC</td>
<td>SP</td>
</tr>
<tr>
<td>melphalan hcl intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>melphalan oral tablet</td>
<td>1 or 1b*; OC; OC</td>
<td>SP</td>
</tr>
</tbody>
</table>

*NITROSOUReAS*** - DRUGS FOR CANCER

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<tbody>
<tr>
<td>BICNU INTRAVENOUS SOLUTION RECONSTITUTED (carmustine)</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>carmustine intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>GLEOSTINE ORAL CAPSULE (lomustine)</td>
<td>3; OC; OC</td>
<td>PA</td>
</tr>
<tr>
<td>GLIADeL WAFER IMPLANT WAFER (carmustine in polifeprosan)</td>
<td>3</td>
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<tr>
<td>ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED (streptozocin)</td>
<td>3</td>
<td>SP</td>
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</tbody>
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<tr>
<td><em>N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS</em>**</td>
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</tr>
<tr>
<td>memantine hcl er oral capsule extended release 24 hour 14 mg, 7 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>memantine hcl er oral capsule extended release 24 hour 21 mg, 28 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>memantine hcl oral solution</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 1 day)</td>
</tr>
<tr>
<td>memantine hcl oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>memantine hcl oral tablet 28 x 5 mg &amp; 21 x 10 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>memantine hcl oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>NAMENDA ORAL TABLET 10 MG (memantine hcl)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>NAMENDA ORAL TABLET 5 MG (memantine hcl)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>NAMENDA TITRATION PAK ORAL TABLET (memantine hcl)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR (memantine hcl)</td>
<td>2</td>
<td>QL (1 pack per 1 fill)</td>
</tr>
<tr>
<td><em>NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS</em>**</td>
<td></td>
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<tr>
<td>EDLUAR SUBLINGUAL TABLET SUBLINGUAL (zolpidem tartrate)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>eszopiclone oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>INTERMEZZO SUBLINGUAL TABLET SUBLINGUAL (zolpidem tartrate)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>zaleplon oral capsule</td>
<td>1 or 1b*</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>zolpidem tartrate er oral tablet extended release</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>zolpidem tartrate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>zolpidem tartrate sublingual tablet sublingual</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>ZOLPIMIST ORAL SOLUTION (zolpidem tartrate)</td>
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<td>ST</td>
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<td><em>NONDEPOLARIZING MUSCLE RELAXANTS</em>** - DRUGS FOR NERVES AND MUSCLES</td>
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<tr>
<td>atracurium besylate intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>cisatracurium besylate (pf) intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>cisatracurium besylate intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>NIMBEX INTRAVENOUS SOLUTION (cisatracurium besylate)</td>
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</tr>
<tr>
<td>pancuronium bromide intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>rocuronium bromide intravenous solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>ROCURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML, 50 MG/5ML</td>
<td>3</td>
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</tr>
<tr>
<td>VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>vecuronium bromide intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>NONERGOLINE DOPAMINE RECEPTOR AGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE (apomorphine hcl)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 mL per 1 day)</td>
</tr>
<tr>
<td>KYNMOBI SUBLINGUAL FILM (apomorphine hcl)</td>
<td>3</td>
<td></td>
</tr>
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<tr>
<td>MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR (pramipexole dihydrochloride)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>MIRAPEX ORAL TABLET (pramipexole dihydrochloride)</td>
<td>3</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>NEUPRO TRANSDERMAL PATCH 24 HOUR (rotigotine)</td>
<td>3</td>
<td>QL (1 patch per 1 day)</td>
</tr>
<tr>
<td>pramipexole dihydrochloride er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>pramipexole dihydrochloride oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>REQUIP XL ORAL TABLET EXTENDED RELEASE 24 HOUR (ropinirole hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ropinirole hcl er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ropinirole hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>NON-NARC ANTITUSSIVE-ANTIHISTAMINE</em>**</td>
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<tr>
<td>promethazine-dm oral syrup</td>
<td>1 or 1a*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td><em>NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE</em>**</td>
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<tr>
<td>pseudoeph-bromphen-dm (Bromfed Dm Oral Syrup)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>NEOTUSS PLUS ORAL LIQUID (phenylephrine-chlorphen-dm)</td>
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<tr>
<td>PSEUDOEPH-BROMPHEN-DM ORAL LIQUID</td>
<td>3</td>
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<tr>
<td>pseudoeph-bromphen-dm oral syrup</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td><em>NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS</em>**</td>
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<tr>
<td>diclofenac-misoprostol oral tablet delayed release 50-0.2 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>diclofenac-misoprostol oral tablet delayed release 75-0.2 mg</td>
<td>1 or 1b*</td>
<td>ST; QL (2 tablets per 1 day)</td>
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<td><em>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</em>**</td>
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<tr>
<td>ANAPROX DS ORAL TABLET (naproxen sodium)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ANJESO INTRAVENOUS INJECTABLE (meloxicam)</td>
<td>3</td>
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<tr>
<td>CALDOLOR INTRAVENOUS SOLUTION (ibuprofen)</td>
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<tr>
<td>DAYPRO ORAL TABLET (oxaprozin)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>diclofenac potassium oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>diclofenac sodium er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>diclofenac sodium oral tablet delayed release 25 mg</td>
<td>1 or 1b*</td>
<td>QL (5 tablets per 1 day)</td>
</tr>
<tr>
<td>diclofenac sodium oral tablet delayed release 50 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>diclofenac sodium oral tablet delayed release 75 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ec-naproxen oral tablet delayed release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>etodolac er oral tablet extended release 24 hour 400 mg, 500 mg</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>etodolac er oral tablet extended release 24 hour 600 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>etodolac oral capsule 200 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>etodolac oral capsule 300 mg</td>
<td>1 or 1b*</td>
<td>QL (3 capsules per 1 day)</td>
</tr>
<tr>
<td>etodolac oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>FELDENE ORAL CAPSULE (piroxicam)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>fenoprofen calcium oral tablet</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>flurbiprofen oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
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<tr>
<td>flurbiprofen oral tablet 50 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ibuprofen (Ibu Oral Tablet)</td>
<td>1 or 1a*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ibuprofen lysine intravenous solution</td>
<td>1 or 1b*</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>ibuprofen oral suspension</td>
<td>1 or 1a*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>indomethacin er oral capsule extended release</td>
<td>1 or 1b*</td>
<td>QL (3 capsule per 1 day)</td>
</tr>
<tr>
<td>indomethacin oral capsule 25 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>indomethacin oral capsule 50 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>indomethacin sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>QL (2 mL per 30 days)</td>
</tr>
<tr>
<td>ketoprofen er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ketoprofen oral capsule 50 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>QL (2 mL per 30 days)</td>
</tr>
<tr>
<td>ketorolac tromethamine injection solution 15 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (4 mL per 30 days)</td>
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<tr>
<td>KETOROLAC TROMETHAMINE INJECTION SOLUTION 30 MG/ML</td>
<td>3</td>
<td>QL (2 mL per 30 days)</td>
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<tr>
<td>ketorolac tromethamine intramuscular solution</td>
<td>1 or 1b*</td>
<td>QL (2 mL per 30 days)</td>
</tr>
<tr>
<td>ketorolac tromethamine oral tablet</td>
<td>1 or 1a*</td>
<td>QL (20 tablets per 30 days)</td>
</tr>
<tr>
<td>LODINE ORAL TABLET (etodolac)</td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>meclofenamate sodium oral capsule</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
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<tr>
<td>mefenamic acid oral capsule</td>
<td>1 or 1b*</td>
<td>QL (29 capsule per 1 fill)</td>
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<tr>
<td>meloxicam oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>nabumetone oral tablet 500 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>nabumetone oral tablet 750 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>naproxen dr oral tablet delayed release</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>naproxen oral suspension</td>
<td>1 or 1b*</td>
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<tr>
<td>naproxen oral tablet</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>naproxen sodium oral tablet 275 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>naproxen sodium oral tablet 550 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>NEOPROFEN INTRAVENOUS SOLUTION (ibuprofen lysine)</td>
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<tr>
<td>oxaprozin oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>piroxicam oral capsule</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
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<tr>
<td>nabumetone (Relafen Oral Tablet 500 Mg)</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>nabumetone (Relafen Oral Tablet 750 Mg)</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>sulindac oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>tolmetin sodium oral capsule</td>
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<tr>
<td>tolmetin sodium oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>OPHTHALMIC ANTIALLERGIC</strong>*</td>
<td></td>
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<tr>
<td>azelastine hcl ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (1 bottle per 24 days)</td>
</tr>
<tr>
<td>cromolyn sodium ophthalmic solution</td>
<td>1 or 1a*</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td>epinastine hcl ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (1 bottle per 30 days)</td>
</tr>
<tr>
<td><strong>OPHTHALMIC ANTIBIOTICS</strong>*</td>
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<tr>
<td>AZASITE OPHTHALMIC SOLUTION (azithromycin)</td>
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<tr>
<td>bacitracin ophthalmic ointment</td>
<td>1 or 1b*</td>
<td>QL (7 grams per 30 days)</td>
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<tr>
<td>BESIVANCE OPHTHALMIC SUSPENSION (besifloxacin hcl)</td>
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<tr>
<td>CILOXAN OPHTHALMIC OINTMENT (ciprofloxacin hcl)</td>
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<td>QL (3.5 grams per 30 days)</td>
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<tr>
<td>CILOXAN OPHTHALMIC SOLUTION (ciprofloxacin hcl)</td>
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<tr>
<td>ciprofloxacin hcl ophthalmic solution</td>
<td>1 or 1a*</td>
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<tr>
<td>erythromycin ophthalmic ointment</td>
<td>1 or 1a*</td>
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<tr>
<td>gatifloxacin ophthalmic solution</td>
<td>1 or 1b*</td>
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<tr>
<td>gentamycin sulfate ophthalmic solution</td>
<td>1 or 1a*</td>
<td>QL (10 mL per 30 days)</td>
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<tr>
<td>levofloxacin ophthalmic solution</td>
<td>1 or 1b*</td>
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<tr>
<td>MOXEZA OPHTHALMIC SOLUTION (moxifloxacin hcl)</td>
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<td>QL (3 mL per 30 days)</td>
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<tr>
<td>moxifloxacin hcl (2x day) ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (3 mL per 30 days)</td>
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<tr>
<td>moxifloxacin hcl ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (1 vial per 30 days)</td>
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<tr>
<td>OCUFLOX OPHTHALMIC SOLUTION (ofloxacin)</td>
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<td>QL (10 mL per 30 days)</td>
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<tr>
<td>ofloxacin ophthalmic solution</td>
<td>1 or 1a*</td>
<td>QL (10 mL per 30 days)</td>
</tr>
<tr>
<td>tobramycin ophthalmic solution</td>
<td>1 or 1a*</td>
<td>QL (20 mL per 30 days)</td>
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<tr>
<td>TOBREX OPHTHALMIC OINTMENT (tobramycin)</td>
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<td>QL (3.5 grams per 30 days)</td>
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<tr>
<td>TOBREX OPHTHALMIC SOLUTION (tobramycin)</td>
<td>3</td>
<td>QL (20 mL per 30 days)</td>
</tr>
<tr>
<td>VIGAMOX OPHTHALMIC SOLUTION (moxifloxacin hcl)</td>
<td>3</td>
<td>QL (1 vial per 30 days)</td>
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<tr>
<td>ZYMAXID OPHTHALMIC SOLUTION (gatifloxacin)</td>
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<tr>
<td><strong>OPHTHALMIC ANTIFUNGAL</strong>* - DRUGS FOR THE EYE</td>
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<tr>
<td>NATACYN OPHTHALMIC SUSPENSION (natamycin)</td>
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<tr>
<td><strong>OPHTHALMIC ANTI-INFECTIVE COMBINATIONS</strong>*</td>
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<tr>
<td>ak-poly-bac ophthalmic ointment</td>
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<tr>
<td>bacitracin-polyoxin b ophthalmic ointment</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>neomycin-bacitracin zn-polyoxin ophthalmic ointment</td>
<td>1 or 1b*</td>
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<tr>
<td>neomycin-polyoxin-gramicidin ophthalmic solution</td>
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<tr>
<td>neomycin-bacitracin zn-polyoxin (Neo-Polycin Ophthalmic Ointment)</td>
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<tr>
<td>bacitracin-polyoxin b (Polycin Ophthalmic Ointment)</td>
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<td>polyoxin b-trimethoprim ophthalmic solution</td>
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<tr>
<td>POLYTRIM OPHTHALMIC SOLUTION (polyoxin b-trimethoprim)</td>
<td>3</td>
<td>QL (10 mL per 30 days)</td>
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</tbody>
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<tr>
<td><strong>OPHTHALMIC ANTISEPTICS</strong>*</td>
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<tr>
<td>BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION (povidone-iodine)</td>
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<tr>
<td><strong>OPHTHALMIC ANTIVIRALS</strong>*</td>
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<tr>
<td>trifluridine ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (7.5 mL per 30 days)</td>
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<tr>
<td>ZIRGAN OPHTHALMIC GEL (ganciclovir)</td>
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<td>QL (5 gram per 7 days)</td>
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<tr>
<td><strong>OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS</strong>*</td>
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<tr>
<td>AZOPT OPHTHALMIC SUSPENSION (brinzolamide)</td>
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<td>dorzolamide hcl ophthalmic solution</td>
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<td>TRUSOPT OPHTHALMIC SOLUTION (dorzolamide hcl)</td>
<td>3</td>
<td>QL (10 mL per 30 days)</td>
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<td><strong>OPHTHALMIC DIAGNOSTIC PRODUCTS</strong>* - DRUGS FOR THE EYE</td>
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<tr>
<td>ak-fluor intravenous solution 10 %</td>
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<tr>
<td>AK-FLUOR INTRA VENOUS SOLUTION 25 %</td>
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<td>altafluor benox ophthalmic solution</td>
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<tr>
<td>fluorescein-benoxinate ophthalmic solution</td>
<td>1 or 1b*</td>
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<td>FLUORESCITE INTRAVENOUS SOLUTION (fluorescein sodium)</td>
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<td>fluorescein sodium (Fluor-I-Strips A.T. Ophthalmic Strip)</td>
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<td>FLURA-SAFE OPHTHALMIC SOLUTION (fluorexon-benoxinate)</td>
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<td>lissamine green ophthalmic strip</td>
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<td>PAREMYD OPHTHALMIC SOLUTION (hydroxyamphetamine-tropicamide)</td>
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<tr>
<td>proparacaine-fluorescein ophthalmic solution</td>
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<td>ROSE GLO OPHTHALMIC STRIP (rose bengal)</td>
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<td><strong>OPHTHALMIC IMMUNOMODULATORS</strong>*</td>
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<td>RESTASIS MULTIDOSE OPHTHALMIC EMULSION (cyclosporine)</td>
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<td>PA; QL (1 bottle per 28 days)</td>
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<td>RESTASIS OPHTHALMIC EMULSION (cyclosporine)</td>
<td>2</td>
<td>PA; QL (2 vials per 1 day)</td>
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<td><strong>OPHTHALMIC IRRIGATION SOLUTIONS</strong>* - DRUGS FOR THE EYE</td>
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<tr>
<td>balanced salt intraocular solution</td>
<td>1 or 1b*</td>
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<tr>
<td>BSS INTRAOCULAR SOLUTION (ophth irr soln-intraocular)</td>
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<td></td>
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<tr>
<td>BSS PLUS INTRAOCULAR SOLUTION (ophth irr soln-intraocular)</td>
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<tr>
<td><strong>OPHTHALMIC LOCAL ANESTHETICS</strong>* - DRUGS FOR THE EYE</td>
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<tr>
<td>AKTEN OPHTHALMIC GEL (lidocaine hcl)</td>
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<tr>
<td>ALCAINE OPHTHALMIC SOLUTION (proparacaine hcl)</td>
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</tr>
<tr>
<td>proparacaine hcl ophthalmic solution</td>
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</tr>
<tr>
<td>tetracaine hcl ophthalmic solution</td>
<td>1 or 1b*</td>
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<td><em>OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACULAR LS OPHTHALMIC SOLUTION <em>(ketorolac tromethamine)</em></td>
<td>3</td>
<td>QL (5 mL per 30 days)</td>
</tr>
<tr>
<td>ACULAR OPHTHALMIC SOLUTION <em>(ketorolac tromethamine)</em></td>
<td>3</td>
<td>QL (5 mL per 30 days)</td>
</tr>
<tr>
<td>bromfenac sodium (once-daily) opthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (1.7 mL per 30 days)</td>
</tr>
<tr>
<td>BROMSITE OPHTHALMIC SOLUTION <em>(bromfenac sodium)</em></td>
<td>3</td>
<td>QL (5 mL per 30 days)</td>
</tr>
<tr>
<td>diclofenac sodium opthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (5 mL per 30 days)</td>
</tr>
<tr>
<td>flurbiprofen sodium ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (2.5 mL per 30 days)</td>
</tr>
<tr>
<td>ILEVRO OPHTHALMIC SUSPENSION <em>(nepafenac)</em></td>
<td>2</td>
<td>QL (3 mL per 30 days)</td>
</tr>
<tr>
<td>ketorolac tromethamine ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (5 mL per 30 days)</td>
</tr>
<tr>
<td>NEVANAC OPHTHALMIC SUSPENSION <em>(nepafenac)</em></td>
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<td>QL (3 mL per 30 days)</td>
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<tr>
<td>PROLENSA OPHTHALMIC SOLUTION <em>(bromfenac sodium)</em></td>
<td>3</td>
<td>QL (3 mL per 30 days)</td>
</tr>
<tr>
<td><em>OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS</em>** - DRUGS FOR THE EYE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED <em>(verteporfin)</em></td>
<td>5</td>
<td>LD; SP</td>
</tr>
<tr>
<td><em>OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALPHAGAN P OPHTHALMIC SOLUTION 0.1 % <em>(brimonidine tartrate)</em></td>
<td>2</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>ALPHAGAN P OPHTHALMIC SOLUTION 0.15 % <em>(brimonidine tartrate)</em></td>
<td>3</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>apraclonidine hcl ophthalmic solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>brimonidine tartrate ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>IOPIDINE OPHTHALMIC SOLUTION <em>(apraclonidine hcl)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>OPHTHALMIC STEROID COMBINATIONS</em>**</td>
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<td></td>
</tr>
<tr>
<td>bacitra-neomycin-polymyxin-hc ophthalmic ointment</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BLEPHAMIDE OPHTHALMIC SUSPENSION <em>(sulfacetamide-prednisolone)</em></td>
<td>3</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td>BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT <em>(sulfacetamide-prednisolone)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MAXITROL OPHTHALMIC OINTMENT <em>(neomycin-polymyxin-dexameth)</em></td>
<td>3</td>
<td></td>
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<tr>
<td>MAXITROL OPHTHALMIC SUSPENSION <em>(neomycin-polymyxin-dexameth)</em></td>
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<td></td>
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<tr>
<td>neomycin-polymyxin-dexameth ophthalmic ointment</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</td>
<td>1 or 1a*</td>
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<tr>
<td>neomycin-polymyxin-hc ophthalmic suspension</td>
<td>1 or 1b*</td>
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<tr>
<td>bacitracin-polymyx-neo-hc <em>(Neo-Polycin Hc Ophthalmic Ointment)</em></td>
<td>1 or 1b*</td>
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<tr>
<td>PRED-G OPHTHALMIC SUSPENSION <em>(gentamicin-prednisolone acet)</em></td>
<td>3</td>
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<tr>
<td>PRED-G S.O.P. OPHTHALMIC OINTMENT <em>(gentamicin-prednisolone acet)</em></td>
<td>3</td>
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</tr>
<tr>
<td>sulfacetamide-prednisolone ophthalmic solution</td>
<td>1 or 1a*</td>
<td>QL (15 mL per 30 days)</td>
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<tr>
<td>TOBRADEX OPHTHALMIC OINTMENT <em>(tobramycin-dexamethasone)</em></td>
<td>2</td>
<td>QL (3.5 grams per 30 days)</td>
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<tr>
<td>TOBRADEX OPHTHALMIC SUSPENSION <em>(tobramycin-dexamethasone)</em></td>
<td>3</td>
<td>QL (10 mL per 30 days)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>TOBRADEX ST OPHTHALMIC SUSPENSION (tobramycin-dexamethasone)</td>
<td>3</td>
<td>QL (10 mL per 30 days)</td>
</tr>
<tr>
<td>tobramycin-dexamethasone ophthalmic suspension</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 30 days)</td>
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<tr>
<td>ZYLET OPHTHALMIC SUSPENSION (loteprednol-tobramycin)</td>
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<tr>
<td><strong>OPHTHALMIC STEROIDS</strong>*</td>
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<tr>
<td>ALREX OPHTHALMIC SUSPENSION (loteprednol etabonate)</td>
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<tr>
<td>dexamethasone sodium phosphate ophthalmic solution</td>
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<td>DEXTENZA OPHTHALMIC INSERT (dexamethasone)</td>
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<tr>
<td>DEXYCU INTRAOCULAR SUSPENSION (dexamethasone)</td>
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<tr>
<td>DUREZOL OPHTHALMIC EMULSION (difluprednate)</td>
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<td>QL (10 mL per 30 days)</td>
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<tr>
<td>FLAREX OPHTHALMIC SUSPENSION (fluorometholone acetate)</td>
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<tr>
<td>flurometholone ophthalmic suspension</td>
<td>1 or 1b*</td>
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<tr>
<td>FML FORTE OPHTHALMIC SUSPENSION (fluorometholone)</td>
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<tr>
<td>FML LIQUIFILM OPHTHALMIC SUSPENSION (fluorometholone)</td>
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<tr>
<td>FML OPHTHALMIC OINTMENT (fluorometholone)</td>
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<tr>
<td>ILUVIEN INTRAVITREAL IMPLANT (fluocinolone acetonide)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td>INVELTYS OPHTHALMIC SUSPENSION (loteprednol etabonate)</td>
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<tr>
<td>LOTEMAX OPHTHALMIC GEL (loteprednol etabonate)</td>
<td>2</td>
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<tr>
<td>LOTEMAX OPHTHALMIC OINTMENT (loteprednol etabonate)</td>
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<tr>
<td>LOTEMAX OPHTHALMIC SUSPENSION (loteprednol etabonate)</td>
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<td>LOTEMAX SM OPHTHALMIC GEL (loteprednol etabonate)</td>
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<td>loteprednol etabonate ophthalmic suspension</td>
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<td>MAXIDEX OPHTHALMIC SUSPENSION (dexamethasone)</td>
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<td>OZURDEX INTRAVITREAL IMPLANT (dexamethasone)</td>
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<td>PA; LD; SP</td>
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<tr>
<td>PRED MILD OPHTHALMIC SUSPENSION (prednisolone acetate)</td>
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<tr>
<td>prednisolone acetate ophthalmic suspension</td>
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<td>PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION</td>
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<tr>
<td>RETISERT INTRAVITREAL IMPLANT (fluocinolone acetonide)</td>
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<td>PA; LD; SP</td>
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<tr>
<td>TRIESENCE INTRAOCULAR SUSPENSION (triamcinolone acetonide)</td>
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<tr>
<td>YUTIQ INTRAVITREAL IMPLANT (fluocinolone acetonide)</td>
<td>3</td>
<td>PA; LD</td>
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<tr>
<td><strong>OPHTHALMIC SULFONAMIDES</strong>*</td>
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<tr>
<td>BLEPH-10 OPHTHALMIC SOLUTION (sulfacetamide sodium)</td>
<td>3</td>
<td>QL (15 mL per 30 days)</td>
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<tr>
<td>sulfacetamide sodium ophthalmic ointment</td>
<td>1 or 1b*</td>
<td>QL (3.5 grams per 30 days)</td>
</tr>
<tr>
<td>sulfacetamide sodium ophthalmic solution</td>
<td>1 or 1b*</td>
<td>QL (15 mL per 30 days)</td>
</tr>
<tr>
<td><strong>OPHTHALMIC SURGICAL AIDS - COMBINATIONS</strong>* - DRUGS FOR THE EYE</td>
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<tr>
<td>DISCOVISC INTRAOCULAR SOLUTION (na chondroit sulf-na hyaluron)</td>
<td>3</td>
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<tr>
<td>DUOVISC INTRAOCULAR KIT (na hyalur &amp; na chond-na hyalur)</td>
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</tr>
</tbody>
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<tbody>
<tr>
<td>OVIDIA INTRAOCULAR SOLUTION (<em>phenylephrine-ketorolac</em>)</td>
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<tr>
<td>VISCOAT INTRAOCULAR SOLUTION (<em>na chondroit sulf-na hyaluron</em>)</td>
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<tr>
<td><strong>OPHTHALMIC SURGICAL AIDS</strong>* - DRUGS FOR THE EYE</td>
<td></td>
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<tr>
<td>AMVIS INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
<td>5</td>
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<tr>
<td>AMVIS PLUS INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>BIOLON INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
<td>5</td>
<td>LD</td>
</tr>
<tr>
<td>CELLUGEL INTRAOCULAR SOLUTION (<em>hyromellose</em>)</td>
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<tr>
<td>GELFILM OPHTHALMIC FILM (<em>gelatin adsorbable</em>)</td>
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<td>HEALON GV INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
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<tr>
<td>HEALON INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
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<tr>
<td>HEALON PRO INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
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<tr>
<td>HEALON5 INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
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<tr>
<td>HEALON5 PRO INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
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<tr>
<td>MEMBRANEBLUE OPHTHALMIC SOLUTION (<em>trypan blue</em>)</td>
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<tr>
<td>hyromellose (Ocucoat Viscoadherent Intraocular Solution)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>PROVISC INTRAOCULAR SOLUTION (<em>sodium hyaluronate</em>)</td>
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<tr>
<td>TISSUEBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE (<em>brilliant blue g</em>)</td>
<td>3</td>
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</tr>
<tr>
<td>VISIONBLUE OPHTHALMIC SOLUTION (<em>trypan blue</em>)</td>
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<tr>
<td><strong>OPHTHALMICS - CYSTINOSIS AGENTS</strong>* - DRUGS FOR THE EYE</td>
<td></td>
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<tr>
<td>CYSTADROPS OPHTHALMIC SOLUTION (<em>cysteamine hcl</em>)</td>
<td>5</td>
<td>PA; QL (4 bottles per 28 days)</td>
</tr>
<tr>
<td>CYSTARAN OPHTHALMIC SOLUTION (<em>cysteamine hcl</em>)</td>
<td>3</td>
<td>PA; LD; QL (60 mL per 28 days)</td>
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<tr>
<td><strong>OPIOID AGONISTS</strong>*</td>
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<tr>
<td>ALFENTANIL HCL INTRAVENOUS SOLUTION</td>
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<tr>
<td>CODEINE SULFATE ORAL TABLET 15 MG</td>
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<tr>
<td>codeine sulfate oral tablet 30 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>CODEINE SULFATE ORAL TABLET 60 MG</td>
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<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR (<em>tramadol hcl</em>)</td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>DEMEROL INJECTION SOLUTION (<em>meperidine hcl</em>)</td>
<td>3</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>DILAUDID INJECTION SOLUTION (<em>hydromorphone hcl</em>)</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>DILAUDID ORAL LIQUID (<em>hydromorphone hcl</em>)</td>
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<td>QL (24 mL per 1 day)</td>
</tr>
<tr>
<td>DILAUDID ORAL TABLET (<em>hydromorphone hcl</em>)</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>DOLOPHINE ORAL TABLET 10 MG (<em>methadone hcl</em>)</td>
<td>3</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>DOLOPHINE ORAL TABLET 5 MG (<em>methadone hcl</em>)</td>
<td>3</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>DSUVIA SUBLINGUAL TABLET SUBLINGUAL (<em>sufentanil citrate</em>)</td>
<td>3</td>
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<tr>
<td>DURAGESIC-100 TRANSDERMAL PATCH 72 HOUR (<em>fentanyl</em>)</td>
<td>3</td>
<td>PA; QL (15 patches per 30 days)</td>
</tr>
<tr>
<td>DURAGESIC-12 TRANSDERMAL PATCH 72 HOUR (<em>fentanyl</em>)</td>
<td>3</td>
<td>PA; QL (15 patches per 30 days)</td>
</tr>
<tr>
<td>DURAGESIC-25 TRANSDERMAL PATCH 72 HOUR (<em>fentanyl</em>)</td>
<td>3</td>
<td>PA; QL (15 patches per 30 days)</td>
</tr>
</tbody>
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<tr>
<td>DURAGESIC-50 TRANSDERMAL PATCH 72 HOUR (fentanyl)</td>
<td>3</td>
<td>PA; QL (15 patches per 30 days)</td>
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<tr>
<td>DURAGESIC-75 TRANSDERMAL PATCH 72 HOUR (fentanyl)</td>
<td>3</td>
<td>PA; QL (15 patches per 30 days)</td>
</tr>
<tr>
<td>Duramorph injection solution</td>
<td>1 or 1b*</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>FENTANYL CITRATE (PF) INJECTION SOLUTION 100 MCG/2ML, 250 MCG/5ML, 50 MCG/ML</td>
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<tr>
<td>Fentanyl citrate (pf) injection solution 1000 mcg/20ml, 2500 mcg/50ml, 500 mcg/10ml</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>Fentanyl citrate (pf) injection solution cartridge</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>Fentanyl citrate buccal lozenge on a handle</td>
<td>1 or 1b*</td>
<td>PA; QL (4 lozenge per 1 day)</td>
</tr>
<tr>
<td>Fentanyl citrate buccal tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (4 tablet per 1 day)</td>
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<tr>
<td>FENTANYL CITRATE INTRAVENOUS SOLUTION</td>
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<tr>
<td>FENTANYL CITRATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MCG/2ML, 1500 MCG/30ML, 250 MCG/5ML, 2750 MCG/55ML</td>
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<tr>
<td>FENTANYL CITRATE-NACL INJECTION SOLUTION</td>
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<td>FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION</td>
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<td>FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
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<td>Fentanyl transdermal patch 72 hour</td>
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<td>PA; QL (15 patches per 30 days)</td>
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<tr>
<td>Fentora buccal tablet (fentanyl citrate)</td>
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<td>PA; QL (4 tablet per 1 day)</td>
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<td>Hydromorphone hcl er oral tablet extended release 24 hour</td>
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<td>PA; QL (1 tablet per 1 day)</td>
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<td>Hydromorphone HCL injection solution 0.2 MG/ML</td>
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<td>QL (6 mL per 1 day)</td>
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<td>Hydromorphone hcl injection solution 1 mg/ml, 2 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>Hydromorphone hcl injection solution 4 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (2 mL per 1 day)</td>
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<tr>
<td>Hydromorphone hcl oral liquid</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>Hydromorphone hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>Hydromorphone HCL PF injection solution 1 MG/ML, 2 MG/ML</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>Hydromorphone HCL PF injection solution 10 MG/ML</td>
<td>3</td>
<td>QL (1 injection per 30 days)</td>
</tr>
<tr>
<td>Hydromorphone HCL PF injection solution 4 MG/ML</td>
<td>3</td>
<td>QL (2 mL per 1 day)</td>
</tr>
<tr>
<td>Hydromorphone hcl pf injection solution 50 mg/5ml, 500 mg/50ml</td>
<td>1 or 1b*</td>
<td>QL (1 injection per 30 days)</td>
</tr>
<tr>
<td>Hydromorphone HCL RECTAL SUPPOSITORY</td>
<td>3</td>
<td>QL (4 suppositories per 1 day)</td>
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<tr>
<td>Hydromorphone HCL-NACL injection solution</td>
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<tr>
<td>Hydromorphone HCL-NACL INTRAVENOUS SOLUTION</td>
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<tr>
<td>Hydromorphone HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/5ML-%, 1-0.9 MG/ML-%, 10-0.9 MG/50ML-%, 2-0.9 MG/ML-%, 50-0.9 MG/50ML-%, 6-0.9 MG/30ML-%</td>
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<tr>
<td>Hydromorphone HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 30-0.9 MG/30ML-%, 55-0.9 MG/55ML-%</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
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<tr>
<td>INFUMORPH 200 INJECTION SOLUTION <em>(morphine sulfate microinfusion)</em></td>
<td>3</td>
<td>QL (2 vials per 30 days)</td>
</tr>
<tr>
<td>INFUMORPH 500 INJECTION SOLUTION <em>(morphine sulfate microinfusion)</em></td>
<td>3</td>
<td>QL (2 vials per 30 days)</td>
</tr>
<tr>
<td>levorphanol tartrate oral tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>meperidine hcl injection solution</td>
<td>1 or 1b*</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>meperidine hcl oral solution</td>
<td>1 or 1b*</td>
<td>QL (7 days per 1 fill)</td>
</tr>
<tr>
<td>meperidine hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>METHADONE HCL INJECTION SOLUTION</td>
<td>3</td>
<td>PA; QL (1 mL per 1 day)</td>
</tr>
<tr>
<td>methadone hcl (Methadone Hcl Intensol Oral Concentrate)</td>
<td>1 or 1b*</td>
<td>PA; QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>methadone hcl oral concentrate</td>
<td>1 or 1b*</td>
<td>PA; QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>methadone hcl oral solution 10 mg/5ml</td>
<td>1 or 1b*</td>
<td>PA; QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>methadone hcl oral solution 5 mg/5ml</td>
<td>1 or 1b*</td>
<td>PA; QL (60 mL per 1 day)</td>
</tr>
<tr>
<td>methadone hcl oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>methadone hcl oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>methadone hcl oral tablet soluble</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>METHADOSE ORAL CONCENTRATE 10 MG/ML <em>(methadone hcl)</em></td>
<td>3</td>
<td>PA; QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>methadone hcl (Methadose Oral Tablet Soluble)</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>METHADOSE SUGAR-FREE ORAL CONCENTRATE <em>(methadone hcl)</em></td>
<td>3</td>
<td>PA; QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate microinfusion <em>(Mitigo Injection Solution)</em></td>
<td>1 or 1b*</td>
<td>QL (2 vials per 30 days)</td>
</tr>
<tr>
<td>morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>MORPHINE SULFATE (PF) INJECTION SOLUTION 10 MG/ML, 2 MG/ML, 4 MG/ML, 5 MG/ML, 8 MG/ML</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>MORPHINE SULFATE (PF) INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate er beads oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate er oral tablet extended release 100 mg, 200 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate er oral tablet extended release 15 mg, 30 mg, 60 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>MORPHINE SULFATE INJECTION SOLUTION 2 MG/ML, 4 MG/ML, 5 MG/ML</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate intravenous solution 1 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate oral solution</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>morphine sulfate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 suppositories per day)</td>
</tr>
<tr>
<td>MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 150-0.9 MG/30ML-%</td>
<td>3</td>
<td>QL (6 mL per 1 day)</td>
</tr>
</tbody>
</table>

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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### Nombre del medicamento recetado

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<tbody>
<tr>
<td>MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 2-0.9 MG/ML-%, 30-0.9 MG/30ML-%, 4-0.9 MG/ML-%, 50-0.9 MG/50ML-%, 55-0.9 MG/55ML-%</td>
<td>3</td>
<td>QL (181 tablets per 30 days)</td>
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<tr>
<td>NUCYNTA ORAL TABLET 100 MG (tapentadol hcl)</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>NUCYNTA ORAL TABLET 50 MG (tapentadol hcl)</td>
<td>3</td>
<td>QL (8 tablet per 1 day)</td>
</tr>
<tr>
<td>NUCYNTA ORAL TABLET 75 MG (tapentadol hcl)</td>
<td>3</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>OPANA ORAL TABLET (oxymorphone hcl)</td>
<td>3</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>OXAYDO ORAL TABLET (oxycodeone hcl)</td>
<td>3</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>oxicodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>oxicodone hcl er oral tablet er 12 hour abuse-deterrent 80 mg</td>
<td>3</td>
<td>PA; QL (2 tablet per 1 day)</td>
</tr>
<tr>
<td>oxicodone hcl oral capsule</td>
<td>1 or 1b*</td>
<td>QL (7 days per 1 fill)</td>
</tr>
<tr>
<td>oxicodone hcl oral concentrate 100 mg/5ml</td>
<td>1 or 1b*</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>oxicodone hcl oral solution</td>
<td>1 or 1b*</td>
<td>QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>oxicodone hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG (oxycodeone hcl)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 60 MG, 80 MG (oxycodeone hcl)</td>
<td>3</td>
<td>PA; QL (2 tablet per 1 day)</td>
</tr>
<tr>
<td>oxymorphone hcl er oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>oxymorphone hcl oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>oxymorphone hcl oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>remifentanil hcl intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>QL (6 vial per 1 fill)</td>
</tr>
<tr>
<td>ROXICODONE ORAL TABLET (oxycodeone hcl)</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>SUFENTANIL CITRATE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>QL (6 vial per 90 days)</td>
</tr>
<tr>
<td>tramadol hcl er (biphasic) oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>tramadol hcl er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>tramadol hcl er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>tramadol hcl oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>tramadol hcl oral tablet 50 mg</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 1 day)</td>
</tr>
<tr>
<td>ULYTIVA INTRAVENOUS SOLUTION RECONSTITUTED (remifentanil hcl)</td>
<td>3</td>
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### *OPIOID ANTAGONISTS***

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
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</thead>
<tbody>
<tr>
<td>naloxone hcl injection solution</td>
<td>1 or 1b*</td>
<td>QL (6 vial per 90 days)</td>
</tr>
<tr>
<td>naloxone hcl injection solution cartridge</td>
<td>1 or 1b*</td>
<td>QL (6 syringe per 90 days)</td>
</tr>
<tr>
<td>naloxone hcl injection solution prefilled syringe</td>
<td>1 or 1b*</td>
<td>QL (6 syringe per 90 days)</td>
</tr>
<tr>
<td>naltrexone hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 nasal spray per 90 days)</td>
</tr>
<tr>
<td>NARCAN NASAL LIQUID (naloxone hcl)</td>
<td>2</td>
<td>QL (6 nasal spray per 90 days)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED (naltrexone)</td>
<td>5</td>
<td>SP; QL (1 vial per 28 days)</td>
</tr>
<tr>
<td><em><strong>OPIOID ANTITUSSIVE-ANTIHISTAMINE</strong></em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>hydrocod polst-cpm polst er oral suspension extended release</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td>promethazine-codeine oral solution</td>
<td>1 or 1a*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td>promethazine-codeine oral syrup</td>
<td>1 or 1a*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td>TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR (hydrocod polst-chlorphen polst)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR (chlorpheniramine-codeine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE (codeine polst-chlorphen polst)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Z-TUSS AC ORAL LIQUID (chlorpheniramine-codeine)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><em><strong>OPIOID ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE</strong></em></td>
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<tr>
<td>CAPCOF ORAL SYRUP</td>
<td>3</td>
<td></td>
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<tr>
<td>HISTEX-AC ORAL SYRUP (phenyleph-triprolidine-codeine)</td>
<td>3</td>
<td></td>
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<tr>
<td>MAR-COF BP ORAL LIQUID (pseudoeph-bromphen-cod)</td>
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</tr>
<tr>
<td>MAXI-TUSS CD ORAL LIQUID</td>
<td>2</td>
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</tr>
<tr>
<td>M-END PE ORAL LIQUID (phenylephrine-bromphen-codeine)</td>
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<tr>
<td>POLY-TUSSIN AC ORAL LIQUID</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>promethazine vc/codeine oral syrup</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td>promethazine-phenyleph-codeine oral syrup</td>
<td>1 or 1b*</td>
<td>QL (120 mL per 1 fill)</td>
</tr>
<tr>
<td>PRO-RED AC ORAL SYRUP (phenyleph-dexchlorphen-codeine)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RYDEX ORAL LIQUID (pseudoeph-bromphen-cod)</td>
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<td></td>
</tr>
<tr>
<td><strong>OPIOID COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>APADAZ ORAL TABLET (benzhydrocodone-acetaminophen)</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>BENZHYDROCODONE-ACETAMINOPHEN ORAL TABLET</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>oxycodone-acetaminophen (Endocet Oral Tablet 10-325 Mg, 2.5-325 Mg, 7.5-325 Mg)</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>oxycodone-acetaminophen (Endocet Oral Tablet 5-325 Mg)</td>
<td>1 or 1b*</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 7.5-325 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>oxycodone-acetaminophen oral tablet 5-325 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablet per 1 day)</td>
</tr>
<tr>
<td>oxycodone-aspirin oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>OPIOID PARTIAL AGONISTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BELBUCA BUCCAL FILM (buprenorphone hcl)</td>
<td>3</td>
<td>PA; QL (2 film per 1 day)</td>
</tr>
<tr>
<td>BUNAVAIL BUCCAL FILM 2.1-0.3 MG (buprenorphone hcl-naloxone hcl)</td>
<td>3</td>
<td>QL (6 films per 1 day)</td>
</tr>
<tr>
<td>BUNAVAIL BUCCAL FILM 4.2-0.7 MG (buprenorphone hcl-naloxone hcl)</td>
<td>3</td>
<td>QL (3 films per 1 day)</td>
</tr>
<tr>
<td>BUNAVAIL BUCCAL FILM 6.3-1 MG (buprenorphone hcl-naloxone hcl)</td>
<td>3</td>
<td>QL (2 films per 1 day)</td>
</tr>
<tr>
<td>BUPRENEX INJECTION SOLUTION (buprenorphone hcl)</td>
<td>3</td>
<td>QL (3 mL per 1 day)</td>
</tr>
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</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>-----------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>buprenorphine hcl injection solution</td>
<td>1 or 1b*</td>
<td>QL (3 mL per 1 day)</td>
</tr>
<tr>
<td>buprenorphine hcl sublingual tablet sublingual 2 mg</td>
<td>1 or 1b*</td>
<td>QL (12 tablets per 90 days)</td>
</tr>
<tr>
<td>buprenorphine hcl sublingual tablet sublingual 8 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 90 days)</td>
</tr>
<tr>
<td>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg</td>
<td>1 or 1b*</td>
<td>QL (2 films per 1 day)</td>
</tr>
<tr>
<td>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg</td>
<td>1 or 1b*</td>
<td>QL (12 films per 1 day)</td>
</tr>
<tr>
<td>buprenorphine hcl-naloxone hcl sublingual film 4-1 mg</td>
<td>1 or 1b*</td>
<td>QL (6 films per 1 day)</td>
</tr>
<tr>
<td>buprenorphine hcl-naloxone hcl sublingual film 8-2 mg</td>
<td>1 or 1b*</td>
<td>QL (3 films per 1 day)</td>
</tr>
<tr>
<td>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</td>
<td>1 or 1b*</td>
<td>QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>buprenorphine transdermal patch weekly</td>
<td>1 or 1b*</td>
<td>PA; QL (1 package per 28 days)</td>
</tr>
<tr>
<td>butorphanol tartrate injection solution 1 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (8 mL per 1 day)</td>
</tr>
<tr>
<td>butorphanol tartrate injection solution 2 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (4 mL per 1 day)</td>
</tr>
<tr>
<td>butorphanol tartrate nasal solution</td>
<td>1 or 1b*</td>
<td>QL (2 bottles per 30 days)</td>
</tr>
<tr>
<td>BUTRANS TRANSDERMAL PATCH WEEKLY (buprenorphine)</td>
<td>3</td>
<td>PA; QL (1 package per 28 days)</td>
</tr>
<tr>
<td>nalbuphine hcl injection solution</td>
<td>1 or 1b*</td>
<td>QL (2 mL per 1 day)</td>
</tr>
<tr>
<td>pentazocine-naloxone hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (6 mL per 1 day)</td>
</tr>
<tr>
<td>PROBUPHINE IMPLANT KIT SUBCUTANEOUS IMPLANT (buprenorphine hcl)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (buprenorphine)</td>
<td>5</td>
<td>LD; QL (1 syringe per 28 days)</td>
</tr>
<tr>
<td>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG (buprenorphine hcl-naloxone hcl)</td>
<td>2</td>
<td>QL (23 tablets per 1 day)</td>
</tr>
<tr>
<td>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG (buprenorphine hcl-naloxone hcl)</td>
<td>2</td>
<td>QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 11.4-2.9 MG (buprenorphine hcl-naloxone hcl)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 2.9-0.71 MG (buprenorphine hcl-naloxone hcl)</td>
<td>2</td>
<td>QL (5 tablets per 1 day)</td>
</tr>
<tr>
<td>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 5.7-1.4 MG (buprenorphine hcl-naloxone hcl)</td>
<td>2</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 8.6-2.1 MG (buprenorphine hcl-naloxone hcl)</td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
</tbody>
</table>

*ORNITHINE DECARBOXYLASE (ODC) INHIBITORS - TOPICAL*** - DRUGS FOR THE SKIN

VANIQA EXTERNAL CREAM (eflornithine hcl)  3

*OSMOTIC DIURETICS***

mannitol intravenous solution  1 or 1b*

osmitrol intravenous solution  1 or 1b*

*OTIC AGENTS - MISCELLANEOUS***

acetic acid otic solution  1 or 1b*

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<td><strong>OTIC ANALGESIC COMBINATIONS</strong>*</td>
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<td></td>
</tr>
<tr>
<td>pramoxine-hc-chloroxylenol (Cortic-Nd Otic Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>OTICIN HC NR OTIC SOLUTION (pramoxine-hc-chloroxylenol)</td>
<td>3</td>
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<tr>
<td>PRAMOTIC OTIC LIQUID (pramoxine-chloroxylenol)</td>
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</tr>
<tr>
<td><strong>OTIC ANTI-INFECTIVES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CETRAXAL OTIC SOLUTION (ciprofloxacin hcl)</td>
<td>3</td>
<td>QL (28 containers per 1 fill)</td>
</tr>
<tr>
<td>ciprofloxacin hcl otic solution</td>
<td>1 or 1b*</td>
<td>QL (28 containers per 1 fill)</td>
</tr>
<tr>
<td>ofloxacin otic solution</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 1 fill)</td>
</tr>
<tr>
<td>OTIPRIO INTRATYMPANIC SUSPENSION (ciprofloxacin)</td>
<td>3</td>
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</tr>
<tr>
<td><strong>OTIC STEROID-ANTI-INFECTIVE COMBINATIONS</strong>*</td>
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<tr>
<td>CIPRO HC OTIC SUSPENSION (ciprofloxacin-hydrocortisone)</td>
<td>3</td>
<td>QL (10 mL per 1 fill)</td>
</tr>
<tr>
<td>CIPRODEX OTIC SUSPENSION (ciprofloxacin-dexamethasone)</td>
<td>3</td>
<td>QL (7.5 mL per 1 fill)</td>
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<tr>
<td>ciprofloxacin-dexamethasone otic suspension</td>
<td>1 or 1b*</td>
<td>QL (7.5 mL per 1 fill)</td>
</tr>
<tr>
<td>ciprofloxacin-fluocinolone pf otic solution</td>
<td>1 or 1b*</td>
<td>QL (28 vials per 1 fill)</td>
</tr>
<tr>
<td>CORTISPORIN-TC OTIC SUSPENSION (neomycin-colist-hc-thonzonium)</td>
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<tr>
<td>neomycin-polymyxin-hc otic solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>neomycin-polymyxin-hc otic suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>OTOVEL OTIC SOLUTION (ciprofloxacin-fluocinolone)</td>
<td>3</td>
<td>QL (28 vials per 1 fill)</td>
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<tr>
<td><strong>OTIC STEROIDS</strong>*</td>
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<tr>
<td>DERMOTIC OTIC OIL (fluocinolone acetonide)</td>
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<tr>
<td>fluocinolone acetonide (Flac Otic Oil)</td>
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</tr>
<tr>
<td>fluocinolone acetonide otic oil</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydrocortisone-acetic acid otic solution</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 1 fill)</td>
</tr>
<tr>
<td><strong>OVULATION STIMULANTS-GONADOTROPINS</strong>*</td>
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<tr>
<td>CHORIONIC GONADOTROPIN INTRAMUSCULAR SOLUTION RECONSTITUTED</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GONAL-F INJECTION SOLUTION RECONSTITUTED (follitropin alfa)</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GONAL-F RFF REDIJECT SUBCUTANEOUS SOLUTION (follitropin alfa)</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED (follitropin alfa)</td>
<td>4</td>
<td>PA; SP</td>
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<tr>
<td>MENOPUR SUBCUTANEOUS SOLUTION RECONSTITUTED (menotropins)</td>
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<tr>
<td>NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED (chorionic gonadotropin)</td>
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<td>PA; SP</td>
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<tr>
<td>OVIDREL SUBCUTANEOUS INJECTABLE (choriogonadotropin alfa)</td>
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<td>PA; SP</td>
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<tr>
<td>PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED (chorionic gonadotropin)</td>
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<td>PA; SP</td>
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<tr>
<td><strong>OVULATION STIMULANTS-SYNTHETIC</strong>*</td>
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<tr>
<td>clomiphene citrate oral tablet</td>
<td>1 or 1b*</td>
<td>PA</td>
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<tr>
<td><strong>OXAZOLIDINONES</strong>*</td>
<td></td>
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</tr>
<tr>
<td>linezolid in sodium chloride intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>linezolid intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>linezolid oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td>PA; QL (900 mL per 30 days)</td>
</tr>
<tr>
<td>linezolid oral tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (28 tablet per 30 days)</td>
</tr>
<tr>
<td>SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED (tedizolid phosphate)</td>
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</tr>
<tr>
<td>SIVEXITRO ORAL TABLET (tedizolid phosphate)</td>
<td>3</td>
<td>PA; QL (6 tablet per 30 days)</td>
</tr>
<tr>
<td>ZYVOX INTRAVENOUS SOLUTION (linezolid)</td>
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</tr>
<tr>
<td>ZYVOX ORAL SUSPENSION RECONSTITUTED (linezolid)</td>
<td>3</td>
<td>PA; QL (900 mL per 30 days)</td>
</tr>
<tr>
<td>ZYVOX ORAL TABLET (linezolid)</td>
<td>3</td>
<td>PA; QL (28 tablet per 30 days)</td>
</tr>
<tr>
<td><strong>OXYTOCRIS</strong>*</td>
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</tr>
<tr>
<td>methylergonovine maleate (Methergine Oral Tablet)</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>methylergonovine maleate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>methylergonovine maleate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>oxytocin injection solution</td>
<td>1 or 1b*</td>
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<td>OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION</td>
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<tr>
<td>OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
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<tr>
<td>PITOCIN INJECTION SOLUTION (oxytocin)</td>
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</tr>
<tr>
<td><strong>PABA</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>aminobenzoate potassium oral packet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><strong>PARATHYROID HORMONE AND DERIVATIVES</strong>*</td>
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</tr>
<tr>
<td>FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR (teriparatide recombinant)</td>
<td>4</td>
<td>PA; SP; QL (1 pen per 28 days)</td>
</tr>
<tr>
<td>NATPARA SUBCUTANEOUS CARTRIDGE (parathyroid hormone recombinant)</td>
<td>3</td>
<td>PA; LD; SP; QL (2 cartridge per 30 days)</td>
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<tr>
<td>TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR</td>
<td>5</td>
<td>PA; SP; QL (1 pen per 28 days)</td>
</tr>
<tr>
<td><strong>PED MULTI VITAMINS W/FL &amp; FE</strong>* - DRUGS FOR NUTRITION</td>
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</tr>
<tr>
<td>multi-vit/iron/fluoride oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>multi-vitamin/fluoride/iron oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>POLY-VI-FLOR/IRON ORAL SUSPENSION (ped multivitamins-fl-iron)</td>
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<tr>
<td>POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE (ped multivitamins-fl-iron)</td>
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<tr>
<td>QUFLORA FE PEDIATRIC ORAL LIQUID (ped multivitamins-fl-iron)</td>
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<tr>
<td><strong>PED MULTIPLE VITAMINS W/ MINERALS &amp; C</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>pediatric multivit-minerals-c (Vitamax Pediatric Oral Solution)</td>
<td>1 or 1b*</td>
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<tr>
<td><em>PED MV W/ FLUORIDE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>FLORIVA PLUS ORAL SOLUTION (pediatric multivitamins-fl)</td>
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</tr>
<tr>
<td>multivitamin/fluoride oral solution</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>multi-vitamin/fluoride oral solution</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>multivitamins/fluoride oral tablet chewable</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>POLY-VI-FLOR FS ORAL STRIP (pediatric multivitamins-fl)</td>
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<tr>
<td>POLY-VI-FLOR ORAL SUSPENSION (pediatric multivitamins-fl)</td>
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<tr>
<td>POLY-VI-FLOR ORAL TABLET CHEWABLE (pediatric multivitamins-fl)</td>
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<tr>
<td>QUFLORA GUMMIES ORAL TABLET CHEWABLE (pediatric multivitamins-fl)</td>
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<tr>
<td>QUFLORA PEDIATRIC ORAL SOLUTION (pediatric multivitamins-fl)</td>
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<tr>
<td>QUFLORA PEDIATRIC ORAL TABLET CHEWABLE (pediatric multivitamins-fl)</td>
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<tr>
<td><em>PED VITAMINS ACD &amp; FA W/ FLUORIDE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>TRI-VI-FLOR ORAL SUSPENSION (ped vit a-c-d-methylfolate-fl)</td>
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<tr>
<td>TRI-VI-FLORO ORAL SUSPENSION</td>
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<tr>
<td><em>PED VITAMINS ACD W/ FLUORIDE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>ade/cf (0.5mg/ml) oral solution</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>tri-vitamin/fluoride oral solution</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>tri-vite/fluoride oral solution</td>
<td>1 or 1b*; $0</td>
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</tr>
<tr>
<td>vitamins acd-fluoride oral solution</td>
<td>1 or 1b*; $0</td>
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<tr>
<td><em>PEDIATRIC MULTIPLE VITAMINS</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>INFUVITE PEDIATRIC INTRAVENOUS SOLUTION (pediatric multiple vitamins)</td>
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<tr>
<td>M.V.I. PEDIATRIC INTRAVENOUS SOLUTION RECONSTITUTED (pediatric multiple vitamins)</td>
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<tr>
<td><em>PENICILLIN COMBINATIONS</em>**</td>
<td></td>
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</tr>
<tr>
<td>amoxicillin-pot clavulanate or oral tablet extended release 12 hour</td>
<td>1 or 1b*</td>
<td>QL (40 tablets per 1 fill)</td>
</tr>
<tr>
<td>amoxicillin-pot clavulanate oral suspension reconstituted</td>
<td>1 or 1b*</td>
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<tr>
<td>amoxicillin-pot clavulanate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>amoxicillin-pot clavulanate oral tablet chewable</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ampicillin-sulbactam sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ampicillin-sulbactam sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
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<tr>
<td>AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED (amoxicillin-pot clavulanate)</td>
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<tr>
<td>AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML (amoxicillin-pot clavulanate)</td>
<td>2</td>
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</tbody>
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<tr>
<td>AUGMENTIN ORAL SUSPENSION RECONSTITUTED 250-62.5 MG/5ML (amoxicillin-pot clavulanate)</td>
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<tr>
<td>AUGMENTIN ORAL TABLET (amoxicillin-pot clavulanate)</td>
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<tr>
<td>BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION (penicillin g benzathine &amp; proc)</td>
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<tr>
<td>BICILLIN C-R INTRAMUSCULAR SUSPENSION (penicillin g benzathine &amp; proc)</td>
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<tr>
<td>piperacillin sod-tazobactam so intravenous solution reconstituted</td>
<td>1 or 1b*</td>
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<tr>
<td>UNASYN INJECTION SOLUTION RECONSTITUTED (ampicillin-sulbactam sodium)</td>
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<tr>
<td>UNASYN INTRAVENOUS SOLUTION RECONSTITUTED (ampicillin-sulbactam sodium)</td>
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<tr>
<td>ZOSYN INTRAVENOUS SOLUTION (piperacillin-tazobactam in dex)</td>
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<tr>
<td><em>PENICILLINASE-RESISTANT PENICILLINS</em>**</td>
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<tr>
<td>dicloxacillin sodium oral capsule</td>
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<tr>
<td>NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION</td>
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<tr>
<td>nafcillin sodium injection solution reconstituted 1 gm, 2 gm</td>
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<tr>
<td>NAFCILLIN SODIUM INJECTION SOLUTION RECONSTITUTED 10 GM</td>
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<td>nafcillin sodium intravenous solution reconstituted</td>
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<td>OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION</td>
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<td>oxacillin sodium injection solution reconstituted</td>
<td>1 or 1b*</td>
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<tr>
<td>oxacillin sodium intravenous solution reconstituted</td>
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<td><em>PERIPHERAL COMT INHIBITORS</em>**</td>
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<td>COMTAN ORAL TABLET (entacapone)</td>
<td>3</td>
<td>QL (8 tablet per 1 day)</td>
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<tr>
<td>entacapone oral tablet</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 1 day)</td>
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<tr>
<td>ONGENTYS ORAL CAPSULE (opicapone)</td>
<td>3</td>
<td>PA; QL (6 tablets per 1 day)</td>
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<tr>
<td><em>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</em>** - DRUGS FOR THE STOMACH</td>
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<td>ENTEREG ORAL CAPSULE (alvimopan)</td>
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<td>MOVANTIK ORAL TABLET (naloxegol oxalate)</td>
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<td>QL (1 tablet per 1 day)</td>
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<td>RELISTOR ORAL TABLET (methylaltrexone bromide)</td>
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<td>ST; QL (3 tablets per 1 day)</td>
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<td>RELISTOR SUBCUTANEOUS SOLUTION (methylaltrexone bromide)</td>
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<td>ST; QL (1 syringe per 1 day)</td>
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<td>SYMPROIC ORAL TABLET (naldemedine tosylate)</td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<td><em>PERITONIAL DIALYSIS SOLUTIONS</em>** - VITAMINS AND MINERALS</td>
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<td>DELFLEX-LC/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>DELFLEX-LC/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>DELFLEX-SM/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>DELFLEX-SM/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<td></td>
</tr>
<tr>
<td>DIANEAL LOW CALCIUM/1.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>DIANEAL LOW CALCIUM/2.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>DIANEAL LOW CALCIUM/4.25% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>DIANEAL PD-2/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
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<td>DIANEAL PD-2/4.25% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<td>EXTRANEA INTRAPERITONEAL SOLUTION (icodextrin-electrolytes)</td>
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<tr>
<td>ULTRABAG/DIANEAL PD-2/1.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
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<tr>
<td>ULTRABAG/DIANEAL PD-2/2.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>ULTRABAG/DIANEAL PD-2/4.25% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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<tr>
<td>ULTRABAG/DIANEAL/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
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<tr>
<td>ULTRABAG/DIANEAL/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL/4.25% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
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</tr>
<tr>
<td><strong>PHENOTHIAZINES &amp; TRICYCLIC AGENTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>perphenazine-amitriptyline oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>PHENOTHIAZINES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>chlorpromazine hcl injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>chlorpromazine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>prochlorperazine (Compro Rectal Suppository)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>fluphenazine decanoate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>fluphenazine hcl injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>fluphenazine hcl oral concentrate</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>fluphenazine hcl oral elixir</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>fluphenazine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td>perphenazine oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>prochlorperazine edisylate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>prochlorperazine maleate oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>prochlorperazine rectal suppository</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>thioridazine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>trifluoperazine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>PHENYLKETONURIA TREATMENT - AGENTS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KUVAN ORAL PACKET (sapropterin dihydrochloride)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>KUVAN ORAL TABLET SOLUBLE (.sapopterin dihydrochloride)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML (pegvaliase-pqpz)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML (pegvaliase-pqpz)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 syringes per 1 day)</td>
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<tr>
<td>sapropterin dihydrochloride oral packet</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>sapropterin dihydrochloride oral tablet soluble</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td><em>PHOSPHATE BINDER AGENTS</em>** - DRUGS FOR THE STOMACH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AURYXIA ORAL Tablet (ferric citrate)</td>
<td>3</td>
<td>ST; QL (9 tablets per 1 day)</td>
</tr>
<tr>
<td>calcium acetate (phos binder) oral capsule</td>
<td>1 or 1b*</td>
<td>QL (12 capsules per 1 day)</td>
</tr>
<tr>
<td>calcium acetate (phos binder) oral tablet</td>
<td>1 or 1b*</td>
<td>QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>calcium acetate oral tablet 667 mg</td>
<td>1 or 1b*</td>
<td>QL (12 tablets per 1 day)</td>
</tr>
<tr>
<td>FOSRENOL ORAL PACKET (lanthanum carbonate)</td>
<td>3</td>
<td>ST; QL (3 stick packs per 1 day)</td>
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<tr>
<td>FOSRENOL ORAL TABLET CHEWABLE (lanthanum carbonate)</td>
<td>3</td>
<td>ST; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>lanthanum carbonate oral tablet chewable</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
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<tr>
<td>PHOSLYRA ORAL SOLUTION (calcium acetate (phos binder))</td>
<td>3</td>
<td>ST; QL (60 mL per 1 day)</td>
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<tr>
<td>RENVELA ORAL PACKET 0.8 GM (sevelamer carbonate)</td>
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<td>ST; QL (6 packets per 1 day)</td>
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<tr>
<td>RENVELA ORAL PACKET 2.4 GM (sevelamer carbonate)</td>
<td>3</td>
<td>ST; QL (3 packets per 1 day)</td>
</tr>
<tr>
<td>RENVELA ORAL TABLET (sevelamer carbonate)</td>
<td>3</td>
<td>ST; QL (9 tablets per 1 day)</td>
</tr>
<tr>
<td>sevelamer carbonate oral packet 0.8 gm</td>
<td>1 or 1b*</td>
<td>QL (6 packets per 1 day)</td>
</tr>
<tr>
<td>sevelamer carbonate oral packet 2.4 gm</td>
<td>1 or 1b*</td>
<td>QL (3 packets per 1 day)</td>
</tr>
<tr>
<td>sevelamer carbonate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 1 day)</td>
</tr>
<tr>
<td>sevelamer hcl oral tablet 400 mg</td>
<td>1 or 1b*</td>
<td>QL (15 tablets per 1 day)</td>
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<tr>
<td>sevelamer hcl oral tablet 800 mg</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 1 day)</td>
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<tr>
<td>VELPHORO ORAL TABLET CHEWABLE (sucroferric oxyhydroxide)</td>
<td>2</td>
<td>QL (3 tablets per 1 day)</td>
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<tr>
<td><em>PHOSPHATE</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>GLYCOPHOS INTRAVENOUS SOLUTION (sodium glycerophosphate)</td>
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<tr>
<td>K-PHOS ORAL TABLET (potassium phosphate monobasic)</td>
<td>2</td>
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<tr>
<td>K-PHOS-NEUTRAL ORAL TABLET (k phos mono-sod phos di &amp; mono)</td>
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<td></td>
</tr>
<tr>
<td>k phos mono-sod phos di &amp; mono (Phospha 250 Neutral Oral Tablet)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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<tr>
<td>phosphorous oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>k phos mono-sod phos di &amp; mono (Phospho-Trin 250 Neutral Oral Tablet)</td>
<td>1 or 1b*</td>
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<tr>
<td>POTASSIUM PHOSPHATES INTRAVENOUS SOLUTION 15 MMOLE/5ML, 150 MMOLE/50ML</td>
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<tr>
<td>potassium phosphates intravenous solution 45 mmole/15ml</td>
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<tr>
<td>POTASSIUM PHOSPHATES(71 MEQ K) INTRAVENOUS SOLUTION</td>
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<tr>
<td>sodium phosphates intravenous solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>virt-phos 250 neutral oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><em>PHOSPHATES</em>**</td>
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<tr>
<td>K-PHOS NO 2 ORAL TABLET (pot &amp; sod ac phosphates)</td>
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<td><em>PHOSPHODIESTERASE III INHIBITORS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>cilostazol oral tablet</td>
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<tr>
<td><em>PHOSPHODIESTERASE INHIBITORS</em>** - DRUGS FOR THE HEART</td>
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<td>milrinone lactate in dextrose intravenous solution</td>
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<tr>
<td>milrinone lactate intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td><em>PHOTODYNAMIC THERAPY AGENTS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>AMELUZ EXTERNAL GEL (aminolevulinic acid hcl)</td>
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<tr>
<td>LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED (aminolevulinic acid hcl)</td>
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<tr>
<td><em>PLASMA EXPANDERS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>HESPAN INTRAVENOUS SOLUTION (hetastarch-nacl)</td>
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<tr>
<td>hetastarch-nacl intravenous solution</td>
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<tr>
<td>HEXTEND INTRAVENOUS SOLUTION (hetastarch in lact electrolyte)</td>
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<tr>
<td>lmd in d5w intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>lmd in nacl intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td><em>PLASMA KALLIKREIN INHIBITORS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>KALBITOR SUBCUTANEOUS SOLUTION (ecallantide)</td>
<td>5</td>
<td>PA; LD; SP; QL (48 vials per 30 days)</td>
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<tr>
<td><em>PLASMA PROTEINS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>albumin human (Albuked 25 Intravenous Solution)</td>
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<tr>
<td>albumin human (Albuked 5 Intravenous Solution)</td>
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<tr>
<td>albumin human intravenous solution</td>
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<tr>
<td>ALBUMINEX INTRAVENOUS SOLUTION (albumin human-kjda)</td>
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<tr>
<td>albumin-zlb intravenous solution</td>
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<tr>
<td>alburx intravenous solution</td>
<td>1 or 1b*</td>
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</tr>
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<tr>
<td><em>albumin human</em> <em>(Albutein Intravenous Solution)</em></td>
<td>1 or 1b*</td>
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<tr>
<td><em>albumin human</em> <em>(Flexbumin Intravenous Solution)</em></td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>albumin human</em> <em>(Human Albumin Grifols Intravenous Solution)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>kedbumin intravenous solution</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION <em>(plasma human)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION <em>(plasma human)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION <em>(plasma human)</em></td>
<td>3</td>
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</tr>
<tr>
<td>OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION <em>(plasma human)</em></td>
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<tr>
<td><em>albumin human</em> <em>(Plasbumin-25 Intravenous Solution)</em></td>
<td>1 or 1b*</td>
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<tr>
<td><em>albumin human</em> <em>(Plasbumin-5 Intravenous Solution)</em></td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td>PLASMANATE INTRAVENOUS SOLUTION <em>(plasma protein fraction)</em></td>
<td>3</td>
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<tr>
<td>THROMBATE III INTRAVENOUS SOLUTION RECONSTITUTED <em>(antithrombin iii (human))</em></td>
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<tr>
<td><em>PLATELET AGGREGATION INHIBITOR COMBINATIONS</em>** - DRUGS FOR THE BLOOD</td>
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</tr>
<tr>
<td>AGGRENOX ORAL CAPSULE EXTENDED RELEASE 12 HOUR <em>(aspirin-dipyridamole)</em></td>
<td>3</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>aspirin-dipyridamole er oral capsule extended release 12 hour</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>ASPIRIN-OMEPRAZOLE ORAL TABLET DELAYED RELEASE</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>YOSPRALA ORAL TABLET DELAYED RELEASE <em>(aspirin-omeprazole)</em></td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td><em>PLATELET AGGREGATION INHIBITORS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>dipyridamole oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>DURLAZA ORAL CAPSULE EXTENDED RELEASE 24 HOUR <em>(aspirin)</em></td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
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<td><em>PLEURAL SCLEROSING AGENTS</em>** - DRUGS FOR THE LUNGS</td>
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<tr>
<td>SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER <em>(talc)</em></td>
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<tr>
<td>STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED <em>(talc)</em></td>
<td>3</td>
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<tr>
<td>STERITALC INTRAPLEURAL POWDER <em>(talc)</em></td>
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<tr>
<td><em>POLYMYXINS</em>**</td>
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<tr>
<td>colistimethate sodium <em>(cba) injection solution reconstituted</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED <em>(colistimethate sodium)</em></td>
<td>3</td>
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</tr>
<tr>
<td>polymyxin b sulfate injection solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
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<tr>
<td><em>POSTHERPETIC NEURALGIA (PHN) AGENTS</em>**</td>
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<tr>
<td>GRALISE ORAL TABLET 300 MG <em>(gabapentin (once-daily))</em></td>
<td>2</td>
<td>PA; DO</td>
</tr>
</tbody>
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<tr>
<td>GRALISE ORAL TABLET 600 MG (<em>gabapentin (once-daily)</em>))</td>
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<td>PA; QL (3 tablets per 1 day)</td>
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<tr>
<td>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 82.5 MG (<em>pregabalin</em>)</td>
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<td>PA; DO</td>
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<tr>
<td>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 330 MG (<em>pregabalin</em>)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>POTASSIUM COMBINATIONS</strong>* - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ (<em>potassium bicarb-citric acid</em>)</td>
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</tr>
<tr>
<td>pot bicarb-pot chloride oral tablet effervescent</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>POTASSIUM REMOVING RESINS</strong>* - VITAMINS AND MINERALS</td>
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<tr>
<td>sodium polystyrene sulfonate (Kionex Oral Suspension)</td>
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<tr>
<td>LOKELMA ORAL PACKET (<em>sodium zirconium cyclosilicate</em>)</td>
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<tr>
<td>sodium polystyrene sulfonate oral powder</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium polystyrene sulfonate oral suspension</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>sodium polystyrene sulfonate rectal suspension</td>
<td>1 or 1b*</td>
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<tr>
<td>sodium polystyrene sulfonate (*) (Sps Oral Suspension)</td>
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<td></td>
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<tr>
<td>VELTASSA ORAL PACKET (<em>patiromer sorbitex calcium</em>)</td>
<td>3</td>
<td>LD</td>
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<tr>
<td><strong>POTASSIUM SPARING DIURETICS</strong>*</td>
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<tr>
<td>ALDACTONE ORAL TABLET (<em>spironolactone</em>)</td>
<td>3</td>
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<tr>
<td>amiloride hcl oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>CAROSPIR ORAL SUSPENSION (<em>spironolactone</em>)</td>
<td>3</td>
<td>QL (20 mL per 1 day)</td>
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<tr>
<td>spironolactone oral tablet</td>
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</tr>
<tr>
<td>triamterene oral capsule</td>
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<td><strong>POTASSIUM</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>potassium bicarbonate (Effer-K Oral Tablet Effervescent 25 Meq)</td>
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<tr>
<td>potassium chloride (Klor-Con 10 Oral Tablet Extended Release)</td>
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<td>potassium chloride crys er (Klor-Con M10 Oral Tablet Extended Release)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>klor-con m15 oral tablet extended release</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride crys er (Klor-Con M20 Oral Tablet Extended Release)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride (Klor-Con Oral Packet)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride (Klor-Con Oral Tablet Extended Release)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride (Klor-Con Sprinkle Oral Capsule Extended Release)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium bicarbonate (Klor-Con/Ef Oral Tablet Effervescent)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium bicarbonate (K-Prime Oral Tablet Effervescent)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>K-TAB ORAL TABLET EXTENDED RELEASE (<em>potassium chloride</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>potassium acetate intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium bicarbonate oral tablet effervescent</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride crys er oral tablet extended release</td>
<td>1 or 1a*</td>
<td></td>
</tr>
</tbody>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>potassium chloride er oral capsule extended release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride er oral tablet extended release</td>
<td>1 or 1b*</td>
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<tr>
<td>POTASSIUM CHLORIDE INTRAVENOUS SOLUTION 10 MEQ/100ML, 10 MEQ/50ML, 20 MEQ/100ML, 20 MEQ/50ML, 40 MEQ/100ML</td>
<td>3</td>
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<tr>
<td>potassium chloride intravenous solution 2 meq/ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride oral packet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>potassium chloride oral solution</td>
<td>1 or 1b*</td>
<td></td>
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**PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS - SSRIS***

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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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<tbody>
<tr>
<td>fluoxetine hcl (pmdd) oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>fluoxetine hcl (pmdd) oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
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**PRENATAL MV & MIN W/FE-FA*** - DRUGS FOR NUTRITION

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<tr>
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<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
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</thead>
<tbody>
<tr>
<td>ATABEX EC ORAL TABLET DELAYED RELEASE (prenatal vit-dss-fe cbn-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ATABEX OB ORAL TABLET (prenatal vit w/fe bisg-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>AZESCHEW PRENATAL/POSTNATAL ORAL TABLET CHEWABLE</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>BAL-CARE DHA ORAL (prenat-fepoly-fered-fa-omega 3)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CITRANATAL B-CALM ORAL (prenat w/o a fecbnfeglu-fa &amp;b6)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CITRANATAL BLOOM ORAL TABLET (prenatal-dss-fecb-fegl-fa)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>CITRANATAL RX ORAL TABLET (prenat w/o a-fecb-fegl-dss-fa)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>CLASSIC PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>C-NATE DHA ORAL CAPSULE</td>
<td>2</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>COMPLETENATE ORAL TABLET CHEWABLE</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>CO-NATAL FA ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>CONCEPT DHA ORAL CAPSULE (prenat-fefum-fepo-omega 3)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>CONCEPT OB ORAL CAPSULE (prenat w/o a vit-fefum-fepo-efa)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>CVS PRENATAL ORAL TABLET</td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>DUET DHA 400 ORAL (prenat-fepoly-fered-fa-omega 3)</td>
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<td>ST</td>
</tr>
<tr>
<td>DUET DHA BALANCED ORAL (prenat-fepoly-fered-fa-omega 3)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>elite-ob oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ENBRACE HR ORAL CAPSULE (prenat vit-fe gly cys-fa-omega)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>EQL PRENATAL FORMULA ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>FOLIVANE-OB ORAL CAPSULE (prenat w/o a vit-fefum-fepeo-fa)</td>
<td>2</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>GNP DAILY PRENATAL ORAL</td>
<td>2; $0</td>
<td>QL (1 EA per 1 day)</td>
</tr>
<tr>
<td>GNP PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>GOODSENSE PRENATAL VITAMINS ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>HM ONE DAILY PRENATAL ORAL</td>
<td>2; $0</td>
<td>QL (1 EA per 1 day)</td>
</tr>
<tr>
<td>HM PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td>inatal gt oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>KOSHER PRENATAL PLUS IRON ORAL TABLET</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>KP PRENATAL MULTIVITAMINS ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>KPN PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>MARNATAL-F ORAL CAPSULE (prenat w/o a-fe poly cmplx-fa)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>MULTI PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>MYNATAL ORAL CAPSULE (prenatal multivit-min-fe-fa)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
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<tr>
<td>MYNATAL PLUS ORAL TABLET</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>MYNATAL-Z ORAL TABLET</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NATACHEW ORAL TABLET CHEWABLE (prenatal vit-fe fum-fe bisg-fa)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NATALVIT ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>NEEVO DHA ORAL CAPSULE (prenat w/o-fe fum-methf-omegas)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>NEONATAL COMPLETE ORAL TABLET</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>NEONATAL PLUS ORAL TABLET</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NEONATAL VITAMIN ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NESTABS DHA ORAL (prenat-w/oa-fe bisgly-fa-omega)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>NESTABS ORAL TABLET (prenat-fe bisgly-fa-w/o vit a)</td>
<td>3</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>NIVA-PLUS ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>OB COMPLETE ONE ORAL CAPSULE (prenat-fecbn-feaspgl-fa-fish)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>OB COMPLETE ORAL TABLET (prenatal vit-iron carbonyl-fa)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>OB COMPLETE PETITE ORAL CAPSULE (prenatal-feaspgl-fe-omega)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>OB COMPLETE PREMIER ORAL TABLET (prenatal-fe cbn-fe asp gly-fa)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>OB COMPLETE/DHA ORAL CAPSULE (prenatal-feaspgl-dha-omega)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>OBSTETRIX DHA ORAL (prenatal-feaspgl-dha-omega 3)</td>
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<td>QL (1 EA per 1 day)</td>
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<tr>
<td>OBSTETRIX EC ORAL TABLET (prenatal vit-dss-fe cbn-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>O-CAL PRENATAL ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>ONE VITE WOMENS ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>ONE VITE WOMENS PLUS ORAL TABLET</td>
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<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ONE-A-DAY WOMENS PRENATAL ORAL (prenatal vit-fe fum-fa-oomega)</td>
<td>2; $0</td>
<td>QL (1 EA per 1 day)</td>
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<tr>
<td>PERRY PRENATAL ORAL CAPSULE (prenatal vit-fe fumarate-fa)</td>
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<td>QL (1 capsule per 1 day)</td>
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<tr>
<td>PNV PRENATAL PLUS MULTIVITAMIN ORAL TABLET</td>
<td>2</td>
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<tr>
<td>PNV TABS 29-1 ORAL TABLET</td>
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<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PNV-Omega ORAL CAPSULE</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>PRENA1 PEARL ORAL CAPSULE EXTENDED RELEASE</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>PRENARA ORAL CAPSULE</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>prenatabs rx oral tablet</td>
<td>1 or 1a*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRENATAL 19 ORAL TABLET 29-1 MG</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
</tbody>
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<tr>
<td>prenatal 19 oral tablet chewable</td>
<td>1 or 1a*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATAL 19 ORAL TABLET CHEWABLE 29-1 MG</td>
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<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRENATAL COMPLETE ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRE-NATAL FORMULA ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATAL FORTE ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATAL LOW IRON ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATAL ONE DAILY ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<td>PRENATAL ORAL TABLET 27-0.8 MG, 28-0.8 MG</td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATAL ORAL TABLET 27-1 MG</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATAL PLUS IRON ORAL TABLET</td>
<td>2</td>
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<td>PARENATAL VITAMIN AND MINERAL ORAL TABLET</td>
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<td>PARENATAL/IRON ORAL TABLET</td>
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<tr>
<td>PARENATAL-U ORAL CAPSULE (prenatal w/o a vit-fe fum-fa)</td>
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<td>QL (1 capsule per 1 day)</td>
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<tr>
<td>PARENATE ELITE ORAL TABLET (prenatal-feaspgly-methylfol-fa)</td>
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<tr>
<td>PRENATRIX ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
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<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRENATVITE COMPLETE ORAL TABLET</td>
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<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATVITE PLUS ORAL TABLET</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRENATVITE RX ORAL TABLET</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PREPLUS ORAL TABLET</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>PRETAB ORAL TABLET</td>
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</tr>
<tr>
<td>PRIMACARE ORAL CAPSULE (pren-fe-meth-fa-omeg w/o a)</td>
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<td>PROVIDA OB ORAL CAPSULE (prenat w/o a vit-fe-fum-fepo-fa)</td>
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</tr>
<tr>
<td>PX PRENATAL MULTIVITAMINS ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>QC PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>RA ONE DAILY ORAL</td>
<td>2; $0</td>
<td>QL (1 EA per 1 day)</td>
</tr>
<tr>
<td>RA PRENATAL FORMULA ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>RA PRENATAL ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>RELNATE DHA ORAL CAPSULE</td>
<td>3</td>
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</tr>
<tr>
<td>RIGHT STEP PRENATAL ORAL TABLELET (prenatal vit-fe fumarate-fa)</td>
<td>2; $0</td>
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<tr>
<td>SELECT-OB ORAL TABLET CHEWABLE (prenatal vit-fe psac cmlpx-fa)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>SE-NATAL 19 ORAL TABLET</td>
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<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SE-NATAL 19 ORAL TABLET CHEWABLE</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SM ONE DAILY PRENATAL ORAL</td>
<td>2; $0</td>
<td>QL (1 EA per 1 day)</td>
</tr>
<tr>
<td>SM PRENATAL VITAMINS ORAL TABLET</td>
<td>2; $0</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>TARON-C DHA ORAL CAPSULE (prenat-fefum-fepo-fa-omega 3)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
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<tr>
<td>THRVITE RX ORAL TABLET</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>TRICARE ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>TRICARE PRENATAL DHA ONE ORAL CAPSULE (prenatal-fefum-fa-dss-fish oil)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>TRINATAL RX 1 ORAL TABLET</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>trinate oral tablet</em></td>
<td>1 or 1a*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>TRI-TABS DHA ORAL</td>
<td>3</td>
<td></td>
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<td>VINATE DHA RF ORAL CAPSULE (prenat w/o-fe-fum-methf-omegas)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>VINATE II ORAL TABLET (prenatal vit w/ fe bisg-fa)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>VINATE ONE ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
<td>2</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>VIRT-C DHA ORAL CAPSULE</td>
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<tr>
<td>VIRT-NATE DHA ORAL CAPSULE</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>VIRT-PN PLUS ORAL CAPSULE</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<td>VITAFOL GUMMIES ORAL TABLET CHEWABLE (prenatal vit-fe phos-fa-omega)</td>
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<td>QL (1 tablet per 1 day)</td>
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<td>VITAFOL-NANO ORAL TABLET (prenatal-fe fum-methf-w/o a)</td>
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<td>VITAFOL-OB ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
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<tr>
<td>VITAPEARL ORAL CAPSULE EXTENDED RELEASE (prenatal-fe fumered-fa-dha w/o a)</td>
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<td>VITATHELY WITH GINGER ORAL TABLET (prenatal vit-fe fumarate-fa)</td>
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<td>VIVA DHA ORAL CAPSULE (prenatal vit-fe fum-fa-omega)</td>
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<td>VOL-PLUS ORAL TABLET</td>
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<tr>
<td>VOL-TAB RX ORAL TABLET</td>
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<td>VP-HEME OB + DHA ORAL</td>
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<td>VP-PNV-DHA ORAL CAPSULE</td>
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<td>ZALVIT ORAL TABLET</td>
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<td>ZATEAN-PN PLUS ORAL CAPSULE (prenat w/o-fe-methf-fa-omega)</td>
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<tr>
<td><strong>PRENATAL MV &amp; MIN W/FE-FA-CA-OMEGA 3 FISH OIL</strong>* - DRUGS FOR NUTRITION</td>
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<td>COMPLETE NATAL DHA ORAL</td>
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<td>PR NATAL 400 EC ORAL (prenat-febis-fepro-fa-ca-omega)</td>
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<td>PR NATAL 400 ORAL (prenat-febis-fepro-fa-ca-omega)</td>
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<td>PR NATAL 430 EC ORAL (prenat-febis-fepro-fa-ca-omega)</td>
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<td>PR NATAL 430 ORAL (prenat-febis-fepro-fa-ca-omega)</td>
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<td>TRIVEEN-DUO DHA ORAL (prenat-febis-fepro-fa-ca-omega)</td>
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<td><strong>PRENATAL MV &amp; MIN W/FE-FA-DHA</strong>* - DRUGS FOR NUTRITION</td>
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<td>CITRANATAL 90 DHA ORAL (prenat w/o-fecha-dss-fa-dha)</td>
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<tr>
<td>CITRANATAL ASSURE ORAL (<em>prenat w/o a-fecbgl-dss-fa-dha</em>)</td>
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<td>CITRANATAL HARMONY ORAL CAPSULE (<em>prenat-fefmc-b-dss-fa-dha w/o a</em>)</td>
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<td>CITRANATAL MEDLEY ORAL CAPSULE (<em>prenat-feb-fuma-fa-dha w/o a</em>)</td>
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<td>ENFAMIL EXPECTA ORAL (<em>prenatal mv-min-fe fum-fa-dha</em>)</td>
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<td>NEONATAL + DHA ORAL</td>
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<tr>
<td>NESTABS ONE ORAL CAPSULE (<em>prenat-fe-methylfol-dha w/o a</em>)</td>
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<td>OBSTETRIX ONE ORAL CAPSULE (<em>prenat-fe-methyl-dss-dha w/o a</em>)</td>
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<td>QL (1 capsule per 1 day)</td>
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<td>PNV-DHA+DOCUSATE ORAL CAPSULE</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>PRENA 1 TRUE ORAL</td>
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<tr>
<td>PRENAISSANCE ORAL CAPSULE</td>
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<td>PRENAISSANCE PLUS ORAL CAPSULE</td>
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<tr>
<td>PRENATAL MULTIVITAMIN + DHA ORAL (<em>prenatal mv-min-fe fum-fa-dha</em>)</td>
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<td>QL (1 EA per 1 day)</td>
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<tr>
<td>PRENATE DHA ORAL CAPSULE (<em>prenat-feasp-meth-fa-dha w/o a</em>)</td>
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<td>PRENATE ENHANCE ORAL CAPSULE (<em>prenat w/o a-fe-methylfol-fa-dha</em>)</td>
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<td>PRENATE ESSENTIAL ORAL CAPSULE (<em>prenat-feasp-meth-fa-dha w/o a</em>)</td>
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<tr>
<td>PRENATE MINI ORAL CAPSULE (<em>prenat-fechn-feasp-fa-dha</em>)</td>
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<tr>
<td>PRENATE PIXIE ORAL CAPSULE (<em>prenat-feasp-meth-fa-dha</em>)</td>
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<td>PRENATE RESTORE ORAL CAPSULE (<em>prenat w/o a-fe-methylfol-fa-dha</em>)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<td>R-NATAL OB ORAL CAPSULE (<em>prenat-fe cbn-fa-dha w/o a</em>)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>SELECT-OB+DHA ORAL (<em>prenatal vit-fepoly-fa-dha</em>)</td>
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<tr>
<td>TARON-PREX ORAL CAPSULE (<em>prenat-febum-fss-fa-dha w/o a</em>)</td>
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<td>QL (1 capsule per 1 day)</td>
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<tr>
<td>TRISTART DHA ORAL CAPSULE</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>TRISTART ONE ORAL CAPSULE (<em>prenat w/o a-fecbn-meth-fa-dha</em>)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>VIRT-PN DHA ORAL CAPSULE</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>VITAFOL FE+ ORAL CAPSULE (<em>prenat-fe poly-methylfol-fa-dha</em>)</td>
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<td>VITAFOL ULTRA ORAL CAPSULE (<em>prenat-fe poly-methylfol-fa-dha</em>)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>VITAFOL-OB+DHA ORAL CAPSULE (<em>prenatal mv-min-fe fum-fa-dha</em>)</td>
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<td>ST</td>
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<tr>
<td>VITAFOL-ONE ORAL CAPSULE (<em>prenat vit-fepoly-fa-dha</em>)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>VITAMEDMD ONE RX/QUATREFOLIC ORAL CAPSULE (<em>prenat w/o a-fe-methylfol-fa-dha</em>)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>VITATRUE ORAL (<em>prenat-fechel-fa-dha w/o vit a</em>)</td>
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<td>ST; QL (2 tablets per 1 day)</td>
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<tr>
<td>ZATEAN-PN DHA ORAL CAPSULE (<em>prenat w/o a-fe-methylfol-fa-dha</em>)</td>
<td>3</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>PRENATAL MV &amp; MINERALS W/FA</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>PRENATE ORAL TABLET CHEWABLE <em>(prenat mv-min-methylfolate-fa)</em></td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>PRENATAL VITAMINS</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>PREMESIS RX ORAL TABLET <em>(prenatal ca-b6-b12-fa-ginger)</em></td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENA1 ORAL TABLET CHEWABLE</td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>PRENATE AM ORAL TABLET <em>(prenatal ca-b6-b12-fa-ginger)</em></td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>VITAMEDMD REDICHEW RX ORAL TABLET CHEWABLE <em>(prenat-b2-b6-b12-d3-fa)</em></td>
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<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>PROGESTERONE RECEPTOR ANTAGONISTS</strong>*</td>
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<tr>
<td>KORLYM ORAL TABLET <em>(mifepristone)</em></td>
<td>5</td>
<td>PA; LD</td>
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<tr>
<td><strong>PROGESTIN CONTRACEPTIVES - IMPLANTS</strong>*</td>
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<tr>
<td>NEXPLANON SUBCUTANEOUS IMPLANT <em>(etonogestrel)</em></td>
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<td>LD; SP</td>
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<tr>
<td><strong>PROGESTIN CONTRACEPTIVES - INJECTABLE</strong>*</td>
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<tr>
<td>DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML <em>(medroxyprogesterone acetate)</em></td>
<td>3</td>
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<tr>
<td>DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(medroxyprogesterone acetate)</em></td>
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<tr>
<td>DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE <em>(medroxyprogesterone acetate)</em></td>
<td>3; $0</td>
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<tr>
<td>medroxyprogesterone acetate intramuscular suspension</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>medroxyprogesterone acetate intramuscular suspension prefilled syringe</td>
<td>1 or 1b*; $0</td>
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<td><strong>PROGESTIN CONTRACEPTIVES - IUD</strong>*</td>
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<tr>
<td>KYLEENA INTRAUTERINE INTRAUTERINE DEVICE <em>(levonorgestrel)</em></td>
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<td>LD; SP</td>
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<tr>
<td>LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE <em>(levonorgestrel)</em></td>
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<td>LD; SP</td>
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<td>MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE <em>(levonorgestrel)</em></td>
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<td>LD; SP</td>
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<tr>
<td>SKYLA INTRAUTERINE INTRAUTERINE DEVICE <em>(levonorgestrel)</em></td>
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<td><strong>PROGESTIN CONTRACEPTIVES - ORAL</strong>*</td>
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<tr>
<td>norethindrone <em>(Camila Oral Tablet)</em></td>
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<tr>
<td>norethindrone <em>(Deblitane Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
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<tr>
<td>norethindrone <em>(Errin Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
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<td>norethindrone <em>(Heather Oral Tablet)</em></td>
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<td>norethindrone <em>(Incassia Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
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<td>norethindrone <em>(Jencycla Oral Tablet)</em></td>
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<td>norethindrone <em>(Lyza Oral Tablet)</em></td>
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<td>norethindrone <em>(Nora-Be Oral Tablet)</em></td>
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<tr>
<td>norethindrone oral tablet</td>
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<tr>
<td>norethindrone <em>(Norlyda Oral Tablet)</em></td>
<td>1 or 1b*; $0</td>
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<tr>
<td>norethindrone (Norlyroc Oral Tablet)</td>
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<td>norethindrone (Sharobel Oral Tablet)</td>
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<td>SLYND ORAL TABLET (drospirenone)</td>
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<td>norethindrone (Tulana Oral Tablet)</td>
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<td><strong>PROGESTINS</strong>*</td>
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<td>AYGESTIN ORAL TABLET (norethindrone acetate)</td>
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<tr>
<td>hydroxyprogesterone caproate intramuscular oil</td>
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<td>MAKENA INTRAMUSCULAR OIL (hydroxyprogesterone caproate)</td>
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<td>QL (1 tablet per 1 day)</td>
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<td>megestrol acetate oral suspension 625 mg/5ml</td>
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<td>progesterone intramuscular oil</td>
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<td>1 or 1b*</td>
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<tr>
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<tr>
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<tr>
<td>megestrol acetate oral tablet</td>
<td>1 or 1b*; OC</td>
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<td>PA</td>
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<td>CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED (alprostadil (vasodilator))</td>
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<td>EDEX INTRACAVERNOSAL KIT (alprostadil (vasodilator))</td>
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<td>MUSE URETHRAL PELLET (alprostadil (vasodilator))</td>
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<td>PA</td>
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<td><strong>PROSTAGLANDIN VASODILATORS</strong>*</td>
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<td>epoprostenol sodium intravenous solution reconstituted</td>
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<td>FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED (epoprostenol sodium)</td>
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<td>ORENITRAM ORAL TABLET EXTENDED RELEASE (treprostinil diolamine)</td>
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<tr>
<td>REMODULIN INJECTION SOLUTION (treprostinil)</td>
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<tr>
<td>treprostinil injection solution</td>
<td>4</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>TYVASO INHALATION SOLUTION (treprostinil)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>TYVASO REFILL INHALATION SOLUTION (treprostinil)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>TYVASO STARTER INHALATION SOLUTION (treprostinil)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>VELETRI INTRAVENOUS SOLUTION REconstituted (epoprostenol sodium)</td>
<td>4</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>VENTAVIS INHALATION SOLUTION (iloprost)</td>
<td>5</td>
<td>PA; LD; SP; QL (9 mL per 1 day)</td>
</tr>
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</table>

*PROSTAGLANDINS - OPHTHALMIC***

<table>
<thead>
<tr>
<th>bimatoprost ophthalmic solution</th>
<th>1 or 1b*</th>
</tr>
</thead>
<tbody>
<tr>
<td>DURYSTA INTRAOCULAR IMPLANT (bimatoprost)</td>
<td>5</td>
</tr>
<tr>
<td>latanoprost ophthalmic solution</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>LUMIGAN OPHTHALMIC SOLUTION (bimatoprost)</td>
<td>2</td>
</tr>
<tr>
<td>travoprost (bak free) ophthalmic solution</td>
<td>1 or 1b*</td>
</tr>
<tr>
<td>VYZULTA OPHTHALMIC SOLUTION (latanoprostene bunod)</td>
<td>3</td>
</tr>
<tr>
<td>XELPROS OPHTHALMIC EMULSION (latanoprost)</td>
<td>3</td>
</tr>
<tr>
<td>ZIOPTAN OPHTHALMIC SOLUTION (tafluprost)</td>
<td>3</td>
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</table>

*PROSTAGLANDINS - TOPICAL*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
<th>bimatoprost external solution</th>
<th>1 or 1b*</th>
</tr>
</thead>
<tbody>
<tr>
<td>LATISSE EXTERNAL SOLUTION (bimatoprost)</td>
<td>3</td>
</tr>
</tbody>
</table>

*PROSTAGLANDINS*** - VITAMINS AND MINERALS

<table>
<thead>
<tr>
<th>alprostadil injection solution</th>
<th>1 or 1b*</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROSTIN VR INJECTION SOLUTION (alprostadil)</td>
<td>3</td>
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</table>

*PROSTATIC HYPERTROPHY AGENT COMBINATIONS***

<table>
<thead>
<tr>
<th>dutasteride-tamsulosin hcl oral capsule</th>
<th>1 or 1b*</th>
<th>QL (1 capsule per 1 day)</th>
</tr>
</thead>
<tbody>
<tr>
<td>JALYN ORAL CAPSULE (dutasteride-tamsulosin hcl)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
</tbody>
</table>

*PROTAMINE*** - DRUGS FOR THE BLOOD

<table>
<thead>
<tr>
<th>protamine sulfate intravenous solution</th>
<th>1 or 1b*</th>
</tr>
</thead>
</table>

*PROTECTANTS - MOUTH/THROAT*** - DRUGS FOR THE MOUTH AND THROAT

| EPISIL MOUTH/THROAT LIQUID (oral wound care products) | 3               |
| GELX MOUTH/THROAT GEL (oral wound care products) | 3               |
| MUCOTROL MOUTH/THROAT WAFER (oral wound care products) | 3               |
| MUGARD MOUTH/THROAT LIQUID (oral wound care products) | 3               |
| ORAFATE MOUTH/THROAT PASTE (sucralfate-malte) | 3               |
| ORAMAGICRX MOUTH/THROAT SUSPENSION REconstituted (oral wound care products) | 3               |
| SALICEPT MOUTH/THROAT SUSPENSION REconstituted (oral wound care products) | 3               |

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<td><strong>PROTEIN COMBINATIONS</strong>* - DRUGS FOR NUTRITION</td>
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</tr>
<tr>
<td>TRI-AMINO INJECTION SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>PROTON PUMP INHIBITORS</strong>*</td>
<td></td>
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</tr>
<tr>
<td>DEXILANT ORAL CAPSULE DELAYED RELEASE <em>(dexlansoprazole)</em></td>
<td>2</td>
<td>ST; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>esomeprazole sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NEXIUM I.V. INTRAVENOUS SOLUTION RECONSTITUTED <em>(esomeprazole sodium)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>omeprazole oral capsule delayed release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pantoprazole sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>pantoprazole sodium oral tablet delayed release</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED <em>(pantoprazole sodium)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>PSEUDOBULBAR AFFECT AGENT COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NUEDEXTA ORAL CAPSULE <em>(dextromethorphan-quinidine)</em></td>
<td>3</td>
<td>PA; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td><strong>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</strong>*</td>
<td></td>
<td></td>
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<tr>
<td>ergoloid mesylates oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>pimozide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADEMPAS ORAL TABLET <em>(riociguat)</em></td>
<td>4</td>
<td>PA; LD; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</strong>*</td>
<td></td>
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<tr>
<td>ambrisentan oral tablet 10 mg</td>
<td>4</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ambrisentan oral tablet 5 mg</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>bosentan oral tablet</td>
<td>4</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td>OPSUMIT ORAL TABLET <em>(macitentan)</em></td>
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<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td>TRACLEER ORAL TABLET <em>(bosentan)</em></td>
<td>4</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td>TRACLEER ORAL TABLET SOLUBLE <em>(bosentan)</em></td>
<td>4</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td><strong>PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS</strong>*</td>
<td></td>
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<tr>
<td>tadalafil (pah) <em>(Alyq Oral Tablet)</em></td>
<td>4</td>
<td>PA; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td>sildenafil citrate intravenous solution</td>
<td>4</td>
<td>PA; SP; QL (3 vial per 1 day)</td>
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<tr>
<td>sildenafil citrate oral suspension reconstituted</td>
<td>4</td>
<td>PA; SP; QL (6 mL per 1 day)</td>
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<tr>
<td>sildenafil citrate oral tablet 20 mg</td>
<td>4</td>
<td>PA; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>tadalafil (pah) oral tablet</td>
<td>4</td>
<td>PA; SP; QL (2 tablets per 1 day)</td>
</tr>
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<td><em><strong>PURINE ANALOGS</strong></em> - VITAMINS AND MINERALS**</td>
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</tr>
<tr>
<td>AZASAN ORAL TABLET <em>(azathioprine)</em></td>
<td>3</td>
<td></td>
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<tr>
<td>azathioprine oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>AZATHIOPRINE SODIUM INJECTION SOLUTION RECONSTITUTED</td>
<td>3</td>
<td></td>
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<tr>
<td>IMURAN ORAL TABLET <em>(azathioprine)</em></td>
<td>3</td>
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<tr>
<td><em><strong>PYRIMIDINE SYNTHESIS INHIBITORS</strong></em></td>
<td></td>
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<tr>
<td>ARAVA ORAL TABLET <em>(leflunomide)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>leflunomide oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td><em><strong>QUATERNARY ANTICHOLINERGICS</strong></em></td>
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<tr>
<td>CUVPOSA ORAL SOLUTION <em>(glycopyrrolate)</em></td>
<td>3</td>
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<tr>
<td>GLYCATE ORAL TABLET <em>(glycopyrrolate)</em></td>
<td>3</td>
<td>PA</td>
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<tr>
<td>glycopyrrolate injection solution</td>
<td>1 or 1b*</td>
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<tr>
<td>GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
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<tr>
<td>GLYCOPYRROLATE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>glycopyrrolate oral tablet 1 mg, 2 mg</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>GLYCOPYRROLATE ORAL TABLET 1.5 MG</td>
<td>3</td>
<td>PA</td>
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<tr>
<td>GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
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<tr>
<td>GLYRX-PF INJECTION SOLUTION <em>(glycopyrrolate)</em></td>
<td>3</td>
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<tr>
<td>methscopolamine bromide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>propantheline bromide oral tablet</td>
<td>1 or 1b*</td>
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<td><em><strong>QUINAZOLINE AGENTS</strong></em> - DRUGS FOR THE BLOOD**</td>
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<tr>
<td>AGRYLIN ORAL CAPSULE <em>(anagrelide hcl)</em></td>
<td>3</td>
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</tr>
<tr>
<td>anagrelide hcl oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em><strong>QUINOLINONE DERIVATIVES</strong></em></td>
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<tr>
<td>ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE <em>(aripiprazole)</em></td>
<td>3</td>
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</tr>
<tr>
<td>ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED <em>(aripiprazole)</em></td>
<td>3</td>
<td>QL (1 injection per 30 days)</td>
</tr>
<tr>
<td>ABILIFY MYCITE ORAL TABLET 10 MG, 15 MG, 2 MG, 5 MG <em>(aripiprazole)</em></td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>ABILIFY MYCITE ORAL TABLET 20 MG, 30 MG <em>(aripiprazole)</em></td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>aripiprazole oral solution</td>
<td>1 or 1b*</td>
<td>QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>aripiprazole oral tablet 20 mg, 30 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>aripiprazole oral tablet dispersible 10 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>aripiprazole oral tablet dispersible 15 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE <em>(aripiprazole lauroxil)</em></td>
<td>3</td>
<td>QL (1 syringe per 1 fill)</td>
</tr>
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<td>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE <em>(aripiprazole lauroxil)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG <em>(brexpiprazole)</em></td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>REXULTI ORAL TABLET 3 MG, 4 MG <em>(brexpiprazole)</em></td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>RANK LIGAND (RANKL) INHIBITORS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE <em>(denosumab)</em></td>
<td>3</td>
<td>PA; SP; QL (2 injections per 365 days)</td>
</tr>
<tr>
<td>XGEOVA SUBCUTANEOUS SOLUTION <em>(denosumab)</em></td>
<td>3</td>
<td>PA; SP; QL (1 vial per 28 days)</td>
</tr>
<tr>
<td><strong>RECTAL ANESTHETIC/STEROIDS</strong>* - RECTAL PREPARATIONS</td>
<td></td>
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</tr>
<tr>
<td>ANALPRAM-HC EXTERNAL CREAM <em>(hydrocortisone ace-pramoxine)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ANALPRAM-HC EXTERNAL LOTION <em>(hydrocortisone ace-pramoxine)</em></td>
<td>3</td>
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</tr>
<tr>
<td>hydrocortisone ace-pramoxine external cream 1-1 %</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PROCTOFOAM HC EXTERNAL FOAM <em>(hydrocortisone ace-pramoxine)</em></td>
<td>3</td>
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<tr>
<td><strong>RECTAL STEROIDS</strong>* - RECTAL PREPARATIONS</td>
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<tr>
<td>ANUSOL-HC EXTERNAL CREAM <em>(hydrocortisone)</em></td>
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<tr>
<td>hydrocortisone (perianal) external cream</td>
<td>1 or 1b*</td>
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<tr>
<td>hydrocortisone acetate rectal suppository 25 mg</td>
<td>1 or 1b*</td>
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<tr>
<td>PROCTOCORT EXTERNAL CREAM <em>(hydrocortisone)</em></td>
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<tr>
<td>hydrocortisone <em>(Procto-Med Hc External Cream)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydrocortisone <em>(Procto-Pak External Cream)</em></td>
<td>1 or 1b*</td>
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<tr>
<td>hydrocortisone <em>(Proctosol Hc External Cream)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>hydrocortisone <em>(Proctozone-Hc External Cream)</em></td>
<td>1 or 1b*</td>
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<td><strong>RESPIRATORY AGENTS - MISC.</strong>* - DRUGS FOR THE LUNGS</td>
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<tr>
<td>CUROSURF INTRATRACHEAL SUSPENSION <em>(poractant alfa)</em></td>
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<td></td>
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<tr>
<td>INFASURF INTRATRACHEAL SUSPENSION <em>(calfactant in nacl)</em></td>
<td>3</td>
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</tr>
<tr>
<td>SURVANTA INTRATRACHEAL SUSPENSION <em>(beractant in nacl)</em></td>
<td>3</td>
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</tr>
<tr>
<td><strong>RESTLESS LEG SYNDROME (RLS) AGENTS</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>HORIZANT ORAL TABLET EXTENDED RELEASE <em>(gabapentin enacarbil)</em></td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>RETINOIDS</strong>* - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>tretinoin oral capsule</td>
<td>1 or 1b*; OC</td>
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<tr>
<td><strong>ROSACEA AGENTS</strong>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>azelaic acid external gel</td>
<td>1 or 1b*</td>
<td>QL (50 grams per 30 days)</td>
</tr>
<tr>
<td>FINACEA EXTERNAL FOAM <em>(azelaic acid)</em></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>METROCREAM EXTERNAL CREAM <em>(metronidazole)</em></td>
<td>3</td>
<td>ST; QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>metronidazole external cream</td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>metronidazole external gel 0.75 %</td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>metronidazole external gel 1 %</td>
<td>1 or 1b*</td>
<td>QL (55 grams per 30 days)</td>
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<tr>
<td>metronidazole external lotion</td>
<td>1 or 1b*</td>
<td>QL (59 mL per 30 days)</td>
</tr>
<tr>
<td>MIRVASO EXTERNAL GEL (brimonidine tartrate)</td>
<td>3</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td>NORITATE EXTERNAL CREAM (metronidazole)</td>
<td>3</td>
<td>ST; QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>RHOFADE EXTERNAL CREAM (oxymetazoline hcl)</td>
<td>3</td>
<td>QL (60 grams per 30 days)</td>
</tr>
<tr>
<td>metronidazole (Rosadan External Cream)</td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>metronidazole (Rosadan External Gel)</td>
<td>1 or 1b*</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>SOOLANTRA EXTERNAL CREAM (ivermectin)</td>
<td>2</td>
<td>QL (45 grams per 30 days)</td>
</tr>
<tr>
<td>ZILXI EXTERNAL FOAM (minocycline hcl micronized)</td>
<td>3</td>
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**RSV AGENTS - NUCLEOSIDE ANALOGUES***

| ribavirin inhalation solution reconstituted | 1 or 1b*              |

**SALICYLATE COMBINATIONS***

| eq buffered aspirin oral tablet          | 1 or 1b*; $0           |
| ra tri-buffered aspirin oral tablet      | 1 or 1b*; $0           |
| sm aspirin tri-buffered oral tablet      | 1 or 1b*; $0           |
| tri-buffered aspirin oral tablet         | 1 or 1b*; $0           |

**SALICYLATES***

| adult aspirin regimen oral tablet delayed release | 1 or 1a*; $0           |
| aspirin 81 oral tablet chewable             | 1 or 1a*; $0           |
| aspirin 81 oral tablet delayed release       | 1 or 1a*; $0           |
| aspirin adult low dose oral tablet delayed release | 1 or 1a*; $0           |
| aspirin adult low strength oral tablet chewable | 1 or 1a*; $0           |
| aspirin adult low strength oral tablet delayed release | 1 or 1a*; $0           |
| aspirin adult oral tablet                   | 1 or 1a*; $0           |
| aspirin childrens oral tablet chewable      | 1 or 1a*; $0           |
| aspirin ec adult low strength oral tablet delayed release | 1 or 1a*; $0           |
| aspirin ec low dose oral tablet delayed release | 1 or 1a*; $0           |
| aspirin ec low strength oral tablet delayed release | 1 or 1a*; $0           |
| aspirin ec oral tablet delayed release      | 1 or 1a*; $0           |
| aspirin low dose oral tablet chewable       | 1 or 1a*; $0           |
| aspirin low dose oral tablet delayed release | 1 or 1a*; $0           |
| aspirin low strength oral tablet chewable   | 1 or 1a*; $0           |
| aspirin low strength oral tablet delayed release | 1 or 1a*; $0           |
| aspirin oral tablet                         | 1 or 1a*; $0           |
| aspirin oral tablet chewable                | 1 or 1a*; $0           |
| aspirin oral delayed release                | 1 or 1a*; $0           |
| aspirin low oral delayed release            | 1 or 1a*; $0           |
| aspirin low oral delayed release            | 1 or 1a*; $0           |

* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
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<tbody>
<tr>
<td>DEXMEDETOMIDINE HCL INTRAVENOUS SOLUTION 1000 MCG/10ML, 400 MCG/4ML</td>
<td>3</td>
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</tr>
<tr>
<td>dexametomidine hcl intravenous solution 200 mcg/2ml</td>
<td>1 or 1b*</td>
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<tr>
<td>DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION</td>
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<tr>
<td>PRECEDEX INTRAVENOUS SOLUTION (dexametomidine hcl in nacl)</td>
<td>3</td>
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<tr>
<td><strong>SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS</strong>*</td>
<td></td>
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</tr>
<tr>
<td>sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>tadalafil oral tablet 10 mg, 20 mg</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>tadalafil oral tablet 2.5 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (30 tablets per 30 days)</td>
</tr>
<tr>
<td>vardenafil hcl oral tablet</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>vardenafil hcl oral tablet dispersible</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td><strong>SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)</strong>*</td>
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<td></td>
</tr>
<tr>
<td>EVISTA ORAL TABLET (raloxifene hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>OSPHENA ORAL TABLET (ospemifene)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>raloxifene hcl oral tablet</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td><strong>SELECTIVE MELATONIN RECEPTOR AGONISTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HETLIOZ ORAL CAPSULE (tasimelteon)</td>
<td>5</td>
<td>PA; LD; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ramelteon oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>SELECTIVE N-TYPE NEURONAL CALCIUM CHANNEL BLOCKERS</strong>*</td>
<td></td>
<td></td>
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<tr>
<td>PRIALT INTRATHecal SOLUTION (ziconotide acetate)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><strong>SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DALIRESP ORAL TABLET (roflumilast)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>SELECTIVE RETINOID X RECEPTOR AGONISTS</strong>* - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>bexarotene oral capsule</td>
<td>1 or 1b*; OC</td>
<td>PA; SP; QL (10 capsules per 1 day)</td>
</tr>
<tr>
<td><strong>SELECTIVE SEROTONIN AGONIST-NSAID COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>sumatriptan-naproxen sodium oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td><strong>SELECTIVE SEROTONIN AGONISTS 5-HT(1)</strong>*</td>
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</tr>
<tr>
<td>almotriptan malate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>eletriptan hydrobromide oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>frovatriptan succinate oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>naratriptan hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>rizatriptan benzoate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>rizatriptan benzoate oral tablet dispersible</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>sumatriptan nasal solution</td>
<td>1 or 1b*</td>
<td>QL (6 nasal inhalers per 30 days)</td>
</tr>
<tr>
<td>sumatriptan succinate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>sumatriptan succinate refills subcutaneous solution cartridge</td>
<td>1 or 1b*</td>
<td>QL (6 cartridges per 30 days)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>sumatriptan succinate subcutaneous solution</td>
<td>1 or 1b*</td>
<td>QL (5 vials per 30 days)</td>
</tr>
<tr>
<td>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml</td>
<td>1 or 1b*</td>
<td>QL (6 syringes (2 mL) per 30 days)</td>
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<tr>
<td>sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml</td>
<td>1 or 1b*</td>
<td>QL (6 cartridges (2 mL) per 30 days)</td>
</tr>
<tr>
<td>sumatriptan succinate subcutaneous solution prefilled syringe</td>
<td>1 or 1b*</td>
<td>QL (2 syringes per 30 days)</td>
</tr>
<tr>
<td>zolmitriptan oral tablet</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
<tr>
<td>zolmitriptan oral tablet dispersible</td>
<td>1 or 1b*</td>
<td>QL (9 tablets per 30 days)</td>
</tr>
</tbody>
</table>

*SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)***

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<thead>
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<tbody>
<tr>
<td>citalopram hydrobromide oral solution</td>
<td>1 or 1b*</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>citalopram hydrobromide oral tablet 10 mg, 20 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>citalopram hydrobromide oral tablet 40 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>escitalopram oxalate oral solution</td>
<td>1 or 1b*</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>escitalopram oxalate oral tablet 10 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>escitalopram oxalate oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>fluoxetine hcl oral capsule 10 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>fluoxetine hcl oral capsule 20 mg</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>fluoxetine hcl oral capsule 40 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>fluoxetine hcl oral capsule delayed release</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 28 days)</td>
</tr>
<tr>
<td>fluoxetine hcl oral solution</td>
<td>1 or 1b*</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>fluoxetine hcl oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>fluoxetine hcl oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>FLUOXETINE HCL ORAL TABLET 60 MG</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>fluvoxamine maleate er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>fluvoxamine maleate oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>fluvoxamine maleate oral tablet 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>paroxetine hcl er oral tablet extended release 24 hour 12.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>paroxetine hcl er oral tablet extended release 24 hour 25 mg, 37.5 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>paroxetine hcl oral tablet 10 mg, 20 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>paroxetine hcl oral tablet 30 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>paroxetine hcl oral tablet 40 mg</td>
<td>1 or 1b*</td>
<td>QL (1.5 tablet per 1 day)</td>
</tr>
<tr>
<td>PAXIL ORAL SUSPENSION (paroxetine hcl)</td>
<td>3</td>
<td>ST; QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>PEXEVA ORAL TABLET 10 MG, 20 MG (paroxetine mesylate)</td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>PEXEVA ORAL TABLET 30 MG (paroxetine mesylate)</td>
<td>3</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>PEXEVA ORAL TABLET 40 MG (paroxetine mesylate)</td>
<td>3</td>
<td>ST; QL (1.5 tablet per 1 day)</td>
</tr>
<tr>
<td>sertraline hcl oral concentrate</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 1 day)</td>
</tr>
<tr>
<td>sertraline hcl oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>sertraline hcl oral tablet 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
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<tr>
<td><strong>SELECTIVE T-CELL COSTIMULATION BLOCKERS</strong>* - VITAMINS AND MINERALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED (<em>belatacept</em>)</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td><strong>SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS</strong>* - HORMONES</td>
<td></td>
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<tr>
<td>JYNARQUE ORAL TABLET (<em>tolvaptan</em>)</td>
<td>5</td>
<td>PA; LD; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>JYNARQUE ORAL TABLET THERAPY PACK (<em>tolvaptan</em>)</td>
<td>5</td>
<td>PA; LD; QL (1 carton per 28 days)</td>
</tr>
<tr>
<td>SAMSCA ORAL TABLET 15 MG (<em>tolvaptan</em>)</td>
<td>3</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>SAMSCA ORAL TABLET 30 MG (<em>tolvaptan</em>)</td>
<td>3</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>tolvaptan oral tablet 30 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
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<tr>
<td><strong>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</strong>*</td>
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<tr>
<td>DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td>DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 50 MG</td>
<td>3</td>
<td>ST; DO</td>
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<tr>
<td>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td>desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</td>
<td>1 or 1b*</td>
<td>QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>duloxetine hcl oral capsule delayed release particles 30 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>duloxetine hcl oral capsule delayed release particles 40 mg</td>
<td>1 or 1b*</td>
<td>QL (3 capsule per 1 day)</td>
</tr>
<tr>
<td>FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR (<em>levomilnacipran hcl</em>)</td>
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<td>ST; QL (1 capsule per 1 day)</td>
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<tr>
<td>FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK (<em>levomilnacipran hcl</em>)</td>
<td>3</td>
<td>ST; QL (28 pack per 365 days)</td>
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<tr>
<td>venlafaxine hcl er oral capsule extended release 24 hour 150 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>venlafaxine hcl er oral capsule extended release 24 hour 37.5 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 225 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>venlafaxine hcl er oral tablet extended release 24 hour 37.5 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>venlafaxine hcl oral tablet</td>
<td>1 or 1b*</td>
<td>QL (3 tablet per 1 day)</td>
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<tr>
<td><strong>SKIN CLEANSERS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>ESSENTRA WIPES 9X9* EXTERNAL</td>
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<tr>
<td><strong>SKIN PROTECTANTS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>benzoined compound external tincture</td>
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<tr>
<td>BENZOIN EXTERNAL TINCTURE</td>
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<tr>
<td><strong>SKIN TISSUE REPLACEMENTS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>AFFINITY EXTERNAL SHEET (<em>amniotic membrane allograft</em>)</td>
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<tr>
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<td>3</td>
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<tr>
<td>AMPHENOL-40 INJECTION SUSPENSION RECONSTITUTED</td>
<td>3</td>
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</tr>
<tr>
<td>APLIGRAF EXTERNAL DISK <em>(cultured skin substitute)</em></td>
<td>3</td>
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</tr>
<tr>
<td>BIOVANCE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
<td>3</td>
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</tr>
<tr>
<td>EPICORD EXTERNAL SHEET <em>(umbilical cord allograft)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EPIFIX EXTERNAL DISK <em>(amniotic membrane allograft)</em></td>
<td>3</td>
<td></td>
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<tr>
<td>EPIFIX EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>EPIFIX MICRONIZED INJECTION SUSPENSION RECONSTITUTED <em>(amniotic membrane allograft)</em></td>
<td>3</td>
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<tr>
<td>GRAFIX CORE 1.5CM X 2CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX CORE 16MM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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</tr>
<tr>
<td>GRAFIX CORE 2CM X 3CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>GRAFIX CORE 3CM X 4CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>GRAFIX CORE 5CM X 5CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
<td>3</td>
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</tr>
<tr>
<td>GRAFIX PRIME 1.5CM X 2CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX PRIME 16MM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<td></td>
</tr>
<tr>
<td>GRAFIX PRIME 2CM X 3CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<td>GRAFIX XC 7.5CM X 15CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<td>NEOX 100 EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<td>NEOX CORD 1K EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>NOVACHOR EXTERNAL SHEET <em>(chorion membrane allograft)</em></td>
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<tr>
<td>NUSHIELD EXTERNAL DISK <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>NUSHIELD EXTERNAL SHEET 2 CM X 4 CM , 4 CM X 3 CM , 4 CM X 4 CM , 4 CM X 6 CM , 6 CM X 6 CM <em>(amniotic membrane allograft)</em></td>
<td>3</td>
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<tr>
<td>PALINGEN FLOW INJECTION INJECTABLE <em>(amniotic memb-fluid allograft)</em></td>
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<tr>
<td>PALINGEN HYDROMEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<td></td>
</tr>
<tr>
<td>PALINGEN INOVOFLO INJECTION INJECTABLE <em>(amniotic fluid allograft)</em></td>
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<td></td>
</tr>
<tr>
<td>PALINGEN MEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>PALINGEN XPLUS HYDROMEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>PALINGEN XPLUS MEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>STRAVIX EXTERNAL SHEET (amniotic membrane allograft)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TRUSKIN EXTERNAL SHEET (skin allograft (human))</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>SMOKING DETERRENTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>bupropion hcl er (smoking det) oral tablet extended release 12 hour</em></td>
<td>1 or 1b*; $0</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>CHANTIX CONTINUING MONTH PAK ORAL TABLET (varenicline tartrate)</td>
<td>3; $0</td>
<td>PA; QL (2 tablet per 1 day)</td>
</tr>
<tr>
<td>CHANTIX ORAL TABLET 0.5 MG (varenicline tartrate)</td>
<td>3; $0</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>CHANTIX ORAL TABLET 1 MG (varenicline tartrate)</td>
<td>3; $0</td>
<td>PA; QL (2 tablet per 1 day)</td>
</tr>
<tr>
<td>CHANTIX STARTING MONTH PAK ORAL TABLET (varenicline tartrate)</td>
<td>3; $0</td>
<td>PA; QL (1 starting month pack per 365 days)</td>
</tr>
<tr>
<td>cvs nicotine mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs nicotine mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eq nicotine mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eq nicotine mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eq nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eq nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eq nicotine step 3 transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eq nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eql nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>eql nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp nicotine mini mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>goodsense nicotine mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>goodsense nicotine mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>hm nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>hm nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>hm nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>kls quit2 mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>kls quit2 mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>kls quit4 mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>kls quit4 mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>NICODERM CQ TRANSDERMAL PATCH 24 HOUR (nicotine)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>nicorelief mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>NICORETTE MINI MOUTH/THROAT LOZENGE (<em>nicotine polacrilex</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>NICORETTE MOUTH/THROAT GUM (<em>nicotine polacrilex</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>NICORETTE MOUTH/THROAT LOZENGE (<em>nicotine polacrilex</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>NICORETTE STARTER KIT MOUTH/THROAT GUM (<em>nicotine polacrilex</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine mini mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine step 1 transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine step 2 transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine step 3 transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>NICOTINE TRANSDERMAL KIT</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>Nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>NICOTROL INHALATION INHALER (<em>nicotine</em>)</td>
<td>3; $0</td>
<td>PA</td>
</tr>
<tr>
<td>NICOTROL NS NASAL SOLUTION (<em>nicotine</em>)</td>
<td>3; $0</td>
<td>PA</td>
</tr>
<tr>
<td>Px stop smoking aid mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Px stop smoking aid mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Ra mini nicotine mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Ra nicotine gum mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Ra nicotine mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Ra nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Ra nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Ra nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Sm nicotine mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Sm nicotine mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Sm nicotine polacrilex mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Sm nicotine polacrilex mouth/throat lozenge</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Sm nicotine transdermal patch 24 hour</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Sr nicotine mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td>Thrive mouth/throat gum</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
</tbody>
</table>

*SODIUM*** - DRUGS FOR NUTRITION

| LIQUIVIDA HYDRATION INTRAVENOUS KIT (*sodium chloride*) | 3 | |
| Sodium chloride flush (Monoject Flush Syringe Intravenous Solution) | 1 or 1b* | |
| Sodium chloride flush (Monoject Sodium Chloride Flush Intravenous Solution) | 1 or 1b* | |
| Normal saline flush intravenous solution | 1 or 1b* | |
| Saline flush intravenous solution | 1 or 1b* | |
| Sodium chloride flush (SALINE FLUSH ZR INTRAVENOUS SOLUTION) | 1 or 1b* | |
| Sodium chloride (pf) injection solution | 1 or 1b* | |

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<tbody>
<tr>
<td>sodium chloride flush intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium chloride injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium chloride intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium chloride flush (Swabflush Saline Flush Intravenous Solution)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

**SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS***

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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>FARXIGA ORAL TABLET <em>(dapagliflozin propanediol)</em></td>
<td>2</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>JARDIANCE ORAL TABLET <em>(empagliflozin)</em></td>
<td>2</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
</tbody>
</table>

**SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS***

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<tr>
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</thead>
<tbody>
<tr>
<td>ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE <em>(etanercept)</em></td>
<td>4</td>
<td>PA; SP; QL (4 cartridge per 28 days)</td>
</tr>
<tr>
<td>ENBREL SUBCUTANEOUS SOLUTION <em>(etanercept)</em></td>
<td>4</td>
<td>PA; QL (8 injections per 28 days)</td>
</tr>
<tr>
<td>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML <em>(etanercept)</em></td>
<td>4</td>
<td>PA; SP; QL (8 syringes per 28 days)</td>
</tr>
<tr>
<td>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML <em>(etanercept)</em></td>
<td>4</td>
<td>PA; SP; QL (8 vials per 28 days)</td>
</tr>
<tr>
<td>ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR <em>(etanercept)</em></td>
<td>4</td>
<td>PA; SP; QL (4 pens per 28 days)</td>
</tr>
</tbody>
</table>

**SOMATOSTATIC AGENTS***

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(octreotide acetate)</em></td>
<td>5</td>
<td>PA; SP; QL (1 pen per 14 days)</td>
</tr>
<tr>
<td>MYCAPSSA ORAL CAPSULE DELAYED RELEASE <em>(octreotide acetate)</em></td>
<td>5</td>
<td>PA; LD; SP; QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>octreotide acetate injection solution</td>
<td>4</td>
<td>PA; SP</td>
</tr>
<tr>
<td>SANDOSTATIN INJECTION SOLUTION <em>(octreotide acetate)</em></td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 30 MG <em>(octreotide acetate)</em></td>
<td>5</td>
<td>PA; SP; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 20 MG <em>(octreotide acetate)</em></td>
<td>5</td>
<td>PA; SP; QL (2 kits per 28 days)</td>
</tr>
<tr>
<td>SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER <em>(pasireotide pamoate)</em></td>
<td>5</td>
<td>PA; LD; QL (1 kit per 28 days)</td>
</tr>
<tr>
<td>SIGNIFOR SUBCUTANEOUS SOLUTION <em>(pasireotide diaspartate)</em></td>
<td>5</td>
<td>PA; LD; QL (2 mL per 1 day)</td>
</tr>
<tr>
<td>SOMATULINE DEPOT SUBCUTANEOUS SOLUTION <em>(lanreotide acetate)</em></td>
<td>5</td>
<td>PA; LD; SP; QL (1 syringe/vial per 28 days)</td>
</tr>
</tbody>
</table>

**SPECIALTY VITAMINS PRODUCTS*** - DRUGS FOR NUTRITION

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>SUPPORT-500 ORAL CAPSULE <em>(specialty vitamins products)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>urosex oral tablet</td>
<td>1 or 1b*</td>
<td></td>
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**SPERMICIDES***

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<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENCARE VAGINAL SUPPOSITORY <em>(nonoxynol-9)</em></td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>OPTIONS GYNOL II CONTRACEPTIVE VAGINAL GEL <em>(nonoxynol-9)</em></td>
<td>2; $0</td>
<td></td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td>SHUR-SEAL CONTRACEPTIVE VAGINAL GEL (<em>nonoxynol-9</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>TODAY SPONGE VAGINAL (<em>nonoxynol-9</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>VCF VAGINAL CONTRACEPTIVE VAGINAL FILM (<em>nonoxynol-9</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>VCF VAGINAL CONTRACEPTIVE VAGINAL FOAM (<em>nonoxynol-9</em>)</td>
<td>2; $0</td>
<td></td>
</tr>
<tr>
<td>vcf vaginal contraceptive vaginal gel</td>
<td>1 or 1b*; $0</td>
<td></td>
</tr>
<tr>
<td><strong>SPHINGOSINE 1-PHOSPHATE (SIP) RECEPTOR MODULATORS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GILENYA ORAL CAPSULE 0.5 MG (<em>fingolimod hcl</em>)</td>
<td>4</td>
<td>PA; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>MAYZENT ORAL TABLET 0.25 MG (<em>siponimod fumarate</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>MAYZENT ORAL TABLET 2 MG (<em>siponimod fumarate</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK (<em>ozanimod hcl</em>)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 pack per 1 fill)</td>
</tr>
<tr>
<td>ZEPOSIA ORAL CAPSULE (<em>ozanimod hcl</em>)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK (<em>ozanimod hcl</em>)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 pack per 1 fill)</td>
</tr>
<tr>
<td><strong>STEREIOD COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION BLM-1 INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION BM INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION DL INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION DLM INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION KIT L INJECTION KIT (<em>methylprednisolone ace-lido</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION KL-3 COMBINATION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION KM INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION LM-DEP-2 INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ACTIVE INJECTION M-1 INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BETAMETHASONE COMBO INJECTION SUSPENSION 7 (4-3) MG/ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BETAMETHASONE SOD PHOS &amp; ACET INJECTION SUSPENSION 6 (3-3) mg/ml</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BETAMETHASONE SOD PHOS &amp; ACET INJECTION SUSPENSION 7 (4-3) MG/ML</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BSP 0820 INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CELESTONE SOLUSPAN INJECTION SUSPENSION (<em>betamethasone sod phos &amp; acet</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DEXAMETHASONE ACE &amp; SOD PHOS INJECTION SUSPENSION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>JTT PHYSICIANS COMBINATION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LT INJECTION KIT INJECTION KIT (<em>triamcinolone acet &amp; lidocaine</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>METHYL PREDNISOLONE ACE-LIDO INJECTION SUSPENSION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>P-CARE D40MX INJECTION KIT</td>
<td>3</td>
<td></td>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>P-CARE D80MX INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>P-CARE K40MX INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>P-CARE K80MX INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>POD-CARE 100CMX INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>POD-CARE 100KMX INJECTION KIT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>POINT OF CARE KM INJECTION KIT</td>
<td>(triamcinolone-bupivacaine)</td>
<td>3</td>
</tr>
<tr>
<td>POINT OF CARE L.2 INJECTION KIT</td>
<td>(methylprednisolone ace-lido)</td>
<td>3</td>
</tr>
<tr>
<td>POINT OF CARE L.5 INJECTION KIT</td>
<td>(methylprednisolone ace-lido)</td>
<td>3</td>
</tr>
<tr>
<td>POINT OF CARE LM DEP 2 INJECTION KIT</td>
<td>(methylprednisol &amp; bupiv &amp; lido)</td>
<td>3</td>
</tr>
<tr>
<td>READYSHARP ANESTH + BETAMETH INJECTION KIT</td>
<td>(betamethasone &amp; bupiv &amp; lido)</td>
<td>3</td>
</tr>
<tr>
<td>READYSHARP ANESTH + DEXAMETH INJECTION KIT</td>
<td>(dexameth sod phos-bupiv-lido)</td>
<td>3</td>
</tr>
<tr>
<td>READYSHARP ANESTH + METHYLPRED INJECTION KIT</td>
<td>(methylprednisol &amp; bupiv &amp; lido)</td>
<td>3</td>
</tr>
</tbody>
</table>

**STEROID INHALANTS***

<table>
<thead>
<tr>
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<th>Nivel de medicam entos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED (fluticasone furoate)</td>
<td>2</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml</td>
<td>1 or 1b*</td>
<td>QL (120 ML per 30 days)</td>
</tr>
<tr>
<td>budesonide inhalation suspension 1 mg/2ml</td>
<td>1 or 1b*</td>
<td>QL (60 ML per 30 days)</td>
</tr>
<tr>
<td>FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BLIST, 50 MCG/BLIST (fluticasone propionate (inhal))</td>
<td>2</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/BLIST (fluticasone propionate (inhal))</td>
<td>2</td>
<td>QL (4 inhalers per 30 days)</td>
</tr>
<tr>
<td>FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 44 MCG/ACT (fluticasone propionate hfa)</td>
<td>2</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>FLOVENT HFA INHALATION AEROSOL 220 MCG/ACT (fluticasone propionate hfa)</td>
<td>2</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
<tr>
<td>QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT (beclomethasone diprop hfa)</td>
<td>2</td>
<td>QL (1 inhaler per 30 days)</td>
</tr>
<tr>
<td>QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 80 MCG/ACT (beclomethasone diprop hfa)</td>
<td>2</td>
<td>QL (2 inhalers per 30 days)</td>
</tr>
</tbody>
</table>

**STEROID-LOCAL ANESTHETIC COMBINATIONS*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicam entos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPIFOAM EXTERNAL FOAM (pramoxine-hc)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>LIDOCAINE-HYDROCORTISONE ACE EXTERNAL CREAM</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PRAMOSONE EXTERNAL CREAM 1-1 % (pramoxine-hc)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>PRAMOSONE EXTERNAL LOTION (pramoxine-hc)</td>
<td>2</td>
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</tr>
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* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<table>
<thead>
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</thead>
<tbody>
<tr>
<td><strong>STEROIDS - MOUTH/THROAT</strong>* - DRUGS FOR THE MOUTH AND THROAT**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>triamcinolone acetonide (Oralone Mouth/Throat Paste)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>triamcinolone acetonide mouth/throat paste</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>STIMULANT LAXATIVES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>alophen oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>bisacodyl ec oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>CASCARA SAGRADA ORAL FLUID EXTRACT</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>correct oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>correctol oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs bisacodyl oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs c-laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>cvs gentle laxative womens oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>ducodyl oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>eq gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>eq womens laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>eql gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>eql laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>ex-lax ultra oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>feenamint oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp bisa-lax oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp womens gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>gnp womens laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>goodsense bisacodyl ec oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>goodsense womens laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>hm laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>kp bisacodyl oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>px laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>qc gentle laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>ra laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>ra womens laxative oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>sb bisacodyl laxative ec oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td>sb gentle lax-women oral tablet delayed release</td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td><em>SM GENTLE LAXATIVE ORAL TABLET DELAYED RELEASE</em></td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td><em>VERACOLATE ORAL TABLET DELAYED RELEASE</em></td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td><em>WOMANS LAXATIVE ORAL TABLET DELAYED RELEASE</em></td>
<td>1 or 1a*; $0</td>
<td></td>
</tr>
<tr>
<td><strong>STIMULANTS - MISC.</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 30 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG, 50 MG, 60 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ARMODAFINIL ORAL TABLET 150 mg, 200 mg, 250 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ARMODAFINIL ORAL TABLET 50 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE (methylphenidate)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>DAYTRANA TRANSDERMAL PATCH 10 MG/9HR, 15 MG/9HR (methylphenidate)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>DAYTRANA TRANSDERMAL PATCH 20 MG/9HR, 30 MG/9HR (methylphenidate)</td>
<td>3</td>
<td>PA; QL (1 patch per 1 day)</td>
</tr>
<tr>
<td>DEXMETHYLPHENIDATE HCI ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 mg, 15 mg, 20 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>DEXMETHYLPHENIDATE HCI ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 mg, 30 mg, 35 mg, 40 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>DEXMETHYLPHENIDATE HCI ORAL TABLET 10 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>DEXMETHYLPHENIDATE HCI ORAL TABLET 2.5 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>FOCALIN ORAL TABLET 10 MG (dexmethylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>FOCALIN ORAL TABLET 2.5 MG, 5 MG (dexmethylphenidate hcl)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 60 MG, 80 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 40 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>METHYLPHENIDATE HCI (Metadate Er Oral Tablet Extended Release)</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>METHYLIN ORAL SOLUTION 10 MG/5ML (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>METHYLIN ORAL SOLUTION 5 MG/5ML (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (60 mL per 1 day)</td>
</tr>
<tr>
<td>METHYLPHENIDATE HCI ER (CD) ORAL CAPSULE EXTENDED RELEASE 10 mg, 20 mg, 30 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>METHYLPHENIDATE HCI ER (CD) ORAL CAPSULE EXTENDED RELEASE 40 mg, 50 mg, 60 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>METHYLPHENIDATE HCI ER (LA) ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 mg, 20 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>METHYLPHENIDATE HCI ER (LA) ORAL CAPSULE EXTENDED RELEASE 24 HOUR 30 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 capsules per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>methylphenidate hcl er (la) oral capsule extended release 24 hour 40 mg, 60 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl er (xr) oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>methylphenidate hcl er (xr) oral capsule extended release 24 hour 40 mg, 50 mg, 60 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 27 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>methylphenidate hcl er oral tablet extended release 20 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>PA</td>
</tr>
<tr>
<td>methylphenidate hcl er oral tablet extended release 36 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl er oral tablet extended release 54 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>METHYLPHENIDATE HCL ER ORAL TABLET EXTENDED RELEASE 72 MG</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl oral solution 10 mg/5ml</td>
<td>1 or 1b*</td>
<td>PA; QL (30 mL per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl oral solution 5 mg/5ml</td>
<td>1 or 1b*</td>
<td>PA; QL (60 mL per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl oral tablet 10 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>methylphenidate hcl oral tablet 20 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl oral tablet chewable 10 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>modafinil oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>PA; DO</td>
</tr>
<tr>
<td>modafinil oral tablet 200 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 40 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER (methylphenidate hcl)</td>
<td>3</td>
<td>QL (12 mL per 1 day)</td>
</tr>
<tr>
<td>RELEXXII ORAL TABLET EXTENDED RELEASE (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 30 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>RITALIN ORAL TABLET 10 MG, 5 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>RITALIN ORAL TABLET 20 MG (methylphenidate hcl)</td>
<td>3</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td><em>STREPTOGRAMIN COMBINATIONS</em>**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SYNERCID INTRAVENOUS SOLUTION RECONSTITUTED (quinupristin-dalfopristin)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>aprepitant oral capsule 125 mg</td>
<td>1 or 1b*</td>
<td>QL (5 capsules per 25 days)</td>
</tr>
<tr>
<td>aprepitant oral capsule 40 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 fill)</td>
</tr>
<tr>
<td>aprepitant oral capsule 80 &amp; 125 mg</td>
<td>1 or 1b*</td>
<td>QL (15 capsules per 25 days)</td>
</tr>
<tr>
<td>aprepitant oral capsule 80 mg</td>
<td>1 or 1b*</td>
<td>QL (10 capsules per 25 days)</td>
</tr>
<tr>
<td>CINVANTI INTRAVENOUS EMULSION (aprepitant)</td>
<td>3</td>
<td>PA; QL (5 vials per 30 days)</td>
</tr>
<tr>
<td>EMEND ORAL SUSPENSION RECONSTITUTED (aprepitant)</td>
<td>3</td>
<td>QL (15 kit per 30 days)</td>
</tr>
<tr>
<td>fosaprepitant dimeglumine intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td>PA; QL (5 vial per 30 days)</td>
</tr>
<tr>
<td>VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK (rolapitant hcl)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>SUCCINIMIDES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CELONTIN ORAL CAPSULE (methsuximide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ethosuximide oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>ethosuximide oral solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>SULFONAMIDES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SULFADIAZINE ORAL TABLET</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>SULFONYLUREA-BIGUANIDE COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>glipizide-metformin hcl oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>glyburide-metformin oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td><strong>SULFONYLUREAS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMARYL ORAL TABLET (glimepiride)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>glimepiride oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>glipizide er oral tablet extended release 24 hour</td>
<td>1 or 1a*</td>
<td>ST</td>
</tr>
<tr>
<td>glipizide oral tablet</td>
<td>1 or 1a*</td>
<td>ST</td>
</tr>
<tr>
<td>glipizide xl oral tablet extended release 24 hour</td>
<td>1 or 1a*</td>
<td>ST</td>
</tr>
<tr>
<td>GLUCOTROL ORAL TABLET (glipizide)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR (glipizide)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>glyburide micronized oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>glyburide oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>GLYNASE ORAL TABLET (glyburide micronized)</td>
<td>3</td>
<td>ST</td>
</tr>
<tr>
<td>tolbutamide oral tablet</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td><strong>SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DUEACT ORAL TABLET (pioglitazone hcl-glimepiride)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>pioglitazone hcl-glimepiride oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>SYNTHETIC HEPARINOID-LIKE AGENTS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ARIXTRA SUBCUTANEOUS SOLUTION (fondaparinux sodium)</td>
<td>5</td>
<td>QL (30 syringes per 30 days)</td>
</tr>
</tbody>
</table>

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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>fondaparinux sodium subcutaneous solution</td>
<td>4</td>
<td>QL (30 syringes per 30 days)</td>
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**TAR PRODUCTS*** - DRUGS FOR THE SKIN

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>coal tar external solution</td>
<td>1 or 1b*</td>
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**TETRACYCLINES***

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<thead>
<tr>
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<th>Nivel de medicamentos</th>
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</thead>
<tbody>
<tr>
<td>minocycline hcl (Coremin Oral Tablet Extended Release 24 Hour)</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>demeclocycline hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline hyclate (Doxy 100 Intravenous Solution Reconstituted)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline hyclate intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline hyclate oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline hyclate oral tablet 100 mg, 20 mg, 50 mg</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline hyclate oral tablet 150 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>doxycycline monohydrate oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline monohydrate oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline monohydrate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED (minocycline hcl) | 3 |

<table>
<thead>
<tr>
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<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>minocycline hcl er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>ST</td>
</tr>
<tr>
<td>minocycline hcl oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>minocycline hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline monohydrate (Mondoxyne Ni Oral Capsule)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>doxycycline hyclate (Morgidox Oral Capsule)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>tetracycline hcl oral capsule</td>
<td>1 or 1b*</td>
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**THIAZIDES AND THIAZIDE-LIKE DIURETICS***

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<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
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</tr>
</thead>
<tbody>
<tr>
<td>chlorothiazide sodium intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>chlorthalidone oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>DIURIL ORAL SUSPENSION (chlorothiazide)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>hydrochlorothiazide oral capsule</td>
<td>1 or 1a*</td>
<td>DO</td>
</tr>
<tr>
<td>hydrochlorothiazide oral tablet 12.5 mg, 25 mg</td>
<td>1 or 1a*</td>
<td>DO</td>
</tr>
<tr>
<td>hydrochlorothiazide oral tablet 50 mg</td>
<td>1 or 1a*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>indapamide oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>metolazone oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>SODIUM DIURIL INTRAVENOUS SOLUTION RECONSTITUTED (chlorothiazide sodium)</td>
<td>3</td>
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**THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS***

<table>
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<tr>
<th>Nombre del medicamento recetado</th>
<th>Nivel de medicamentos</th>
<th>Requisitos de cobertura y límite</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACTOPLUS MET ORAL TABLET (pioglitazone hcl-metformin hcl)</td>
<td>3</td>
<td>ST; QL (3 tablet per 1 day)</td>
</tr>
<tr>
<td>pioglitazone hcl-metformin hcl oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (3 tablets per 1 day)</td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td><strong>THIAZOLIDINEDIONES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AVANDIA ORAL TABLET (rosiglitazone maleate)</td>
<td>3</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>pioglitazone hcl oral tablet</td>
<td>1 or 1b*</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>THIENBENZODIAZEPINES &amp; SSRIS</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>SYMBYAX ORAL CAPSULE 12-50 MG, 6-50 MG (olanzapine-fluoxetine hcl)</td>
<td>3</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG (olanzapine-fluoxetine hcl)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td><strong>THIENBENZODIAZEPINES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>olanzapine intramuscular solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>olanzapine oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olanzapine oral tablet 15 mg, 20 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablets per 1 day)</td>
</tr>
<tr>
<td>olanzapine oral tablet dispersible 10 mg, 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td>olanzapine oral tablet dispersible 15 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablets per 1 day)</td>
</tr>
<tr>
<td>olanzapine oral tablet dispersible 20 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED (olanzapine pamoate)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>THIENOPYRIDINE DERIVATIVES</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>clopidogrel bisulfate oral tablet 300 mg</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>clopidogrel bisulfate oral tablet 75 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>prasugrel hcl oral tablet 10 mg</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>prasugrel hcl oral tablet 5 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
</tr>
<tr>
<td><strong>THIOXANTHENES</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>thiothixene oral capsule</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>THROMBIN INHIBITORS - HIRUDIN TYPE</strong>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED (bivalirudin trifluoroacetate)</td>
<td>3</td>
<td></td>
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<tr>
<td>BIVALIRUDIN RTU INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>bivalirudin trifluoroacetate intravenous solution reconstituted</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>BIVALIRUDIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>THROMBIN INHIBITORS - SELECTIVE DIRECT &amp; REVERSIBLE</strong>*</td>
<td></td>
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<tr>
<td>ARGATROBAN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
<td>3</td>
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<tr>
<td>ARGATROBAN INTRAVENOUS SOLUTION</td>
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</tbody>
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<tbody>
<tr>
<td><em>THROMBOPOIETIN (TPO) RECEPTOR AGONISTS</em>** - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOPTELET ORAL TABLET (avatrombopag maleate)</td>
<td>5</td>
<td>PA; LD; SP; QL (60 tablets per 30 days)</td>
</tr>
<tr>
<td>MULPLETA ORAL TABLET (lusutrombopag)</td>
<td>5</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED 125 MCG (romiplostim)</td>
<td>5</td>
<td>PA</td>
</tr>
<tr>
<td>NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED 250 MCG, 500 MCG (romiplostim)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td>PROMACTA ORAL PACKET 12.5 MG (eltrombopag olamine)</td>
<td>5</td>
<td>PA; DO; LD; SP</td>
</tr>
<tr>
<td>PROMACTA ORAL PACKET 25 MG (eltrombopag olamine)</td>
<td>5</td>
<td>PA; LD; SP; QL (3 dose-packs per 1 day)</td>
</tr>
<tr>
<td>PROMACTA ORAL TABLET 12.5 MG, 25 MG (eltrombopag olamine)</td>
<td>5</td>
<td>PA; DO; LD; SP</td>
</tr>
<tr>
<td>PROMACTA ORAL TABLET 75 MG (eltrombopag olamine)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td><em>THYROID HORMONES</em>**</td>
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</tr>
<tr>
<td>ARMOUR THYROID ORAL TABLET (thyroid)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CYTOMEL ORAL TABLET (liothyronine sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>levothyroxine sodium</em> (Euthyrox Oral Tablet)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em>levothyroxine sodium</em> (Levo-T Oral Tablet)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>LEVOTHYROXINE SODIUM INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>levothyroxine sodium intravenous solution reconstituted 100 mcg, 500 mcg</em></td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>LEVOTHYROXINE SODIUM INTRAVENOUS SOLUTION RECONSTITUTED 200 MCG</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>levothyroxine sodium oral tablet</em></td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td><em>levothyroxine sodium</em> (Levoxyl Oral Tablet)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>liothyronine sodium intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>liothyronine sodium oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>NATURE-THROID ORAL TABLET (thyroid)</td>
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<td></td>
</tr>
<tr>
<td>np thyroid oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>SYNTHROID ORAL TABLET (<em>levothyroxine sodium</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TIROSINT ORAL CAPSULE (<em>levothyroxine sodium</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TIROSINT-SOL ORAL SOLUTION (<em>levothyroxine sodium</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TRIOSTAT INTRAVENOUS SOLUTION (<em>liothyronine sodium</em>)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>levothyroxine sodium</em> (Unithroid Oral Tablet)</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>WESTHROID ORAL TABLET (thyroid)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>WP THYROID ORAL TABLET (thyroid)</td>
<td>3</td>
<td></td>
</tr>
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<tr>
<td>ACTIVASE INTRAVENOUS SOLUTION RECONSTITUTED <em>(alteplase)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>CATHFLO ACTIVASE INJECTION SOLUTION RECONSTITUTED <em>(alteplase)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RETAVASE HALF-KIT INTRAVENOUS KIT <em>(reteplase)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>RETAVASE INTRAVENOUS KIT <em>(reteplase)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>TNKASE INTRAVENOUS KIT <em>(tenecteplase)</em></td>
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<td></td>
</tr>
<tr>
<td><strong>TISSUE PLASMINOGEN ACTIVATORS</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AFFINITY EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>AMMIOFIX INJECTION SUSPENSION RECONSTITUTED <em>(amniotic membrane allograft)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>AMPHENOL-40 INJECTION SUSPENSION RECONSTITUTED</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>APLIGRAF EXTERNAL DISK <em>(cultured skin substitute)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>BIOVANCE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EPICORD EXTERNAL SHEET <em>(umbilical cord allograft)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EPIFIX EXTERNAL DISK <em>(amniotic membrane allograft)</em></td>
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<td></td>
</tr>
<tr>
<td>EPIFIX EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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</tr>
<tr>
<td>EPIFIX MICRONIZED INJECTION SUSPENSION RECONSTITUTED <em>(amniotic membrane allograft)</em></td>
<td>3</td>
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<tr>
<td>GRAFIX CORE 1.5CM X 2CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
<td>3</td>
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<tr>
<td>GRAFIX CORE 16MM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
<td>3</td>
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</tr>
<tr>
<td>GRAFIX CORE 2CM X 3CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX CORE 3CM X 4CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX CORE 5CM X 5CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX PRIME 1.5CM X 2CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX PRIME 16MM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX PRIME 2CM X 3CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX PRIME 3CM X 4CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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</tr>
<tr>
<td>GRAFIX PRIME 5CM X 5CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>GRAFIX XC 7.5CM X 15CM EXTERNAL <em>(multipotent cell repair matrix)</em></td>
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<tr>
<td>KARDIAMEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>NEOX 100 EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>NEOX CORD 1K EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>NOVACHOR EXTERNAL SHEET <em>(chorion membrane allograft)</em></td>
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<tr>
<td>NUSHIELD EXTERNAL DISK <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>NUSHIELD EXTERNAL SHEET 2 CM X 4 CM , 4 CM X 3 CM , 4 CM X 4 CM , 4 CM X 6 CM , 6 CM X 6 CM <em>(amniotic membrane allograft)</em></td>
<td>3</td>
<td></td>
</tr>
</tbody>
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<tbody>
<tr>
<td>PALINGEN FLOW INJECTION INJECTABLE <em>(amniotic memb-fluid allograft)</em></td>
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<tr>
<td>PALINGEN HYDROMEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
<td>3</td>
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<tr>
<td>PALINGEN INOVOFLO INJECTION INJECTABLE <em>(amniotic fluid allograft)</em></td>
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<tr>
<td>PALINGEN MEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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</tr>
<tr>
<td>PALINGEN XPLUS HYDROMEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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</tr>
<tr>
<td>PALINGEN XPLUS MEMBRANE EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>STRAVIX EXTERNAL SHEET <em>(amniotic membrane allograft)</em></td>
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<tr>
<td>TRUSKIN EXTERNAL SHEET <em>(skin allograft (human))</em></td>
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<tr>
<td><strong>TOPICAL ANESTHETIC COMBINATIONS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>FLEXIN EXTERNAL PATCH</td>
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<tr>
<td>GEN7T PLUS EXTERNAL PATCH</td>
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<tr>
<td><em>lidocaine-prilocaine external cream</em></td>
<td>1 or 1b*</td>
<td>QL (30 grams per 30 days)</td>
</tr>
<tr>
<td><em>lidocaine-prilocaine external kit</em></td>
<td>1 or 1b*</td>
<td>QL (1 kit per 30 days)</td>
</tr>
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<td>PREPIV SUPPLY COMBINATION KIT</td>
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<tr>
<td>SX1 MEDICATED POST-OPERATIVE EXTERNAL KIT <em>(lidocaine hcl &amp; post-op system)</em></td>
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</tr>
<tr>
<td>VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT <em>(lidocaine hcl-blood collection)</em></td>
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<tr>
<td>WPR PLUS WOUND HEALING SYSTEM EXTERNAL THERAPY PACK</td>
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<tr>
<td><strong>TOPICAL DECONGESTANTS</strong>*</td>
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<tr>
<td>ADRENALIN NASAL SOLUTION <em>(epinephrine hcl (nasal))</em></td>
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<tr>
<td><strong>TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>TARGETRETIN EXTERNAL GEL <em>(bexarotene)</em></td>
<td>2</td>
<td>PA; SP</td>
</tr>
<tr>
<td><strong>TOPICAL STEROID COMBINATIONS</strong>* - DRUGS FOR THE SKIN</td>
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<td></td>
</tr>
<tr>
<td>calcipotriene-betameth diprop external ointment</td>
<td>1 or 1b*</td>
<td>QL (400 grams per 28 days)</td>
</tr>
<tr>
<td>calcipotriene-betameth diprop external suspension</td>
<td>1 or 1b*</td>
<td>QL (420 grams per 28 days)</td>
</tr>
<tr>
<td>DUOBRII EXTERNAL LOTION <em>(halobetasol prop-tazarotene)</em></td>
<td>3</td>
<td>PA; QL (200 grams per 30 days)</td>
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<tr>
<td>ENSTILAR EXTERNAL FOAM <em>(calcipotriene-betameth diprop)</em></td>
<td>3</td>
<td>QL (420 grams per 28 days)</td>
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<tr>
<td>SCARZEN SKIN REPAIR EXTERNAL KIT <em>(triamicinolone-dimeth-silicone)</em></td>
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<tr>
<td>TACLONEX EXTERNAL OINTMENT <em>(calcipotriene-betameth diprop)</em></td>
<td>3</td>
<td>QL (400 grams per 28 days)</td>
</tr>
<tr>
<td>TACLONEX EXTERNAL SUSPENSION <em>(calcipotriene-betameth diprop)</em></td>
<td>3</td>
<td>QL (420 grams per 28 days)</td>
</tr>
</tbody>
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<tr>
<td><strong>TOPOISOMERASE I INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>CAMPTOSAR INTRAVENOUS SOLUTION <em>(irinotecan hcl)</em></td>
<td>3</td>
<td>SP</td>
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<tr>
<td>HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED <em>(topotecan hcl)</em></td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td>HYCAMTIN ORAL CAPSULE <em>(topotecan hcl)</em></td>
<td>2; OC</td>
<td>PA; SP</td>
</tr>
<tr>
<td><em>irinotecan hcl intravenous solution</em></td>
<td>1 or 1b*</td>
<td>SP</td>
</tr>
<tr>
<td>ONIVYDE INTRAVENOUS INJECTABLE <em>(irinotecan hcl liposome)</em></td>
<td>3</td>
<td>LD</td>
</tr>
<tr>
<td>TOPOTECAN HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td>SP</td>
</tr>
<tr>
<td><em>TOXOID COMBINATIONS</em>**</td>
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</tr>
<tr>
<td>ADACEL INTRAMUSCULAR SUSPENSION <em>(tetanus-diphth-acell pertussis)</em></td>
<td>3; $0</td>
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</tr>
<tr>
<td>BOOSTRIX INTRAMUSCULAR SUSPENSION <em>(tetanus-diphth-acell pertussis)</em></td>
<td>3; $0</td>
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</tr>
<tr>
<td>DAPTACEL INTRAMUSCULAR SUSPENSION <em>(diphth-acell pertussis-tetanus)</em></td>
<td>3; $0</td>
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<tr>
<td>DIPHTHERIA-TETANUS TOXOIDS DT INTRAMUSCULAR SUSPENSION</td>
<td>3; $0</td>
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<tr>
<td>INFANRIX INTRAMUSCULAR SUSPENSION <em>(diphth-acell pertussis-tetanus)</em></td>
<td>3; $0</td>
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<tr>
<td>KINRIX INTRAMUSCULAR SUSPENSION <em>(dtap-ipv vaccine)</em></td>
<td>3; $0</td>
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<tr>
<td>PEDIARIX INTRAMUSCULAR SUSPENSION <em>(dtap-hepatitis b recomb-ipv)</em></td>
<td>3; $0</td>
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<td>PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED <em>(dtap-ipv-hib vaccine)</em></td>
<td>3; $0</td>
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<tr>
<td>QUADRACEL INTRAMUSCULAR SUSPENSION <em>(dtap-ipv vaccine)</em></td>
<td>3; $0</td>
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<tr>
<td>TDVAX INTRAMUSCULAR SUSPENSION <em>(tetanus-diphtheria toxoids td)</em></td>
<td>3; $0</td>
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<tr>
<td>TENIVAC INTRAMUSCULAR INJECTABLE <em>(tetanus-diphtheria toxoids td)</em></td>
<td>3; $0</td>
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<tr>
<td>TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION</td>
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<tr>
<td><strong>TRACE MINERAL COMBINATIONS</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>THE LIQUILIFT TRACE INTRAVENOUS KIT <em>(trace minerals cr-cu-mn-se-zn)</em></td>
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<tr>
<td>TRALEMENT INTRAVENOUS SOLUTION <em>(trace minerals cu-mn-se-zn)</em></td>
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<tr>
<td><strong>TRACE MINERALS</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>chromic chloride intravenous solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>cupric chloride intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>SELENIOUS ACID INTRAVENOUS SOLUTION</td>
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<tr>
<td><strong>TRAMADOL COMBINATIONS</strong>*</td>
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<tr>
<td>tramadol-acetaminophen oral tablet</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 1 day)</td>
</tr>
</tbody>
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<tr>
<td><em>TRIAZOLES</em>**</td>
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<tr>
<td>CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED <em>(isavuconazonium sulfate)</em></td>
<td>3</td>
<td>PA; QL (1 vial per 1 day)</td>
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<tr>
<td>CRESEMBA ORAL CAPSULE <em>(isavuconazonium sulfate)</em></td>
<td>3</td>
<td>PA; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td>DIFLUCAN ORAL SUSPENSION RECONSTITUTED 10 MG/ML <em>(fluconazole)</em></td>
<td>3</td>
<td>QL (40 mL per 1 day)</td>
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<tr>
<td>DIFLUCAN ORAL SUSPENSION RECONSTITUTED 40 MG/ML <em>(fluconazole)</em></td>
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<td>QL (10 mL per 1 day)</td>
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<tr>
<td>DIFLUCAN ORAL TABLET 100 MG <em>(fluconazole)</em></td>
<td>3</td>
<td>QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>DIFLUCAN ORAL TABLET 150 MG, 200 MG <em>(fluconazole)</em></td>
<td>3</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>DIFLUCAN ORAL TABLET 50 MG <em>(fluconazole)</em></td>
<td>3</td>
<td>QL (8 tablet per 1 day)</td>
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<tr>
<td>fluconazole in sodium chloride intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>fluconazole oral suspension reconstituted 10 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (40 mL per 1 day)</td>
</tr>
<tr>
<td>fluconazole oral suspension reconstituted 40 mg/ml</td>
<td>1 or 1b*</td>
<td>QL (10 mL per 1 day)</td>
</tr>
<tr>
<td>fluconazole oral tablet 100 mg</td>
<td>1 or 1b*</td>
<td>QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>fluconazole oral tablet 150 mg, 200 mg</td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>fluconazole oral tablet 50 mg</td>
<td>1 or 1b*</td>
<td>QL (8 tablet per 1 day)</td>
</tr>
<tr>
<td>itraconazole oral capsule</td>
<td>1 or 1b*</td>
<td>PA; QL (4.2 capsule per 1 day)</td>
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<tr>
<td>itraconazole oral solution</td>
<td>1 or 1b*</td>
<td>PA; QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>NOXAFIL INTRAVENOUS SOLUTION <em>(posaconazole)</em></td>
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<tr>
<td>NOXAFIL ORAL SUSPENSION <em>(posaconazole)</em></td>
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<td>PA; QL (20 mL per 1 day)</td>
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<tr>
<td>NOXAFIL ORAL TABLET DELAYED RELEASE <em>(posaconazole)</em></td>
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<tr>
<td>posaconazole oral tablet delayed release</td>
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<td>PA; QL (8 tablet per 1 day)</td>
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<tr>
<td>SPORANOX ORAL CAPSULE <em>(itraconazole)</em></td>
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<td>PA; QL (4.2 capsule per 1 day)</td>
</tr>
<tr>
<td>SPORANOX ORAL SOLUTION <em>(itraconazole)</em></td>
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<td>PA; QL (20 mL per 1 day)</td>
</tr>
<tr>
<td>SPORANOX PULSEPAK ORAL CAPSULE <em>(itraconazole)</em></td>
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<td>PA; QL (4.2 capsule per 1 day)</td>
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<tr>
<td>TOLSURA ORAL CAPSULE</td>
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<td>PA; QL (126 capsule per 30 days)</td>
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<td>VFEND ORAL SUSPENSION RECONSTITUTED <em>(voriconazole)</em></td>
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<td>PA; QL (10 mL per 1 day)</td>
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<tr>
<td>VFEND ORAL TABLET 200 MG <em>(voriconazole)</em></td>
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<td>PA; QL (2 tablet per 1 day)</td>
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<tr>
<td>VFEND ORAL TABLET 50 MG <em>(voriconazole)</em></td>
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<td>PA; QL (4 tablet per 1 day)</td>
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<tr>
<td>voriconazole intravenous solution reconstituted</td>
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<tr>
<td>voriconazole oral suspension reconstituted</td>
<td>1 or 1b*</td>
<td>PA; QL (10 mL per 1 day)</td>
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<tr>
<td>voriconazole oral tablet 200 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (2 tablet per 1 day)</td>
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<tr>
<td>voriconazole oral tablet 50 mg</td>
<td>1 or 1b*</td>
<td>PA; QL (4 tablet per 1 day)</td>
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<tr>
<td><em>TRICYCLIC AGENTS</em>**</td>
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<tr>
<td>amitriptyline hcl oral tablet</td>
<td>1 or 1a*</td>
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</tr>
<tr>
<td>amoxapine oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>clomipramine hcl oral capsule</td>
<td>1 or 1b*</td>
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<tr>
<td>desipramine hcl oral tablet</td>
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<td>doxepin hcl oral capsule</td>
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<tr>
<td>doxepin hcl oral concentrate</td>
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<tr>
<td>imipramine hcl oral tablet</td>
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<tr>
<td>imipramine pamoate oral capsule</td>
<td>1 or 1b*</td>
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<td>NORPRAMIN ORAL TABLET (desipramine hcl)</td>
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<td>nortriptyline hcl oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>nortriptyline hcl oral solution</td>
<td>1 or 1b*</td>
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<td>PAMELOR ORAL CAPSULE (nortriptyline hcl)</td>
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<tr>
<td>protriptyline hcl oral tablet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>trimipramine maleate oral capsule</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>TRIPHASIC CONTRACEPTIVES - ORAL</em>**</td>
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<tr>
<td>alyacen 7/7/7 oral tablet</td>
<td>1 or 1a*; $0</td>
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<td>norethin-eth estrad triphasic (Aranelle Oral Tablet)</td>
<td>1 or 1a*; $0</td>
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<td>desogestrel-ethinyl estradiol (Caziant Oral Tablet)</td>
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<td>norethin-eth estrad triphasic (Dasetta 7/7/7 Oral Tablet)</td>
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<td>levonorg-eth estrad triphasic (Enpress-28 Oral Tablet)</td>
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<td>ESTROSTEP FE ORAL TABLET (norethindron-ethinyl estradiol-fe)</td>
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<tr>
<td>norethin-eth estrad triphasic (Leena Oral Tablet)</td>
<td>1 or 1a*; $0</td>
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<td>levonorg-eth estrad triphasic (Levonest Oral Tablet)</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>levonorg-eth estrad triphasic oral tablet</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>norgestim-eth estrad triphasic oral tablet</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>norethin-eth estrad triphasic (Nortrel 7/7/7 Oral Tablet)</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>ORTHO TRICYCLEN LO ORAL TABLET (norgestim-eth estrad triphasic)</td>
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<tr>
<td>norethin-eth estrad triphasic (Pirmella 7/7/7 Oral Tablet)</td>
<td>1 or 1a*; $0</td>
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<tr>
<td>norethindron-ethinyl estradiol-fe (Tilia Fe Oral Tablet)</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri Femynor Oral Tablet)</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Estarylla Oral Tablet)</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Linyah Oral Tablet)</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Lowyra Oral Tablet)</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Lo-Estarylla Oral Tablet)</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Lo-Marzia Oral Tablet)</td>
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<td>norgestim-eth estrad triphasic (Tri-Lo-Mili Oral Tablet)</td>
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<tr>
<td>norgestim-eth estrad triphasic (Trinessa (28) Oral Tablet)</td>
<td>1 or 1b*; $0</td>
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</tbody>
</table>

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<tbody>
<tr>
<td>norgestim-eth estrad triphasic (Tri-Previfem Oral Tablet)</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Sprintec Oral Tablet)</td>
<td>1 or 1b*; $0</td>
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<tr>
<td>levonorg-eth estrad triphasic (Trivora (28) Oral Tablet)</td>
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<tr>
<td>norgestim-eth estrad triphasic (Tri-Vylibra Lo Oral Tablet)</td>
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<td>norgestim-eth estrad triphasic (Tri-Vylibra Oral Tablet)</td>
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<tr>
<td>desogestrel-ethinyl estradiol (Velivet Oral Tablet)</td>
<td>1 or 1a*; $0</td>
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<tr>
<td><em>TUMOR NECROSIS FACTOR ALPHA BLOCKERS</em>**</td>
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<tr>
<td>INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED (infliximab-dyyb)</td>
<td>4</td>
<td>LD; SP</td>
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<tr>
<td>REMICADE INTRAVENOUS SOLUTION RECONSTITUTED (infliximab)</td>
<td>4</td>
<td>PA; SP</td>
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<tr>
<td><em>TYPE II 5-ALPHA REDUCTASE INHIBITORS</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>finasteride oral tablet 1 mg</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>PROPECIA ORAL TABLET (finasteride)</td>
<td>3</td>
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</tr>
<tr>
<td><em>ULCER ANTI-INFECTIVE W/ BISMUTH COMBINATIONS</em>**</td>
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</tr>
<tr>
<td>HELIDAC THERAPY ORAL (metronid-tetracyc-bis subsal)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PYLERA ORAL CAPSULE (bis subcit-metronid-tetracyc)</td>
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<tr>
<td><em>ULCER ANTI-INFECTIVE W/ PROTON PUMP INHIBITORS</em>**</td>
<td></td>
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<tr>
<td>amoxicill-clarithro-lansopraz oral</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>OMECLAMOX-PAK ORAL (amoxicill-clarithro-omeprazole)</td>
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<tr>
<td>TALICIA ORAL CAPSULE DELAYED RELEASE (amoxicill-rifabutin-omeprazole)</td>
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<tr>
<td><em>ULCER DRUGS - PROSTAGLANDINS</em>**</td>
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<tr>
<td>CYTOTEC ORAL TABLET (misoprostol)</td>
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<tr>
<td>misoprostol oral tablet</td>
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<tr>
<td><em>UREA CYCLE DISORDER - AGENTS</em>**</td>
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<tr>
<td>AMMONUL INTRAVENOUS SOLUTION (sod benz-sod phenylacacet)</td>
<td>3</td>
<td>PA; LD; QL (25 GM per 1 day)</td>
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<tr>
<td>BUPHENYL ORAL POWDER (sodium phenylbutyrate)</td>
<td>3</td>
<td>PA; LD; QL (40 tablets per 1 day)</td>
</tr>
<tr>
<td>BUPHENYL ORAL TABLET (sodium phenylbutyrate)</td>
<td>3</td>
<td>PA; LD; QL (25 GM per 1 day)</td>
</tr>
<tr>
<td>RAVICTI ORAL LIQUID (glycerol phenylbutyrate)</td>
<td>3</td>
<td>PA; LD; SP; QL (17.5 mL per 1 day)</td>
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<tr>
<td>sod benz-sod phenylacacet intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium phenylbutyrate oral powder</td>
<td>1 or 1b*</td>
<td>PA; QL (25 GM per 1 day)</td>
</tr>
<tr>
<td>sodium phenylbutyrate oral tablet</td>
<td>1 or 1b*</td>
<td>PA; QL (40 tablets per 1 day)</td>
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<tr>
<td><em>URICOSURICS</em>**</td>
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<tr>
<td>probenecid oral tablet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>URINARY ANALGESICS</em>**</td>
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<tr>
<td>phenazopyridine hcl (Phenazo Oral Tablet 200 Mg)</td>
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<tr>
<td>phenazopyridine hcl oral tablet 100 mg, 200 mg</td>
<td>1 or 1a*</td>
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<tr>
<td><em><strong>URINARY ANTI-INFECTIVES</strong></em>**</td>
<td><strong>Hyprex Oral Tablet (methenamine hippurate)</strong></td>
<td>3</td>
</tr>
<tr>
<td><strong>MACROBID Oral Capsule (nitrofurantoin monohyd macro)</strong></td>
<td>3</td>
<td>QL (14 capsules per 1 fill)</td>
</tr>
<tr>
<td><strong>MACRODANTIN Oral Capsule (nitrofurantoin macrocrystal)</strong></td>
<td>3</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>methenamine hippurate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>methenamine mandelate oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>MONUROL Oral Packet (flosfomycin tromethamine)</td>
<td>3</td>
<td>QL (1 pack per 1 fill)</td>
</tr>
<tr>
<td>nitrofurantoin macrocrystal oral capsule</td>
<td>1 or 1b*</td>
<td>QL (4 capsules per 1 day)</td>
</tr>
<tr>
<td>nitrofurantoin monohyd macro oral capsule</td>
<td>1 or 1b*</td>
<td>QL (14 capsules per 1 fill)</td>
</tr>
<tr>
<td>nitrofurantoin oral suspension</td>
<td>1 or 1b*</td>
<td>QL (80 mL per 1 day)</td>
</tr>
<tr>
<td><em><strong>URINARY ANTI-SEPTIC-ANTISPASMODIC &amp;/OR ANALGESICS</strong></em>**</td>
<td><strong>methen-hyosc-meth blue-na phos (Uryl Oral Tablet)</strong></td>
<td>1 or 1b*</td>
</tr>
<tr>
<td><strong>uticap oral capsule</strong></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>meth-hyo-m bl-na phos-ph sal (Utrona-C Oral Tablet)</strong></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><em><strong>URINARY ANTI-SPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)</strong></em>**</td>
<td><strong>Darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg</strong></td>
<td>1 or 1b*</td>
</tr>
<tr>
<td><strong>Darifenacin hydrobromide er oral tablet extended release 24 hour 7.5 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride er oral tablet extended release 24 hour 10 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride er oral tablet extended release 24 hour 15 mg</strong></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>Oxybutynin chloride er oral tablet extended release 24 hour 5 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride oral syrup</strong></td>
<td>1 or 1b*</td>
<td>QL (20 mL per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride oral tablet</strong></td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>Solfenacin succinate oral tablet</strong></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>Tolterodine tartrate er oral capsule extended release 24 hour</strong></td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>Tolterodine tartrate oral tablet</strong></td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR (fesoterodine fumarate)</strong></td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>Trospium chloride er oral capsule extended release 24 hour</strong></td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td><strong>Trospium chloride oral tablet</strong></td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em><strong>URINARY ANTI-SPASMODIC - ANTIMUSCARINICS (ANTICHOL)</strong></em>**(NEW)</td>
<td><strong>Darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg</strong></td>
<td>1 or 1b*</td>
</tr>
<tr>
<td><strong>Darifenacin hydrobromide er oral tablet extended release 24 hour 7.5 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride er oral tablet extended release 24 hour 10 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride er oral tablet extended release 24 hour 15 mg</strong></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td><strong>Oxybutynin chloride er oral tablet extended release 24 hour 5 mg</strong></td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>Oxybutynin chloride oral syrup</strong></td>
<td>1 or 1b*</td>
<td>QL (20 mL per 1 day)</td>
</tr>
</tbody>
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<tr>
<td>oxybutynin chloride oral tablet</td>
<td>1 or 1b*</td>
<td>QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>solifenacin succinate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (1 table per 1 day)</td>
</tr>
<tr>
<td>tolterodine tartrate er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>tolterodine tartrate oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 table per 1 day)</td>
</tr>
<tr>
<td>TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR (fesoterodine fumarate)</td>
<td>3</td>
<td>QL (1 table per 1 day)</td>
</tr>
<tr>
<td>trospium chloride er oral capsule extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>trospium chloride oral tablet</td>
<td>1 or 1b*</td>
<td>QL (2 table per 1 day)</td>
</tr>
<tr>
<td><em>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</em>**</td>
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<tr>
<td>MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR (mirabegron)</td>
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<td>QL (1 table per 1 day)</td>
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<tr>
<td><em>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</em>** (NEW)</td>
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<tr>
<td>bethanechol chloride oral tablet</td>
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<tr>
<td><em>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</em>**</td>
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<tr>
<td>bethanechol chloride oral tablet</td>
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<tr>
<td><em>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</em>**</td>
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<tr>
<td>flavoxate hcl oral tablet</td>
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<tr>
<td><em>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</em>**</td>
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<td></td>
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<tr>
<td>flavoxate hcl oral tablet</td>
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<td><em>URINARY STONE AGENTS</em>** - DRUGS FOR THE URINARY SYSTEM</td>
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<tr>
<td>LITHOSTAT ORAL TABLET (acetohydroxamic acid)</td>
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<tr>
<td>THIOLA EC ORAL TABLET DELAYED RELEASE 100 MG (tiopronin)</td>
<td>3</td>
<td>PA; LD; QL (10 tablet per 1 day)</td>
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<tr>
<td>THIOLA EC ORAL TABLET DELAYED RELEASE 300 MG (tiopronin)</td>
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<td>PA; LD; QL (3 tablet per 1 day)</td>
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<tr>
<td>THIOLA ORAL TABLET (tiopronin)</td>
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<td>PA; LD; QL (10 tablet per 1 day)</td>
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<td><em>URINARY TRACT PROTECTIVE AGENTS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>ETHYOL INTRAVENOUS SOLUTION RECONSTITUTED (amifostine)</td>
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<td>PA; SP</td>
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<tr>
<td>mesna intravenous solution</td>
<td>1 or 1b*</td>
<td>PA</td>
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<tr>
<td>MESNEX INTRAVENOUS SOLUTION (mesna)</td>
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<td>PA</td>
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<tr>
<td>MESNEX ORAL TABLET (mesna)</td>
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<td>PA</td>
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<tr>
<td><em>V1A/V2-ARGININE VASOPRESSIN (AVP) RECEPTOR ANTAGONISTS</em>** - HORMONES</td>
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<tr>
<td>VAPRISOL INTRAVENOUS SOLUTION (conivaptan hcl in dextrose)</td>
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<tr>
<td><em>VAGINAL ANTI-INFECTIVES</em>**</td>
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<td></td>
</tr>
<tr>
<td>CLEOCIN VAGINAL CREAM (clindamycin phosphate)</td>
<td>3</td>
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</tr>
<tr>
<td>CLEOCIN VAGINAL SUPPOSITORY (clindamycin phosphate)</td>
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<td>clindamycin phosphate vaginal cream</td>
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<tr>
<td>CLINDESSE VAGINAL CREAM (clindamycin phosphate (1 dose))</td>
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</tr>
<tr>
<td>metronidazole vaginal gel</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>NUVESSA VAGINAL GEL (metronidazole)</td>
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</tr>
<tr>
<td>metronidazole (Vandazole Vaginal Gel)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
</table>

**VAGINAL ESTROGENS*** - DRUGS FOR WOMEN

- estradiol vaginal cream 1 or 1b*  
- estradiol vaginal tablet 1 or 1b*  
- ESTRING VAGINAL RING (estradiol)  
- FEMRING VAGINAL RING (estradiol acetate)  
- IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG (estradiol) 3 QL (18 inserts per 28 days)  
- IMVEXXY MAINTENANCE PACK VAGINAL INSERT 4 MCG (estradiol) 3 QL (18 packs per 28 days)  
- IMVEXXY STARTER PACK VAGINAL INSERT 10 MCG (estradiol) 3 QL (18 packs per 28 days)  
- IMVEXXY STARTER PACK VAGINAL INSERT 4 MCG (estradiol) 3 QL (18 packs per 28 days)  
- PREMARIN VAGINAL CREAM (estrogens, conjugated) 2 QL (1 gm per 1 day)  
- estradiol (Yuvafem Vaginal Tablet) 1 or 1b*  

**VAGINAL PROGESTINS*** - DRUGS FOR WOMEN

- CRINONE VAGINAL GEL 4 % (progesterone) 5 SP  
- CRINONE VAGINAL GEL 8 % (progesterone) 5 PA; SP; QL (1 applicator per 1 day)  
- ENDOMETRIN VAGINAL INSERT (progesterone) 3 PA  

**VALPROIC ACID***

- divalproex sodium er oral tablet extended release 24 hour 250 mg 1 or 1b*  
- divalproex sodium er oral tablet extended release 24 hour 500 mg 1 or 1b*  
- divalproex sodium oral capsule delayed release sprinkle 1 or 1b*  
- divalproex sodium oral tablet delayed release 125 mg 1 or 1b*  
- divalproex sodium oral tablet delayed release 250 mg 1 or 1b*  
- divalproex sodium oral tablet delayed release 500 mg 1 or 1b*  
- valproate sodium intravenous solution 1 or 1b*  
- valproic acid oral capsule 1 or 1b*  
- valproic acid oral solution 1 or 1b*  

**VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) ANTAGONISTS*** - DRUGS FOR THE EYE

- BEOUV INTRAVITREAL SOLUTION (brolucizumab-dbll) 5 PA; LD; SP  
- EYLEA INTRAVITREAL SOLUTION (aflibercept) 5 PA; LD; SP  
- EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE (aflibercept) 5 PA; LD  
- LUCENTIS INTRAVITREAL SOLUTION (ranibizumab) 5 PA; LD; SP  

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<td>LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE (ranibizumab)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td><em>VASULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>AVASTIN INTRAVENOUS SOLUTION (bevacizumab)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>CYRAMZA INTRAVENOUS SOLUTION (ramucirumab)</td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>MVASI INTRAVENOUS SOLUTION (bevacizumab-awwb)</td>
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<td>PA; LD; SP</td>
</tr>
<tr>
<td>ZALTRAP INTRAVENOUS SOLUTION (ziv-aflibercept)</td>
<td>3</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td>ZIRABEV INTRAVENOUS SOLUTION (bevacizumab-bvzr)</td>
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<td>PA; LD; SP</td>
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<tr>
<td><em>VASODILATORS</em>**</td>
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<tr>
<td>hydralazine hcl injection solution</td>
<td>1 or 1b*</td>
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<tr>
<td>hydralazine hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>minoxidil oral tablet</td>
<td>1 or 1b*</td>
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<tr>
<td>NIPRIDE RTU INTRAVENOUS SOLUTION (nitroprusside sodium-nacl)</td>
<td>3</td>
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<tr>
<td>NITROPRESS INTRAVENOUS SOLUTION (nitroprusside sodium)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>nitroprusside sodium intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td><em>VASOMOTOR SYMPTOM AGENTS - SSRIS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>paroxetine mesylate oral capsule</td>
<td>1 or 1b*</td>
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<tr>
<td><em>VASOPRESSIN</em>** - HORMONES</td>
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<tr>
<td>DDAVP INJECTION SOLUTION (desmopressin acetate)</td>
<td>3</td>
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<tr>
<td>DDAVP NASAL SOLUTION (desmopressin acetate spray)</td>
<td>3</td>
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<tr>
<td>DDAVP ORAL TABLET 0.1 MG (desmopressin acetate)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>DDAVP ORAL TABLET 0.2 MG (desmopressin acetate)</td>
<td>3</td>
<td>QL (6 tablets per 1 day)</td>
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<tr>
<td>DDAVP RHINAL TUBE NASAL SOLUTION (desmopressin ace refrigerated)</td>
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<tr>
<td>desmopressin ace spray refrig nasal solution</td>
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</tr>
<tr>
<td>desmopressin acetate injection solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>desmopressin acetate oral tablet 0.1 mg</td>
<td>1 or 1b*</td>
<td>DO</td>
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<tr>
<td>desmopressin acetate oral tablet 0.2 mg</td>
<td>1 or 1b*</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>desmopressin acetate spray nasal solution</td>
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<tr>
<td>NOCDURNA SUBLINGUAL TABLET SUBLINGUAL (desmopressin acetate)</td>
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<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td>STIMATE NASAL SOLUTION (desmopressin acetate)</td>
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<td>QL (5 mL per 30 days)</td>
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<tr>
<td>VASOSTRICT INTRAVENOUS SOLUTION (vasopressin)</td>
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<tr>
<td><em>VASOPRESSORS</em>**</td>
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<tr>
<td>AKOVAZ INTRAVENOUS SOLUTION (epheedrine sulfate (pressors))</td>
<td>3</td>
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<tr>
<td>BIORPHEN INTRAVENOUS SOLUTION (phenylephrine hcl (pressors))</td>
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<tr>
<td>dobutamine hcl intravenous solution</td>
<td>1 or 1b*</td>
<td></td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td>dobutamine in d5w intravenous solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>dopamine hcl intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>dopamine in d5w intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>EMERPHED INTRAVENOUS SOLUTION (ephedrine sulfate (pressors))</td>
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<tr>
<td>EPHEDRINE SULFATE (PRESSORS) INJECTION SOLUTION PREFILLED SYRINGE</td>
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<tr>
<td>EPHEDRINE SULFATE INTRAVENOUS SOLUTION</td>
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<tr>
<td>EPHEDRINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td>10-0.9 MG/ML-%, 100-0.9 MG/10ML-%, 50-0.9 MG/10ML-%</td>
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<td>EPINEPHRINE HCL-DEXTROSE INTRAVENOUS SOLUTION</td>
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<tr>
<td>EPINEPHRINE HCL-NACL INTRAVENOUS SOLUTION</td>
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<tr>
<td>epinephrine injection solution</td>
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</tr>
<tr>
<td>epinephrine injection solution prefilled syringe</td>
<td>1 or 1b*</td>
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<tr>
<td>EPINEPHRINE INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
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<td></td>
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<tr>
<td>EPINEPHRINE PF INJECTION SOLUTION</td>
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<td></td>
</tr>
<tr>
<td>EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION</td>
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</tr>
<tr>
<td>EPINEPHRINE-NACL INTRAVENOUS SOLUTION</td>
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<tr>
<td>GIAPREZA INTRAVENOUS SOLUTION (angiotensin ii acetate)</td>
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<tr>
<td>LEVOPHED INTRAVENOUS SOLUTION (norepinephrine bitartrate)</td>
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<tr>
<td>midodrine hcl oral tablet</td>
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<tr>
<td>norepinephrine bitartrate intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION</td>
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<td>NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION</td>
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<tr>
<td>PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION</td>
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<tr>
<td>PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td>1 MG/10ML</td>
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<tr>
<td>PHENYLEPHRINE HCL INTRAVENOUS SOLUTION 10 MG/ML</td>
<td>3</td>
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<tr>
<td>PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
<td>3</td>
<td>0.5-0.9 MG/5ML-%, 0.8-0.9 MG/10ML-%, 20-0.9 MG/50ML-%</td>
</tr>
<tr>
<td>VAZCULEP INTRAVENOUS SOLUTION (phenylephrine hcl (pressors))</td>
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<tr>
<td><em>VIRAL VACCINE COMBINATIONS</em>**</td>
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<tr>
<td>M-M-R II INJECTION SOLUTION RECONSTITUTED (measles, mumps &amp; rubella vac)</td>
<td>3; $0</td>
<td></td>
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<tr>
<td>PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED (measles-mumps-rubella-varicell)</td>
<td>3; $0</td>
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</tr>
</tbody>
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<tr>
<td>TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(hepatitis a-hep b recomb vac)</em></td>
<td>3; $0</td>
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<tr>
<td><strong>VIRAL VACCINES</strong>*</td>
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<tr>
<td>AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION <em>(influenza vac split quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
</tr>
<tr>
<td>AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(influenza vac split quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
</tr>
<tr>
<td>ENGERIX-B INJECTION SUSPENSION <em>(hepatitis b vac recombinant)</em></td>
<td>3; $0</td>
<td></td>
</tr>
<tr>
<td>ENGERIX-B INTRAMUSCULAR INJECTABLE <em>(hepatitis b vac recombinant)</em></td>
<td>3; $0</td>
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<tr>
<td>FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(influenza vac a&amp;b surf ant adj)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
</tr>
<tr>
<td>FLUAD QUADRIVALENT INTRAMUSCULAR SUSPENSION <em>(influenza vac a&amp;b sa adj quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
</tr>
<tr>
<td>FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(influenza vac split quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
</tr>
<tr>
<td>FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE <em>(influenza vac recomb ha quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
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<tr>
<td>FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION <em>(influenza vac subunit quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
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<tr>
<td>FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION <em>(influenza vac subunit quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
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<tr>
<td>FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(influenza vac split quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
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<tr>
<td>FLUMIST QUADRIVALENT NASAL SUSPENSION <em>(influenza virus vac live quad)</em></td>
<td>2; $0</td>
<td>QL (2 fills per 180 days)</td>
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<tr>
<td>FLUZONE HIGH-DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE <em>(influenza vac high-dose quad)</em></td>
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<td>QL (0.7 mL per 1 fill)</td>
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<tr>
<td>FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION <em>(influenza vac split quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
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<tr>
<td>FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION <em>(influenza vac split quad)</em></td>
<td>2; $0</td>
<td>QL (1 fill per 180 days)</td>
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<tr>
<td>GARDASIL 9 INTRAMUSCULAR SUSPENSION <em>(hpv 9-valent recomb vaccine)</em></td>
<td>2; $0</td>
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<tr>
<td>GARDASIL 9 INTRAMUSCULAR SUSPENSION <em>(hpv 9-valent recomb vaccine)</em></td>
<td>2; $0</td>
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<tr>
<td>HAVRIX INTRAMUSCULAR SUSPENSION <em>(hepatitis a vaccine)</em></td>
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<tr>
<td>HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE <em>(hepatitis b vac recomb adj)</em></td>
<td>3; $0</td>
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<tr>
<td>IMOVAX RABIES INTRAMUSCULAR INJECTABLE <em>(rabies virus vaccine, hdc)</em></td>
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<tr>
<td>IPOL INJECTION INJECTABLE <em>(poliovirus vaccine inactivated)</em></td>
<td>3; $0</td>
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</tbody>
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<tr>
<td>Ixiaro Intramuscular Suspension (japanese encephalitis vac inac)</td>
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<tr>
<td>Rabavert Intramuscular Suspension Reconstituted (rabies vaccine, pvec)</td>
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<tr>
<td>Recombivax HB Injection Suspension (hepatitis b vac recombinant)</td>
<td>3; $0</td>
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<tr>
<td>Rotarix Oral Suspension Reconstituted (rotavirus vaccine live oral)</td>
<td>3; $0</td>
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</tr>
<tr>
<td>Rotaveq Oral Solution (rotavirus vac live pentavalent)</td>
<td>3; $0</td>
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<tr>
<td>Shingrix Intramuscular Suspension Reconstituted (zoster vac recomb adjuvanted)</td>
<td>3; $0</td>
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<tr>
<td>Stamaril Injection Suspension Reconstituted</td>
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<tr>
<td>Vaqta Intramuscular Suspension (hepatitis a vaccine)</td>
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<tr>
<td>Varivax Subcutaneous Injectable (varicella virus vaccine live)</td>
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<tr>
<td>Yf-Vax Subcutaneous Injectable (yellow fever vaccine)</td>
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<tr>
<td><strong>Viscosupplements</strong>* - Drugs for muscles, ligaments, tendons, and bones</td>
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<tr>
<td>Durolane Intrarticular Prefilled Syringe (sodium hyaluronate (viscosup))</td>
<td>5</td>
<td>PA</td>
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<tr>
<td>EuFlexxa Intrarticular Solution Prefilled Syringe (sodium hyaluronate (viscosup))</td>
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<td>PA</td>
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<tr>
<td>Geln-one Intrarticular Prefilled Syringe (cross-linked hyaluronate)</td>
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<tr>
<td>Gelsyn-3 Intrarticular Solution Prefilled Syringe (sodium hyaluronate (viscosup))</td>
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<td>SP</td>
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<tr>
<td>Hyalgan Intrarticular Solution (sodium hyaluronate (viscosup))</td>
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<td>Hyalgan Intrarticular Solution Prefilled Syringe (sodium hyaluronate (viscosup))</td>
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<td>PA</td>
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<tr>
<td>Hymobis Intrarticular Solution Prefilled Syringe (hyaluronic)</td>
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<tr>
<td>Orthovisc Intrarticular Solution Prefilled Syringe (hyaluronan)</td>
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<td>Sodium Hyaluronate Intrarticular Solution Prefilled Syringe</td>
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<td>PA; SP</td>
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<tr>
<td>Supartz FX Intrarticular Solution Prefilled Syringe (sodium hyaluronate (viscosup))</td>
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<tr>
<td>Synvisc Intrarticular Solution Prefilled Syringe (hylan)</td>
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<tr>
<td>Synvisc One Intrarticular Solution Prefilled Syringe (hylan)</td>
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<tr>
<td>TRILURON INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE</td>
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<tr>
<td>(sodium hyaluronate (viscosup))</td>
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<tr>
<td>VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE</td>
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<tr>
<td>(sodium hyaluronate (viscosup))</td>
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<tr>
<td><em>VITAMIN A</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>AQUASOL A INTRAMUSCULAR SOLUTION (vitamin a)</td>
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<td><em>VITAMIN B-1</em>** - DRUGS FOR NUTRITION</td>
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<td>thiamine hcl injection solution</td>
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<tr>
<td><em>VITAMIN B-6</em>** - DRUGS FOR NUTRITION</td>
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<td>pyridoxine hcl injection solution</td>
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<td><em>VITAMIN C</em>** - DRUGS FOR NUTRITION</td>
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<td>ASCOR INTRAVENOUS SOLUTION (ascorbic acid)</td>
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<td>ascorbic acid injection solution</td>
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<td><em>VITAMIN D</em>** - DRUGS FOR NUTRITION</td>
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<td>DRISDOL ORAL CAPSULE (ergocalciferol)</td>
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<tr>
<td>ergocalciferol oral capsule</td>
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<tr>
<td>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)</td>
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<td><em>VITAMIN E</em>** - DRUGS FOR NUTRITION</td>
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<tr>
<td>WHEAT GERM OIL ORAL OIL</td>
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<td><em>VITAMIN K</em>** - DRUGS FOR NUTRITION</td>
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<td>MEPHYTON ORAL TABLET (phytonadione)</td>
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<tr>
<td>phytonadione injection solution</td>
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<tr>
<td>phytonadione oral tablet</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td>vitamin k1 injection solution</td>
<td>1 or 1b*</td>
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</tr>
<tr>
<td><em>VITAMINS A &amp; D</em>** - DRUGS FOR NUTRITION</td>
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<td>COD LIVER OIL ORAL OIL</td>
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<td><em>VITAMINS W/ LIPOTROPICS</em>** - DRUGS FOR NUTRITION</td>
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<td>ACTIFLOVIT EAR HEALTH ORAL TABLET (vitamins-lipotropics)</td>
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<tr>
<td>b-100 complex oral tablet</td>
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<tr>
<td>b-100 cr oral tablet extended release</td>
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<td>b-50 oral tablet</td>
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<tr>
<td>balance b-100 oral tablet</td>
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<td>complex b-100 oral tablet extended release</td>
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<tr>
<td>cvb balanced b50 oral tablet</td>
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<td>cvb inner ear plus oral tablet</td>
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<td>ear health formula oral tablet</td>
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<td>ear health plus oral tablet</td>
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<tr>
<td>inner ear plus oral tablet</td>
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<td>lipo flavonoid plus oral tablet</td>
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<td>lipo flavonoid oral tablet</td>
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<td>lipo flavovit oral tablet</td>
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<td>lipo-key oral tablet</td>
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<td>mega multiple/chelated mineral oral tablet</td>
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<td>nat-rul b-50 oral tablet</td>
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<td>px b-50 oral tablet</td>
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<td>risanoid plus oral tablet</td>
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<td>ultra b-100 complex oral tablet</td>
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<td><em>VOLATILE ANESTHETICS</em>**</td>
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<td>desflurane inhalation solution</td>
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<td>isoflurane inhalation solution</td>
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<tr>
<td>sevoflurane inhalation solution</td>
<td>1 or 1b*</td>
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<td>SUPRANE INHALATION SOLUTION (desflurane)</td>
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<td>isoflurane (Terrell Inhalation Solution)</td>
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<td>ULTANE INHALATION SOLUTION (sevoflurane)</td>
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<td><em>WOUND CARE - GROWTH FACTOR AGENTS</em>** - DRUGS FOR THE SKIN</td>
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<td>REGRANEX EXTERNAL GEL (becaplermin)</td>
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<td><em>WOUND CARE COMBINATIONS</em>** - DRUGS FOR THE SKIN</td>
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<td>XEROFORM OIL ROLL 4&quot;X9&quot; EXTERNAL (bismuth tribromoph-petrolatum)</td>
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<td>XEROFORM PETROLAT GAUZE 1&quot;X8&quot; EXTERNAL (bismuth tribromoph-petrolatum)</td>
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<td>XEROFORM PETROLATUM ROLL 4&quot;X9' EXTERNAL (bismuth tribromoph-petrolatum)</td>
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<td><em>WOUND CLEANSERS/DECUBITUS ULCER THERAPY</em>** - DRUGS FOR THE SKIN</td>
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<td>ATRAPRO DERMAL SPRAY EXTERNAL LIQUID (wound cleansers)</td>
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<td>LAVARE WOUND WASH EXTERNAL GEL</td>
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<td>MICROCYN EXTERNAL GEL (wound cleansers)</td>
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<td>MICROCYN EXTERNAL LIQUID (wound cleansers)</td>
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<td>MICROCYN SKIN AND WOUND EXTERNAL GEL (wound cleansers)</td>
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<td><em>WOUND DRESSINGS</em>** - DRUGS FOR THE SKIN</td>
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<td>ACTICOAT 7 EXTERNAL PAD (silver)</td>
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<td>ACTICOAT 7 EXTERNAL SHEET (silver)</td>
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<td>ACTICOAT ANTIMICROBIAL EXTERNAL PAD (silver)</td>
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<td>ACTICOAT EXTERNAL SHEET 5&quot;X5&quot; (silver)</td>
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<td>ACTICOAT SITE EXTERNAL DISK (silver)</td>
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<td>ACTICOAT SURGICAL EXTERNAL PAD (silver)</td>
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<td>ALLEVYN AG ADHESIVE EXTERNAL PAD (silver)</td>
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<td>ALLEVYN AG GENTLE BORDER EXTERNAL PAD (silver)</td>
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<td>ALLEVYN AG NON-ADHESIVE EXTERNAL PAD (silver)</td>
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<tr>
<td>ALLEVYN AG SACRUM 6-3/4&quot; EXTERNAL (silver)</td>
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<td>ALLEVYN AG SACRUM 9&quot;X9&quot; EXTERNAL (silver)</td>
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<td>ALLEVYN GENTLE EXTERNAL PAD (wound dressings)</td>
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<tr>
<td>AQUACEL AG BURN EXTERNAL PAD (<em>silver-carboxymethylcellulose</em>)</td>
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<td>AVO CREAM EXTERNAL EMULSION (<em>wound dressings</em>)</td>
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<td>AZADROX EXTERNAL GEL (<em>silver</em>)</td>
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<td>BASADROX EXTERNAL GEL (<em>silver</em>)</td>
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<td>BIAFINE EXTERNAL EMULSION (<em>wound dressings</em>)</td>
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<td>BIOSTEP AG EXTERNAL SHEET (<em>collagen matrix-silver</em>)</td>
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<td>BIOSTEP EXTERNAL SHEET (<em>collagen matrix (porcine)</em></td>
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<td>CURITY HYPERTONIC NACL STRIP EXTERNAL (<em>wound dressings</em>)</td>
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<td>DIAB F.D.G. FREEZE-DRIED EXTERNAL GEL (<em>wound dressings</em>)</td>
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<td>DURAFIBER AG EXTERNAL PAD (<em>silver</em>)</td>
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<td>MIRODERM BIOLOGIC WOUND MATRIX EXTERNAL SHEET (collagen matrix meshed (porc))</td>
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<td><em>dyphylline-guaifenesin</em> (Difil-G Forte Oral Liquid)</td>
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<tr>
<td>aminophylline intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>ELIXOPHYLLIN ORAL ELIXIR (theophylline)</td>
<td>2</td>
<td>QL (112.5 mL per 1 day)</td>
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<tr>
<td>THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG (theophylline)</td>
<td>2</td>
<td>QL (4 tablets per 1 day)</td>
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<tr>
<td>THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG (theophylline)</td>
<td>2</td>
<td>QL (3 capsules per 1 day)</td>
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<tr>
<td>THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 300 MG, 400 MG (theophylline)</td>
<td>2</td>
<td>QL (2 capsules per 1 day)</td>
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<tr>
<td>theophylline er oral tablet extended release 12 hour 300 mg</td>
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<tr>
<td>theophylline er oral tablet extended release 12 hour 450 mg</td>
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<tr>
<td>theophylline er oral tablet extended release 24 hour</td>
<td>1 or 1b*</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>THEOPHYLLINE IN D5W INTRAVENOUS SOLUTION</td>
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<tr>
<td>theophylline oral solution</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>ZINC</strong>* - DRUGS FOR NUTRITION</td>
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<tr>
<td>GALZIN ORAL CAPSULE (zinc acetate (oral))</td>
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<tr>
<td>zinc chloride intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td>zinc sulfate intravenous solution</td>
<td>1 or 1b*</td>
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<tr>
<td><strong>ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB</strong>* - DRUGS FOR THE HEART</td>
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<tr>
<td><strong>ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB</strong>* - DRUGS FOR THE HEART</td>
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<tr>
<td>NEXLIZET ORAL TABLET (bempedoic acid-ezetimibe)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>ADENOSINE DEAMINASE SCID TREATMENT - AGENTS</strong>* - DRUGS FOR METABOLIC DISEASE</td>
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<tr>
<td><strong>ADENOSINE DEAMINASE SCID TREATMENT - AGENTS</strong>* - DRUGS FOR METABOLIC DISEASE</td>
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<tr>
<td>REVCovi INTRAMUSCULAR SOLUTION (elapegademase-lvlr)</td>
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<td>PA; LD</td>
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<tr>
<td><strong>ADENOSINE RECEPTOR ANTAGONIST</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td><strong>ADENOSINE RECEPTOR ANTAGONIST</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>NOURIANZ ORAL TABLET (istradefylline)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td><strong>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</strong>* - DRUGS FOR THE HEART</td>
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<tr>
<td><strong>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</strong>* - DRUGS FOR THE HEART</td>
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</tr>
<tr>
<td>NEXLETOL ORAL TABLET (bempedoic acid)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
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</tbody>
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<tr>
<td><em>AGENTS FOR NARCOTIC WITHDRAWAL</em>** - DRUGS FOR ADDICTION</td>
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<tr>
<td>LUCEMYRA ORAL TABLET (lofexidine hcl)</td>
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<td>QL (16 tablets per 1 day)</td>
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<td><em>AGENTS FOR OPIOID WITHDRAWAL</em>** - DRUGS FOR ADDICTION</td>
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<tr>
<td>LUCEMYRA ORAL TABLET (lofexidine hcl)</td>
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<td>QL (16 tablets per 1 day)</td>
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<td><em>AMINO ACIDS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>ENDARI ORAL PACKET (glutamine (sickle cell))</td>
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<td>PA; LD</td>
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<td><em>AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA</em>** - DRUGS FOR THE LIVER</td>
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<tr>
<td>GIVLAARI SUBCUTANEOUS SOLUTION (givosiran sodium)</td>
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<td>PA; LD</td>
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<td><em>AMINOMETHYLICYCLINES</em>** - DRUGS FOR INFECTIONS</td>
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<td>NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED (omadacycline tosylate)</td>
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<td>LD</td>
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<tr>
<td>NUZYRA ORAL TABLET (omadacycline tosylate)</td>
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<td>PA; LD; QL (30 tablets per 30 days)</td>
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<td><em>ANTICOAGULANTS - MISC.</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE</td>
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<td><em>ANTIDEMENTIA AGENT COMBINATIONS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK (memantine hcl-donepezil hcl)</td>
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<tr>
<td>NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR (memantine hcl-donepezil hcl)</td>
<td>2</td>
<td>QL (1 capsule per 1 day)</td>
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<tr>
<td><em>ANTIDOTE COMBINATIONS</em>** - DRUGS FOR OVERDOSE OR POISONING</td>
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<tr>
<td>DUODOTE INTRAMUSCULAR SOLUTION AUTO-INJECTOR (atropine-pralidoxime chloride)</td>
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<tr>
<td>NITHIODOTE INTRAVENOUS KIT (sodium nitrite-sod thiosulfate)</td>
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<td><em>ANTIEMETICS - ANTIDOPAMINERGIC</em>** - DRUGS FOR THE STOMACH</td>
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<tr>
<td>BARHEMSYS INTRAVENOUS SOLUTION (<em>amisulpride (antiemetic)</em></td>
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<tr>
<td><strong>ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES</strong>* - DRUGS FOR THE BLOOD</td>
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<td><strong>ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES</strong>* - DRUGS FOR THE BLOOD</td>
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<tr>
<td>HEMLIBRA SUBCUTANEOUS SOLUTION (<em>emicizumab-kxwh</em>)</td>
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<td>PA; SP</td>
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<tr>
<td><strong>ANTIHYPERLIPIDEMICS MISC. COMBINATIONS</strong>*</td>
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<tr>
<td><strong>ANTIHYPERLIPIDEMICS MISC. COMBINATIONS</strong>*</td>
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<td>SURE RESULT O3D3 SYSTEM ORAL KIT</td>
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<td><strong>ANTINEOPLASTIC - BCL-2 INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<td><strong>ANTINEOPLASTIC - BCL-2 INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>VENCLEXTA ORAL TABLET 10 MG (<em>venetoclax</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (2 tablets per 1 day)</td>
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<tr>
<td>VENCLEXTA ORAL TABLET 100 MG (<em>venetoclax</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (6 tablet per 1 day)</td>
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<tr>
<td>VENCLEXTA ORAL TABLET 50 MG (<em>venetoclax</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (1 tablet per 1 day)</td>
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<td>VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK (<em>venetoclax</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (1 pack per 365 days)</td>
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<tr>
<td><strong>ANTINEOPLASTIC - BISPECIFIC T-CELL ENGAGERS</strong>* - DRUGS FOR CANCER</td>
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<td><strong>ANTINEOPLASTIC - BISPECIFIC T-CELL ENGAGERS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED (<em>blinatumomab</em>)</td>
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<td>PA; LD; SP</td>
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<tr>
<td><strong>ANTINEOPLASTIC - FGFR KINASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<td><strong>ANTINEOPLASTIC - FGFR KINASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>BALVERSA ORAL TABLET 3 MG (<em>erdafitinib</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (3 tablets per 1 day)</td>
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<tr>
<td>BALVERSA ORAL TABLET 4 MG (<em>erdafitinib</em>)</td>
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<td>PA; LD; QL (2 tablets per 1 day)</td>
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<tr>
<td>BALVERSA ORAL TABLET 5 MG (<em>erdafitinib</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (1 tablet per 1 day)</td>
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<tr>
<td>PEMAZYRE ORAL TABLET (<em>pemigatinib</em>)</td>
<td>3; OC</td>
<td>PA; LD; QL (14 tablets per 21 days)</td>
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<tr>
<td><strong>ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS</strong>* - DRUGS FOR CANCER</td>
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<td><strong>ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>LEUPROLIDE ACETATE-BUPIVACAINE INTRAMUSCULAR SOLUTION</td>
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<tr>
<td><strong>ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<td><strong>ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>TAZVERIK ORAL TABLET (tazemetostat hbr)</td>
<td>3; OC</td>
<td>PA; LD; QL (8 tablets per 1 day)</td>
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<tr>
<td><strong>ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>ROZLYTREK ORAL CAPSULE (entrectinib)</td>
<td>3; OC</td>
<td>PA; LD; SP</td>
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<tr>
<td>VITRAKVI ORAL CAPSULE 100 MG (larotrectinib sulfate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
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<tr>
<td>VITRAKVI ORAL CAPSULE 25 MG (larotrectinib sulfate)</td>
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<td>PA; LD; SP; QL (6 tablets per 1 day)</td>
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<tr>
<td>VITRAKVI ORAL SOLUTION (larotrectinib sulfate)</td>
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<td>PA; LD; SP; QL (10 mL per 1 day)</td>
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<td><strong>ANTINEOPLASTIC - XPO1 INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<td><strong>ANTINEOPLASTIC - XPO1 INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK (selinexor)</td>
<td>3; OC</td>
<td>PA; LD; QL (1 pack per 1 week)</td>
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<tr>
<td>XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK (selinexor)</td>
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<td>PA; LD; QL (1 pack per 1 week)</td>
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<td>XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK (selinexor)</td>
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<tr>
<td>XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK (selinexor)</td>
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<td>PA; LD; QL (1 pack per 1 week)</td>
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<tr>
<td>XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK (selinexor)</td>
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<td>PA; LD; QL (1 pack per 1 week)</td>
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<tr>
<td>XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK (selinexor)</td>
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<td>3; OC</td>
<td>PA; LD; QL (1 pack per 1 week)</td>
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<td><strong>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENT - COMB</strong>* - DRUGS FOR THE SKIN</td>
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<td><strong>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENT - COMB</strong>* - DRUGS FOR THE SKIN</td>
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<tr>
<td>ORMECA COMBINATION KIT (diclofenac-b6-fa-b12)</td>
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<td><strong>ANTI-OBESEITY - GLP-1 RECEPTOR AGONISTS</strong>* - DRUGS FOR EATING DISORDERS</td>
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<tr>
<td><strong>ANTI-OBESEITY - GLP-1 RECEPTOR AGONISTS</strong>* - DRUGS FOR EATING DISORDERS</td>
<td></td>
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<tr>
<td>SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR (liraglutide - weight management)</td>
<td>3</td>
<td>PA</td>
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<td><em>ANTI-OBEITY AGENT COMBINATIONS</em>* - DRUGS FOR EATING DISORDERS</td>
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<tr>
<td>CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR <em>(naltrexone-bupropion hcl)</em></td>
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<td>PA</td>
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<td><em>ANTIPSORIATIC COMBINATIONS</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>NUDERMRXPAK 120 EXTERNAL THERAPY PACK <em>(calcipotriene-dimethicone)</em></td>
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<td>NUDERMRXPAK 60 EXTERNAL THERAPY PACK <em>(calcipotriene-dimethicone)</em></td>
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<td><em>ANTIRETROVIRALS - CD4-DIRECTED POST-ATTACHMENT INHIBITOR</em>** - DRUGS FOR INFECTIONS</td>
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<tr>
<td>TROGARZO INTRAVENOUS SOLUTION <em>(ibalizumab-uiyk)</em></td>
<td>3</td>
<td>PA; LD; QL (8 vials per 28 days)</td>
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<tr>
<td>RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR</td>
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<td>PA; QL (2 tablets per 1 day)</td>
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<td><em>ANTIRETROVIRALS ADJUVANTS</em>** - DRUGS THAT ALTER METABOLISM</td>
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<tr>
<td>TYBOST ORAL TABLET <em>(cobicistat)</em></td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
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<tr>
<td><em>ANTISENSE OLIGONUCLEOTIDE (ASO) INHIBITOR AGENTS</em>** - HORMONES</td>
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<tr>
<td>TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE <em>(inotersen sodium)</em></td>
<td>5</td>
<td>PA; LD; QL (4 syringes per 28 days)</td>
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<td><em>ANTI-VON WILLEBRAND FACTOR AGENTS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>CABLIVI INJECTION KIT <em>(caplacizumab-yhdp)</em></td>
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<td>PA; LD</td>
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<tr>
<td><em>ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(dupilumab)</em></td>
<td>4</td>
<td>SP; QL (2 syringes per 28 days)</td>
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<td><em>BACTERIAL MONOCLONAL ANTIBODIES</em>** - BIOLOGICAL AGENTS</td>
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<td>ZINPLAVA INTRAVENOUS SOLUTION (bezlotoxumab)</td>
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<td><em>BILE ACID SYNTHESIS DISORDER AGENTS</em>** - DRUGS FOR THE STOMACH</td>
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<tr>
<td>CHOLBAM ORAL CAPSULE (cholic acid)</td>
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<td><em>CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td><em>CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AIMOVIG SUBCUTANEOUS SOLUTION AUTO-JECTOR (erenumab-aooe)</td>
<td>3</td>
<td>PA; QL (1 autoinjector per 30 days)</td>
</tr>
<tr>
<td>EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (galcanezumab-gnlm)</td>
<td>3</td>
<td>PA; QL (1 syringe per 30 days)</td>
</tr>
<tr>
<td>EMGALITY SUBCUTANEOUS SOLUTION AUTO-JECTOR (galcanezumab-gnlm)</td>
<td>3</td>
<td>PA; QL (1 pen per 30 days)</td>
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<tr>
<td><em>CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td><em>CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
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</tr>
<tr>
<td>NURTEC ORAL TABLET DISPERSIBLE (rimegepant sulfate)</td>
<td>2</td>
<td>ST; QL (15 tablets per 30 days)</td>
</tr>
<tr>
<td><em>CEPHALOSPORIN COMBINATIONS</em>** - DRUGS FOR INFECTIONS</td>
<td></td>
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<tr>
<td><em>CEPHALOSPORIN COMBINATIONS</em>** - DRUGS FOR INFECTIONS</td>
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</tr>
<tr>
<td>AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED (ceftazidime-avibactam)</td>
<td>3</td>
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</tr>
<tr>
<td>ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED (ceftolozane-tazobactam)</td>
<td>3</td>
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</tr>
<tr>
<td><em>CEPHALOSPORINS - SIDEROPHORES</em>** - DRUGS FOR INFECTIONS</td>
<td></td>
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<tr>
<td><em>CEPHALOSPORINS - SIDEROPHORES</em>** - DRUGS FOR INFECTIONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FETROJA INTRAVENOUS SOLUTION RECONSTITUTED (cefiderocol sulfate tosylate)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
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<tr>
<td><strong>CGRP RECEPTOR ANTAGONISTS - MONOCOLONAL ANTIBODIES</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR (erenumab-aooe)</td>
<td>3</td>
<td>PA; QL (1 autoinjector per 30 days)</td>
</tr>
<tr>
<td>EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (galcanezumab-gnlm)</td>
<td>3</td>
<td>PA; QL (1 syringe per 30 days)</td>
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<tr>
<td>EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR (galcanezumab-gnlm)</td>
<td>3</td>
<td>PA; QL (1 pen per 30 days)</td>
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<tr>
<td>EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (galcanezumab-gnlm)</td>
<td>3</td>
<td>PA; QL (1 syringe per 30 days)</td>
</tr>
<tr>
<td><strong>CORTISOL SYNTHESIS INHIBITORS</strong>* - HORMONES</td>
<td></td>
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<tr>
<td>ISTURISA ORAL TABLET 1 MG, 5 MG (osilodrostat phosphate)</td>
<td>5</td>
<td>PA; LD; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>ISTURISA ORAL TABLET 10 MG (osilodrostat phosphate)</td>
<td>5</td>
<td>PA; LD; QL (6 tablets per 1 day)</td>
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<tr>
<td><strong>CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS</strong>* - DRUGS FOR CANCER</td>
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<tr>
<td>IBRANCE ORAL CAPSULE (palbociclib)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>IBRANCE ORAL TABLET (palbociclib)</td>
<td>2; OC</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK (ribociclib succinate)</td>
<td>2; OC</td>
<td>PA; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK (ribociclib succinate)</td>
<td>2; OC</td>
<td>PA; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK (ribociclib succinate)</td>
<td>2; OC</td>
<td>PA; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>VERZENIO ORAL TABLET (abemaciclib)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>CYSTIC FIBROSIS AGENT - COMBINATIONS</strong>* - DRUGS FOR THE LUNGS</td>
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<td></td>
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<tr>
<td>ORKAMBI ORAL PACKET (lumacaftor-ivacaftor)</td>
<td>5</td>
<td>PA; LD; QL (2 packets per 1 day)</td>
</tr>
<tr>
<td>ORKAMBI ORAL TABLET (lumacaftor-ivacaftor)</td>
<td>5</td>
<td>PA; LD; QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>SYMDEKO ORAL TABLET THERAPY PACK (tezacaftor-ivacaftor)</td>
<td>5</td>
<td>PA; LD; QL (1 carton per 28 days)</td>
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<tr>
<td>TRIKAFTA ORAL TABLET THERAPY PACK (elexacaftor-tezacaftor-ivacaft)</td>
<td>5</td>
<td>PA; LD; QL (1 carton per 28 days)</td>
</tr>
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<tr>
<td><em>DIRECT-ACTING P2Y12 INHIBITORS</em>** - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
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<tr>
<td>BRILINTA ORAL TABLET (<em>ticagrelor</em>)</td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
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<tr>
<td>KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED (<em>cangrelor tetrasodium</em>)</td>
<td>3</td>
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<tr>
<td><em>DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>SUNOSI ORAL TABLET 150 MG (<em>solriamfetol hcl</em>)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td>SUNOSI ORAL TABLET 75 MG (<em>solriamfetol hcl</em>)</td>
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<td>PA; DO</td>
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<tr>
<td><em>ERYTHROID MATURATION AGENTS</em>** - DRUGS FOR THE BLOOD</td>
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<tr>
<td>REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED (<em>luspatercept-aamt</em>)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><em>ESTROGEN-PROGESTIN-GNRH ANTAGONIST</em>** - HORMONES</td>
<td></td>
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<tr>
<td>ORIAHNN ORAL CAPSULE THERAPY PACK (<em>elagolix-estradiol-norethind</em>)</td>
<td>3</td>
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</tr>
<tr>
<td><em>ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB</em>** - HORMONES</td>
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<tr>
<td>DUAVEE ORAL TABLET (<em>conj estrogens-bazedoxifene</em>)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>FARNESOID X RECEPTOR (FXR) AGONISTS</em>** - DRUGS FOR THE LIVER</td>
<td></td>
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<tr>
<td>OCALIVA ORAL TABLET (<em>obeticholic acid</em>)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>FENTANYL COMBINATIONS</em>** - DRUGS FOR PAIN AND FEVER</td>
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<tr>
<td>FENTANYL CIT-ROPIVACAINE-NAACL EPIDURAL SOLUTION</td>
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<tr>
<td>FENTANYL-BUPIVACAINE-NAACL EPIDURAL SOLUTION</td>
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<tr>
<td>FENTANYL-BUPIVACAINE-NAACL INJECTION SOLUTION</td>
<td>3</td>
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<td><strong>FLUOROCYCLINES</strong>* - DRUGS FOR INFECTIONS</td>
<td></td>
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<tr>
<td>XERAVA INTRAVENOUS SOLUTION RECONSTITUTED 50 MG (eravacycline dihydrochloride)</td>
<td>3</td>
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<tr>
<td><strong>GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
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<tr>
<td>ZULRESSO INTRAVENOUS SOLUTION (brexanolone)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td><strong>GLYCOPEPTIDES</strong>* - DRUGS FOR INFECTIONS</td>
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<tr>
<td>DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED (dalbavancin hcl)</td>
<td>3</td>
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<tr>
<td>FIRVANQ ORAL SOLUTION RECONSTITUTED (vancomycin hcl)</td>
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<td>PA</td>
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<tr>
<td>ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED (oritavancin diphosphate)</td>
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<tr>
<td>VANCOCIN HCL ORAL CAPSULE (vancomycin hcl)</td>
<td>3</td>
<td>PA</td>
</tr>
<tr>
<td>VANCOCIN ORAL CAPSULE (vancomycin hcl)</td>
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<td>PA</td>
</tr>
<tr>
<td>VANCOMYCIN HCL IN DEXTROSE INTRAVENOUS SOLUTION</td>
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<tr>
<td>VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION</td>
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<tr>
<td>VANCOMYCIN HCL INTRAVENOUS SOLUTION</td>
<td>3</td>
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<tr>
<td><strong>HEMOGLOBIN S (HBS) POLYMERIZATION INHIBITORS</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
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</tr>
<tr>
<td>OXBRYTA ORAL TABLET (voxelotor)</td>
<td>5</td>
<td>PA; LD; SP; QL (3 tablets per 1 day)</td>
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<tr>
<td><strong>HEPATITIS C AGENT - COMBINATIONS</strong>* - DRUGS FOR INFECTIONS</td>
<td></td>
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</tr>
<tr>
<td>EPCLUSA ORAL TABLET (sofosbuvir-velpatasvir)</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
</tbody>
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<tr>
<td>HARVONI ORAL PACKET 33.75-150 MG (ledipasvir-sofosbuvir)</td>
<td>4</td>
<td>PA; QL (1 packet per 1 day)</td>
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<tr>
<td>HARVONI ORAL PACKET 45-200 MG (ledipasvir-sofosbuvir)</td>
<td>4</td>
<td>PA; QL (2 packets per 1 day)</td>
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<tr>
<td>HARVONI ORAL TABLET 45-200 MG (ledipasvir-sofosbuvir)</td>
<td>4</td>
<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td>HARVONI ORAL TABLET 90-400 MG (ledipasvir-sofosbuvir)</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
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<tr>
<td>VIEKIRA PAK ORAL TABLET THERAPY PACK (ombitas-paritapre-ritona-dasab)</td>
<td>5</td>
<td>PA; SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>VOSEVI ORAL TABLET (sofosbuv-velpatasv-voxilaprev)</td>
<td>4</td>
<td>PA; SP; QL (1 tablet per 1 day)</td>
</tr>
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*HEREDITARY OROTIC ACIDURIA TREATMENT - AGENTS** - DRUGS THAT ALTER METABOLISM*

XURIDEN ORAL PACKET (uridine triacetate) | 3 | PA; LD; QL (4 packets per 1 day) |

*HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS*** - DRUGS FOR THE NERVOUS SYSTEM*

WAKIX ORAL TABLET 17.8 MG (pitolisant hcl) | 5 | PA; LD; SP; QL (2 tablets per 1 day) |
WAKIX ORAL TABLET 4.45 MG (pitolisant hcl) | 5 | PA; DO; LD; SP |

*HYPOPHOSPHATASIA (HPP) AGENTS*** - DRUGS FOR METABOLIC DISEASE*

STRENSIQ SUBCUTANEOUS SOLUTION (asfotase alfa) | 5 | PA; LD |

*IBS AGENT - MU-OPIOID RECEPTOR AGONISTS*** - DRUGS FOR THE STOMACH*

VIBERZI ORAL TABLET (eluxadoline) | 2 | QL (2 tablets per 1 day) |

*IMPOTENCE AGENT COMBINATIONS*** - DRUGS FOR THE URINARY SYSTEM*

BI-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED | 3 |
QUAD-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED | 3 |
SUPER BI-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED | 3 |
SUPER QUAD-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED | 3 |
SUPER TRI-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED | 3 |

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<td><strong>IMPOTENCE AGENTS - OTHER</strong>*</td>
<td></td>
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<tr>
<td>PHENYLEPHRINE HCL INTRACAVERNOSAL SOLUTION</td>
<td>3</td>
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</tr>
<tr>
<td><strong>IN VITRO/LOCK ANTICOAGULANTS</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACD FORMULA A IN VITRO SOLUTION</td>
<td>3</td>
<td></td>
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<tr>
<td>ACD-A NOCLOT-50 IN VITRO SOLUTION <em>(anticoagulant cit dext soln a)</em></td>
<td>3</td>
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<tr>
<td>ANTICOAGULANT CIT DEXT SOLN A IN VITRO SOLUTION</td>
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<tr>
<td>ANTICOAGULANT SODIUM CITRATE IN VITRO SOLUTION</td>
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<tr>
<td>TRICITRASOL IN VITRO CONCENTRATE <em>(anticoagulant sodium citrate)</em></td>
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<tr>
<td><strong>INSULIN-INECRETIN MIMETIC COMBINATIONS</strong>* - HORMONES</td>
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<td></td>
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<tr>
<td>SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(insulin glargine-lixisenatide)</em></td>
<td>3</td>
<td>ST; QL (5 pen per 25 days)</td>
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<tr>
<td>XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR <em>(insulin degludec-liraglutide)</em></td>
<td>3</td>
<td>ST; QL (5 pen per 30 days)</td>
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<tr>
<td><strong>INSULIN-LIKE GROWTH FACTOR-1 RECEPTOR INHIBITORS(IGF-1R)</strong>* - HORMONES</td>
<td></td>
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<tr>
<td>TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED <em>(teprotumumab-trbw)</em></td>
<td>5</td>
<td>PA; LD; SP; QL (8 fills per 168 days)</td>
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<tr>
<td><strong>INTEGRIN RECEPTOR ANTAGONISTS</strong>* - DRUGS FOR THE STOMACH</td>
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<tr>
<td>ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED <em>(vedolizumab)</em></td>
<td>4</td>
<td>PA; SP; QL (1 vial per 56 days)</td>
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<tr>
<td><strong>INTERLEUKIN ANTAGONISTS</strong>* - DRUGS FOR THE STOMACH</td>
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<tr>
<td>STELARA INTRAVENOUS SOLUTION <em>(ustekinumab)</em></td>
<td>4</td>
<td>PA; LD; SP; QL (4 vial per 365 days)</td>
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<tr>
<td><strong>INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)</strong>* - DRUGS FOR THE LUNGS</td>
<td></td>
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<tr>
<td>FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR <em>(benralizumab)</em></td>
<td>5</td>
<td>PA; LD; QL (1 autoinjector per 8 weekss)</td>
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<tr>
<td>FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE <em>(benralizumab)</em></td>
<td>5</td>
<td>PA; LD; SP; QL (1 syringes per 8 weekss)</td>
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<td>NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR (mepolizumab)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 autoinjector per 4 weekss)</td>
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<tr>
<td>NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (mepolizumab)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 syringe per 4 weekss)</td>
</tr>
<tr>
<td>NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED (mepolizumab)</td>
<td>5</td>
<td>PA; LD; SP</td>
</tr>
<tr>
<td><em>INTERLEUKIN-5 ANTAGONISTS (IGG4 KAPPA)</em>** - DRUGS FOR THE LUNGS</td>
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<tr>
<td>CINQAIR INTRAVENOUS SOLUTION (reslizumab)</td>
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<tr>
<td><em>INTERLEUKIN-6 (IL-6) ANTAGONISTS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED (siltuximab)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td><em>ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>TIBSOVO ORAL TABLET (ivosidenib)</td>
<td>3; OC</td>
<td>PA; LD; QL (2 tablets per 1 day)</td>
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<tr>
<td><em>ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS</em>** - DRUGS FOR CANCER</td>
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<tr>
<td>IDHIFA ORAL TABLET 100 MG (enasidenib mesylate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>IDHIFA ORAL TABLET 50 MG (enasidenib mesylate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em>LEPTIN ANALOGUES</em>** - HORMONES</td>
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<tr>
<td>MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED (metreleptin)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><em>LHRH/GNRH AGONIST ANALOG COMBINATIONS</em>** - HORMONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LUPANETA PACK COMBINATION KIT 11.25 &amp; 5 MG (leuprolide &amp; norethindrone)</td>
<td>5</td>
<td>PA; SP; QL (1 kit per 84 days)</td>
</tr>
<tr>
<td>LUPANETA PACK COMBINATION KIT 3.75 &amp; 5 MG (leuprolide &amp; norethindrone)</td>
<td>5</td>
<td>PA; SP; QL (1 kit per 28 days)</td>
</tr>
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<tr>
<td><em>LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG</em>** - DRUGS FOR THE EYE</td>
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<tr>
<td><em>LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG</em>** - DRUGS FOR THE EYE</td>
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<tr>
<td>XIIDRA OPHTHALMIC SOLUTION (<em>lifitegrast</em>)</td>
<td>2</td>
<td>PA; QL (2 vial per 1 day)</td>
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<tr>
<td><em>LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS</em>** - DRUGS FOR METABOLIC DISEASE</td>
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<tr>
<td><em>LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS</em>** - DRUGS FOR METABOLIC DISEASE</td>
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<tr>
<td>KANUMA INTRAVENOUS SOLUTION (<em>sebelipase alfa</em>)</td>
<td>3</td>
<td>PA; LD; SP</td>
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<tr>
<td><em>MELANOCORTIN RECEPTOR AGONISTS (UV PROTECTIVE)</em>** - DRUGS FOR THE SKIN</td>
<td></td>
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<tr>
<td><em>MELANOCORTIN RECEPTOR AGONISTS (UV PROTECTIVE)</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>SCENESSE SUBCUTANEOUS IMPLANT (<em>afamelanotide acetate</em>)</td>
<td>3</td>
<td>PA; LD; QL (1 implant per 2 monthss)</td>
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<tr>
<td><em>MELANOCORTIN RECEPTOR AGONISTS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td><em>MELANOCORTIN RECEPTOR AGONISTS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<td></td>
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<tr>
<td>VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR (<em>bremelanotide acetate</em>)</td>
<td>3</td>
<td>PA; LD; QL (4 autoinjectors per 30 days)</td>
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<tr>
<td><em>MIXED ALLERGENIC EXTRACTS</em>** - BIOLOGICAL AGENTS</td>
<td></td>
<td></td>
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<tr>
<td><em>MIXED ALLERGENIC EXTRACTS</em>** - BIOLOGICAL AGENTS</td>
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<tr>
<td>DUST MITE MIXED ALLERGEN EXT SUBCUTANEOUS SOLUTION</td>
<td>3</td>
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<tr>
<td>MIXED ASPERGILLUS SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>MIXED FEATHERS SUBCUTANEOUS SOLUTION</td>
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<tr>
<td>ODACTRA SUBLINGUAL TABLET SUBLINGUAL (<em>dust mite mixed allergen ext</em>)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
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<tr>
<td>ORALAIR SUBLINGUAL TABLET SUBLINGUAL (<em>grass mix pollens allergen ext</em>)</td>
<td>3</td>
<td>PA; LD; QL (1 tablet per 1 day)</td>
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<tr>
<td>SORREL/Dock mix subcutaneous solution</td>
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<tr>
<td><em>MONOBACTAMS</em>** - DRUGS FOR INFECTIONS</td>
<td></td>
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</tr>
<tr>
<td><em>MONOBACTAMS</em>** - DRUGS FOR INFECTIONS</td>
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</tr>
<tr>
<td>AZACTAM INJECTION SOLUTION RECONSTITUTED (<em>aztreonam</em>)</td>
<td>3</td>
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<tr>
<td>aztreonam injection solution reconstituted</td>
<td>1 or 1b*</td>
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<tr>
<td>CAYSTON INHALATION SOLUTION RECONSTITUTED (<em>aztreonam lysine</em>)</td>
<td>5</td>
<td>LD; QL (84 vials per 28 days)</td>
</tr>
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<tr>
<td><strong>MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS</strong>* - DRUGS FOR METABOLIC DISEASE**</td>
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<tr>
<td><strong>MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS</strong>* - DRUGS FOR METABOLIC DISEASE**</td>
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<tr>
<td>VIMIZIM INTRAVENOUS SOLUTION (<em>elosulfase alfa</em>)</td>
<td>5</td>
<td>PA; LD; SP</td>
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<tr>
<td><strong>MUCOPOLYSACCHARIDOSIS VII (MPS VII) - AGENTS</strong>* - DRUGS FOR METABOLIC DISEASE**</td>
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<tr>
<td><strong>MUCOPOLYSACCHARIDOSIS VII (MPS VII) - AGENTS</strong>* - DRUGS FOR METABOLIC DISEASE**</td>
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<tr>
<td>MEPSEVII INTRAVENOUS SOLUTION (<em>vestronidase alfa-vjbk</em>)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES</strong>* - DRUGS FOR THE NERVOUS SYSTEM**</td>
<td></td>
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</tr>
<tr>
<td><strong>MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES</strong>* - DRUGS FOR THE NERVOUS SYSTEM**</td>
<td></td>
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</tr>
<tr>
<td>MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
</tr>
<tr>
<td>MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
</tr>
<tr>
<td>MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
</tr>
<tr>
<td>MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
</tr>
<tr>
<td>MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
</tr>
<tr>
<td>MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
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<tr>
<td>MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK (<em>cladribine</em>)</td>
<td>4</td>
<td>PA; LD; SP; QL (2 packs per 46 weekss)</td>
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<tr>
<td><strong>MULTIPLE VITAMINS &amp; FLUORIDE-FOLIC ACID</strong>* - VITAMINS AND MINERALS**</td>
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<tr>
<td><strong>MULTIPLE VITAMINS &amp; FLUORIDE-FOLIC ACID</strong>* - VITAMINS AND MINERALS**</td>
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<tr>
<td>MULTIVITAMIN/FLUORIDE ORAL TABLET CHEWABLE 0.25-0.3 MG, 0.5-0.3 MG, 1-0.3 MG</td>
<td>3</td>
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<td><strong>MULTIPLE VITAMINS W/ MINERALS &amp; FLUORIDE-IRON-FOLIC ACID</strong>* - DRUGS FOR NUTRITION**</td>
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<tr>
<td><strong>MULTIPLE VITAMINS W/ MINERALS &amp; FLUORIDE-IRON-FOLIC ACID</strong>* - DRUGS FOR NUTRITION**</td>
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<tr>
<td>QUFLORA FE ORAL TABLET CHEWABLE (<em>multi vit-min-fluoride-fe-fa</em>)</td>
<td>3</td>
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</tr>
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<tr>
<td><strong>MUSCULAR DYSTROPHY AGENTS</strong>* - DRUGS FOR NERVES AND MUSCLES</td>
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<tr>
<td><em>MUSCULAR DYSTROPHY AGENTS</em>** - DRUGS FOR NERVES AND MUSCLES</td>
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<tr>
<td>EXONDYS 51 INTRAVENOUS SOLUTION <em>(eteplirsen)</em></td>
<td>5</td>
<td>PA; LD</td>
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<tr>
<td>VILTEPSO INTRAVENOUS SOLUTION <em>(viltolarsen)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td>VYONDYS 53 INTRAVENOUS SOLUTION <em>(golodirsen)</em></td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><strong>NASAL ANESTHETICS</strong>* - DRUGS FOR THE NOSE</td>
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<tr>
<td><em>NASAL ANESTHETICS</em>** - DRUGS FOR THE NOSE</td>
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<tr>
<td>COCAINE HCL NASAL SOLUTION</td>
<td>3</td>
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<tr>
<td>GOPRELTO NASAL SOLUTION</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NUMBRINO NASAL SOLUTION <em>(cocaine hcl (nasal anesthetic))</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB</strong>* - DRUGS FOR THE HEART</td>
<td></td>
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</tr>
<tr>
<td><em>NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB</em>** - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ENTRESTO ORAL TABLET 24-26 MG <em>(sacubitril-valsartan)</em></td>
<td>2</td>
<td>QL (6 tablets per 1 day)</td>
</tr>
<tr>
<td>ENTRESTO ORAL TABLET 49-51 MG, 97-103 MG <em>(sacubitril-valsartan)</em></td>
<td>2</td>
<td>QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</strong>* - DRUGS FOR THE HEART</td>
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<tr>
<td><em>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</em>** - DRUGS FOR THE HEART</td>
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<tr>
<td>NORTHERA ORAL CAPSULE 100 MG <em>(droxidopa)</em></td>
<td>3</td>
<td>PA; LD; SP; QL (3 capsules per 1 day)</td>
</tr>
<tr>
<td>NORTHERA ORAL CAPSULE 200 MG, 300 MG <em>(droxidopa)</em></td>
<td>3</td>
<td>PA; LD; SP; QL (6 capsules per 1 day)</td>
</tr>
<tr>
<td><strong>N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td><em>N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
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<tr>
<td>SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK <em>(esketamine hcl)</em></td>
<td>5</td>
<td>PA; LD; QL (4 kits per 28 days)</td>
</tr>
<tr>
<td>SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK <em>(esketamine hcl)</em></td>
<td>5</td>
<td>PA; LD; QL (4 kits per 28 days)</td>
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<tr>
<td><strong>NSAID-VITAMINS AND/OR MINERALS COMBINATIONS</strong>*</td>
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<tr>
<td><em>NSAID-VITAMINS AND/OR MINERALS COMBINATIONS</em>**</td>
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<tr>
<td>EQUIPAX/IBUPROFEN/MINREX ORAL THERAPY PACK</td>
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<td><strong>ONCOLYTIC VIRAL AGENTS - HSV1</strong>* - BIOLOGICAL AGENTS</td>
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<td><em>ONCOLYTIC VIRAL AGENTS - HSV1</em>** - BIOLOGICAL AGENTS</td>
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<tr>
<td>IMLYGIC INTRALESIONAL SUSPENSION <em>(talimogene laherparepvec)</em></td>
<td>3</td>
<td>LD</td>
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</tr>
<tr>
<td>ROCKLATAN OPHTHALMIC SOLUTION (netarsudil-latanoprost)</td>
<td>3</td>
<td>QL (2.5 mL per 30 days)</td>
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<tr>
<td><em>OPHTHALMIC NERVE GROWTH FACTORS</em>** - DRUGS FOR THE EYE</td>
<td></td>
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<tr>
<td>OXERVATE OPHTHALMIC SOLUTION (cenegermin-bkbj)</td>
<td>5</td>
<td>PA; LD; QL (2 vials per 1 day)</td>
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<tr>
<td><em>OPHTHALMIC PHOTOENHANCER COMBINATIONS</em>** - DRUGS FOR THE EYE</td>
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<tr>
<td>PHOTREXA VISCOUS OPHTHALMIC SOLUTION PREFILLED SYRINGE (riboflavin 5-phosphate-dextran)</td>
<td>3</td>
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<tr>
<td>PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE (riboflav5 &amp; riboflav5-dextran)</td>
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<tr>
<td><em>OPHTHALMIC RHO KINASE INHIBITORS</em>** - DRUGS FOR THE EYE</td>
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<tr>
<td>RHOPRESSA OPHTHALMIC SOLUTION (netarsid dimesylate)</td>
<td>3</td>
<td>QL (2.5 mL per 30 days)</td>
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<tr>
<td><em>OPHTHALMICS - BLEPHAROPTOSIS AGENTS</em>* - DRUGS FOR THE EYE</td>
<td></td>
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<tr>
<td>UPNEEQ OPHTHALMIC SOLUTION (oxymetazoline hcl)</td>
<td>3</td>
<td>PA; QL (30 containers per 30 days)</td>
</tr>
<tr>
<td><em>OREXIN RECEPTOR ANTAGONISTS</em>** - DRUGS FOR THE NERVOUS SYSTEM</td>
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<tr>
<td>BELSOMRA ORAL TABLET (suvorexent)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>DAYVIGO ORAL TABLET (lemborexent)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
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<tr>
<td><em>OXABOROLE-RELATED ANTIFUNGALS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
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<tr>
<td>KERYDIN EXTERNAL SOLUTION (tavaborole)</td>
<td>3</td>
<td>QL (1 bottle per 30 days)</td>
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<tr>
<td>XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK (<em>baloxavir marboxil</em>)</td>
<td>3</td>
<td>QL (1 dose pack per 90 days)</td>
</tr>
<tr>
<td>XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK (<em>baloxavir marboxil</em>)</td>
<td>3</td>
<td>QL (1 dose pack per 90 days)</td>
</tr>
<tr>
<td><em>PASSIVE IMMUNIZING AGENTS - COMBINATIONS</em>** - BIOLOGICAL AGENTS</td>
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<tr>
<td>HYQVIA SUBCUTANEOUS KIT (<em>immune globulin-hyaluronidase</em>)</td>
<td>5</td>
<td>PA; SP</td>
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<tr>
<td><em>PCSK9 INHIBITORS</em>** - DRUGS FOR THE HEART</td>
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<tr>
<td>PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR (<em>alirocumab</em>)</td>
<td>3</td>
<td>PA; QL (2 injection per 28 days)</td>
</tr>
<tr>
<td>REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE (<em>evolocumab</em>)</td>
<td>3</td>
<td>PA; QL (1 injector per 30 days)</td>
</tr>
<tr>
<td>REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (<em>evolocumab</em>)</td>
<td>3</td>
<td>PA; QL (2 syringe per 28 days)</td>
</tr>
<tr>
<td>REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR (<em>evolocumab</em>)</td>
<td>3</td>
<td>PA; QL (2 syringe per 28 days)</td>
</tr>
<tr>
<td><em>PEDIATRIC MULTIPLE VITAMINS &amp; MINERALS W/ FLUORIDE</em>** - DRUGS FOR NUTRITION</td>
<td></td>
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</tr>
<tr>
<td>FLORIVA ORAL TABLET CHEWABLE (<em>ped multiple vit-minerals-fl</em>)</td>
<td>3</td>
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<tr>
<td><em>PERITONEAL DIALYSIS SOLUTIONS</em>** - DRUGS FOR THE KIDNEYS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DELFLEX-LC/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (<em>peritoneal dialysis solutions</em>)</td>
<td>3</td>
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<tr>
<td>DELFLEX-LC/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (<em>peritoneal dialysis solutions</em>)</td>
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<tr>
<td>DELFLEX-LC/4.25% DEXTROSE INTRAPERITONEAL SOLUTION (<em>peritoneal dialysis solutions</em>)</td>
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<tr>
<td>DELFLEX-SM/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (<em>peritoneal dialysis solutions</em>)</td>
<td>2</td>
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<tr>
<td>DELFLEX-SM/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (<em>peritoneal dialysis solutions</em>)</td>
<td>3</td>
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</tr>
<tr>
<td>DIANEAL LOW CALCIUM/1.5% DEX INTRAPERITONEAL SOLUTION (<em>peritoneal dialysis solutions</em>)</td>
<td>3</td>
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<tbody>
<tr>
<td>DIANEAL LOW CALCIUM/2.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DIANEAL LOW CALCIUM/4.25% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DIANEAL PD-2/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DIANEAL PD-2/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>DIANEAL PD-2/4.25% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>EXTRANEAL INTRAPERITONEAL SOLUTION (icodextrin-electrolytes)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL PD-2/1.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL PD-2/2.5% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL PD-2/4.25% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL 1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL/1.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL/2.5% DEXTROSE INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ULTRABAG/DIANEAL/4.25% DEX INTRAPERITONEAL SOLUTION (peritoneal dialysis solutions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS</em>** - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED (copanlisib hcl)</td>
<td>3</td>
<td>PA; LD</td>
</tr>
<tr>
<td>COPIKTRA ORAL CAPSULE (duvelisib)</td>
<td>3; OC</td>
<td>PA; LD; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK (alpelisib)</td>
<td>3; OC</td>
<td>PA; SP; QL (1 pack per 28 days)</td>
</tr>
<tr>
<td>PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK (alpelisib)</td>
<td>3; OC</td>
<td>PA; SP; QL (1 pack per 28 days)</td>
</tr>
<tr>
<td>PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK (alpelisib)</td>
<td>3; OC</td>
<td>PA; SP; QL (1 pack per 28 days)</td>
</tr>
<tr>
<td>ZYDELIG ORAL TABLET (idelalisib)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><em>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL</em>** - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EURCISA EXTERNAL OINTMENT (crisaborole)</td>
<td>3</td>
<td>ST; QL (100 grams per 30 days)</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td><strong>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</strong>* - DRUGS FOR PAIN AND FEVER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTEZLA ORAL TABLET (apremilast)</td>
<td>4</td>
<td>PA; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>OTEZLA ORAL TABLET THERAPY PACK (apremilast)</td>
<td>4</td>
<td>PA; SP; QL (1 pack per 365 days)</td>
</tr>
<tr>
<td><strong>PLASMA KALLIKREIN INHIBITORS - MONOCLONAL ANTIBODIES</strong>* - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TAKHZYRO SUBCUTANEOUS SOLUTION (lanadelumab-flyo)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 syringes per 30 days)</td>
</tr>
<tr>
<td><strong>PLEUROMUTILINS</strong>* - DRUGS FOR INFECTIONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>XENLETA INTRAVENOUS SOLUTION (lefamulin acetate)</td>
<td>3</td>
<td>LD</td>
</tr>
<tr>
<td>XENLETA ORAL TABLET (lefamulin acetate)</td>
<td>3</td>
<td>PA; LD; QL (10 tablets per 30 days)</td>
</tr>
<tr>
<td><strong>POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS</strong>* - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LYNPARZA ORAL TABLET (olaparib)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>RUBRACA ORAL TABLET 200 MG, 300 MG (rucaparib camsylate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 tablet per 1 day)</td>
</tr>
<tr>
<td>RUBRACA ORAL TABLET 250 MG (rucaparib camsylate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (4 tablets per 1 day)</td>
</tr>
<tr>
<td>TALZENNA ORAL CAPSULE 0.25 MG (talazoparib tosylate)</td>
<td>3; OC</td>
<td>PA; LD; SP; QL (3 capsules per 1 day)</td>
</tr>
<tr>
<td>TALZENNA ORAL CAPSULE 1 MG (talazoparib tosylate)</td>
<td>3; OC</td>
<td>PA; LD; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ZEJULA ORAL CAPSULE (niraparib tosylate)</td>
<td>3; OC</td>
<td>PA; LD; QL (3 capsules per 1 day)</td>
</tr>
</tbody>
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<tr>
<td>TALZENNA ORAL CAPSULE 1 MG <em>(talazoparib tosylate)</em></td>
<td>3; OC</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>ZEJULA ORAL CAPSULE <em>(niraparib tosylate)</em></td>
<td>3; OC</td>
<td>PA; LD; QL (3 capsules per 1 day)</td>
</tr>
</tbody>
</table>

**POSTHERPETIC NEURALGIA (PHN) COMBINATION AGENTS*** - DRUGS FOR THE NERVOUS SYSTEM

CONVENIENCE PAK COMBINATION THERAPY PACK *(gabapentin & lidocaine)*

**POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS*** - DRUGS FOR THE NERVOUS SYSTEM

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>GRALISE ORAL TABLET 300 MG <em>(gabapentin (once-daily))</em></td>
<td>2</td>
<td>PA; DO</td>
</tr>
<tr>
<td>GRALISE ORAL TABLET 600 MG <em>(gabapentin (once-daily))</em></td>
<td>2</td>
<td>PA; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 82.5 MG <em>(pregabalin)</em></td>
<td>3</td>
<td>PA; DO</td>
</tr>
<tr>
<td>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 330 MG <em>(pregabalin)</em></td>
<td>3</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
</tbody>
</table>

**POTASSIUM REMOVING AGENTS*** - DRUGS FOR NUTRITION

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>LOKELMA ORAL PACKET <em>(sodium zirconium cyclosilicate)</em></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>sodium polystyrene sulfonate oral powder</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium polystyrene sulfonate oral suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium polystyrene sulfonate rectal suspension</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>sodium polystyrene sulfonate <em>(Sps Oral Suspension)</em></td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>VELTASSA ORAL PACKET <em>(patiromer sorbitex calcium)</em></td>
<td>3</td>
<td>LD</td>
</tr>
</tbody>
</table>

**PRENATAL MV & MINERALS W/FA WITHOUT IRON*** - DRUGS FOR NUTRITION

PRENATE ORAL TABLET CHEWABLE *(prenat mv-min-methylfolate-fa)*

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<tbody>
<tr>
<td><em>PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS</em>** - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ZONTIVITY ORAL TABLET (vorapaxar sulfate)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><em>PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS</em>** - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>PROTEIN-CARBOHYDRATE-LIPID WITH ELECTROLYTE COMBINATIONS</em>** - DRUGS FOR NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KABIVEN INTRAVENOUS EMULSION (amino ac-dext-lipid-electrolyt)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PERIKABIVEN INTRAVENOUS EMULSION (amino ac-dext-lipid-electrolyt)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><em>PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS</em>** - DRUGS FOR CANCER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OFEV ORAL CAPSULE (nintedanib esylate)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 capsules per 1 day)</td>
</tr>
<tr>
<td><em>PULMONARY FIBROSIS AGENTS</em>** - DRUGS FOR THE LUNGS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ESBRIET ORAL CAPSULE (pirfenidone)</td>
<td>5</td>
<td>PA; LD; SP; QL (9 capsule per 1 day)</td>
</tr>
<tr>
<td>ESBRIET ORAL TABLET 267 MG (pirfenidone)</td>
<td>5</td>
<td>PA; LD; SP; QL (9 tablets per 1 day)</td>
</tr>
<tr>
<td>ESBRIET ORAL TABLET 801 MG (pirfenidone)</td>
<td>5</td>
<td>PA; LD; SP; QL (3 tablets per 1 day)</td>
</tr>
<tr>
<td><em>PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST</em>** - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UPTRAVI ORAL TABLET (selexipag)</td>
<td>5</td>
<td>PA; LD; SP; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>UPTRAVI ORAL TABLET THERAPY PACK (selexipag)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 pack per 365 days)</td>
</tr>
<tr>
<td><em>SCLEROSTIN INHIBITORS</em>** - HORMONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (romosozumab-aqqg)</td>
<td>5</td>
<td>PA; SP; QL (2 syringes per 30 days)</td>
</tr>
<tr>
<td><em>SEBORRHEIC KERATOSIS PRODUCTS</em>* - DRUGS FOR THE SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ESKATA EXTERNAL SOLUTION (hydrogen peroxide)</td>
<td>3</td>
<td></td>
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<tr>
<td><strong>SELECTIN BLOCKERS</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SELECTIN BLOCKERS</strong>* - DRUGS FOR THE BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADAKVEO INTRAVENOUS SOLUTION (erizanlizumab-tmca)</td>
<td>5</td>
<td>PA; SP</td>
</tr>
<tr>
<td><strong>SEPTAL AGENTS - ABLATION</strong>* - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SEPTAL AGENTS - ABLATION</strong>* - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABLYSINOL INTRA-ARTERIAL SOLUTION (dehydrated alcohol)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>SEROTONIN 1A RECEPT AGONIST/SEROTONIN 2A RECEPTANTAG</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SEROTONIN 1A RECEPT AGONIST/SEROTONIN 2A RECEPTANTAG</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADDYI ORAL TABLET (flibanserin)</td>
<td>3</td>
<td>PA; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td><strong>SEROTONIN MODULATORS</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SEROTONIN MODULATORS</strong>* - DRUGS FOR THE NERVOUS SYSTEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>nefazodone hcl oral tablet</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>trazodone hcl oral tablet</td>
<td>1 or 1a*</td>
<td></td>
</tr>
<tr>
<td>TRINTELLIX ORAL TABLET 10 MG, 5 MG (vortioxetine hbr)</td>
<td>3</td>
<td>DO</td>
</tr>
<tr>
<td>TRINTELLIX ORAL TABLET 20 MG (vortioxetine hbr)</td>
<td>3</td>
<td>QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>VIIBRYD ORAL TABLET 10 MG, 20 MG (vilazodone hcl)</td>
<td>3</td>
<td>ST; DO</td>
</tr>
<tr>
<td>VIIBRYD ORAL TABLET 40 MG (vilazodone hcl)</td>
<td>3</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>VIIBRYD STARTER PACK ORAL KIT (vilazodone hcl)</td>
<td>3</td>
<td>ST; QL (1 pack per 365 days)</td>
</tr>
<tr>
<td><strong>SINUS NODE INHIBITORS</strong>* - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SINUS NODE INHIBITORS</strong>* - DRUGS FOR THE HEART</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CORLANOR ORAL SOLUTION (ivabradine hcl)</td>
<td>3</td>
<td>PA; QL (4 ampules per 1 day)</td>
</tr>
<tr>
<td>CORLANOR ORAL TABLET (ivabradine hcl)</td>
<td>2</td>
<td>PA; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td><strong>SMALL INTERFERING RIBONUCLEIC ACID (SIRNA) AGENTS</strong>* - HORMONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SMALL INTERFERING RIBONUCLEIC ACID (SIRNA) AGENTS</strong>* - HORMONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ONPATTRO INTRAVENOUS SOLUTION (patisiran sodium)</td>
<td>5</td>
<td>PA; LD</td>
</tr>
<tr>
<td><strong>SODIUM-GlUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB</strong>* - HORMONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SODIUM-GlUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB</strong>* - HORMONES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SYNJARDY ORAL TABLET (empagliflozin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 5-1000 MG (empagliflozin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
<tr>
<td>SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25-1000 MG (empagliflozin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 5-500 MG (dapagliflozin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (1 tablet per 1 day)</td>
</tr>
<tr>
<td>XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG (dapagliflozin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (2 tablet per 1 day)</td>
</tr>
<tr>
<td>XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG (dapagliflozin-metformin hcl)</td>
<td>2</td>
<td>ST; QL (2 tablets per 1 day)</td>
</tr>
</tbody>
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**SPINAL MUSCULAR ATROPHY-SMN2 SPlicing MODIFIERS*** - DRUGS FOR NERVES AND MUSCLES

<table>
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</thead>
<tbody>
<tr>
<td>EVRYSDI ORAL SOLUTION RECONSTITUTED (risdiplam)</td>
<td>5</td>
<td>PA; LD; QL (5 mg per 1 day)</td>
</tr>
</tbody>
</table>

**SPLEN TyROSINE KINASE (SYK) INHIBITORS*** - DRUGS FOR THE BLOOD

<table>
<thead>
<tr>
<th>Nombre del medicamento recetado</th>
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</tr>
</thead>
<tbody>
<tr>
<td>TAVALISSE ORAL TABLET (fostamatinib disodium)</td>
<td>5</td>
<td>PA; LD; QL (2 tablets per 1 day)</td>
</tr>
</tbody>
</table>

**STEROIDS - MOUTH/THROAT/DENTAL*** - DRUGS FOR THE MOUTH AND THROAT

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>triamcinolone acetonide (Oralone Mouth/Throat Paste)</td>
<td>1 or 1b*</td>
<td></td>
</tr>
<tr>
<td>triamcinolone acetonide mouth/throat paste</td>
<td>1 or 1b*</td>
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**TETRAHYDROISOQUINOLINES*** - DRUGS FOR CANCER

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<th>Requisitos de cobertura y límite</th>
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<tr>
<td>YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED (trabectedin)</td>
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**THROMBOLYTIC AGENT - MISC*** - DRUGS FOR THE BLOOD

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<td>DEFITELIO INTRAVENOUS SOLUTION (defibrotide sodium)</td>
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**TRANSTHYRETIN STABILIZERS*** - HORMONES

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<tbody>
<tr>
<td>VYNDAMAX ORAL CAPSULE (tafamidis)</td>
<td>5</td>
<td>PA; LD; SP; QL (1 capsule per 1 day)</td>
</tr>
<tr>
<td>VYNDAQEL ORAL CAPSULE (tafamidis meglumine (cardiac))</td>
<td>5</td>
<td>PA; LD; SP; QL (4 capsules per 1 day)</td>
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**TRYPTOPHAN HYDROXYLASE INHIBITORS*** - DRUGS FOR THE STOMACH

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<td>XERMELO ORAL TABLET (telotristat etiprate)</td>
<td>5</td>
<td>PA; LD; QL (3 tablets per 1 day)</td>
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* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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La mayoría de los planes incluyen nuestro práctico programa de envío a domicilio sin costos adicionales para el afiliado. Puedes obtener más información en anthem.com/ca o llamando al 866-297-1013.

Para obtener información sobre tu beneficio de farmacia, inicia sesión en anthem.com/ca.

Encontrarás la lista de medicamentos y los detalles más actualizados sobre tus beneficios. Si tienes alguna pregunta, estamos aquí para ayudarte. Llámanos al número de Servicios para Afiliados que aparece en tu tarjeta de identificación.

Usuarios con problemas de habla o audición (TDD/TTY): Llamar al 1-800-221-6915, de lunes a viernes, de 8:30 a.m. a 5 p.m., hora del Este.