

完整處方集 (承保藥物清單)

2023

wellcare

TM

Wellcare Giveback (HMO) 、
Wellcare Giveback Boost (HMO) 、
Wellcare Low Premium Open (PPO) 、
Wellcare No Premium (HMO) 、
Wellcare No Premium Open (PPO) 、
Wellcare No Premium Ruby (HMO) 、
Wellcare No Premium Select (HMO) 、
Wellcare Premium Ultra (HMO)

19



請閱讀：本文件包含此計劃承保的藥物資訊

HPMS 核准的處方集檔案遞交 ID 23318，版本編號 18

本處方集在 12/01/2023 更新。如需更多近期資訊或其他問題，請參考本處方集封面內頁和封底所列資訊，查看您所在州的電話號碼或網站，聯絡 Wellcare 會員服務部。

- 關於您為疫苗所支付費用的重要訊息 - 我們的計劃為您免費承保大多數的 Part D 疫苗，即使您尚未支付自付額*。如需更多詳細資訊，請致電會員服務部。
- 關於您為胰島素支付費用的重要訊息 - 無論分攤費用等級為何，您每個月為本計劃承保的每項胰島素產品支付費用不會超過 \$35，即使您尚未支付自付額*。

*請參閱您的承保證明及其他計劃資料，瞭解任何可能適用的自付額。

電話一通， 我們即在！

ARKANSAS

+ HMO、HMO D-SNP

☎ 1-855-565-9518

🖥️ 或造訪 www.wellcare.com/allwellAR

ARIZONA

+ HMO、HMO C-SNP、HMO D-SNP

☎ 1-800-977-7522

🖥️ 或造訪 www.wellcare.com/allwellAZ

CALIFORNIA

+ HMO、HMO C-SNP、PPO

☎ 1-800-275-4737

+ HMO D-SNP

☎ 1-800-431-9007

🖥️ 或造訪 www.wellcare.com/healthnetCA

FLORIDA

+ HMO D-SNP

☎ 1-877-935-8022

🖥️ 或造訪 www.wellcare.com/allwellFL

GEORGIA

+ HMO

☎ 1-844-890-2326

+ HMO D-SNP

☎ 1-877-725-7748

🖥️ 或造訪 www.wellcare.com/allwellGA

INDIANA

+ HMO、PPO

☎ 1-855-766-1541

+ HMO D-SNP, PPO D-SNP

☎ 1-833-202-4704

🖥️ 或造訪 www.wellcare.com/allwellIN

KANSAS

+ HMO

☎ 1-855-565-9519

+ PPO

☎ 1-833-696-0634

+ HMO D-SNP, PPO D-SNP

☎ 1-833-402-6707

🖥️ 或造訪 www.wellcare.com/allwellKS

LOUISIANA

+ HMO

☎ 1-855-766-1572

+ HMO D-SNP

☎ 1-833-541-0767

🖥️ 或造訪 www.wellcare.com/allwellLA

MISSOURI

+ HMO

☎ 1-855-766-1452

+ HMO D-SNP

☎ 1-833-298-3361

🖥️ 或造訪 www.wellcare.com/allwellMO

MISSISSIPPI

+ HMO

☎ 1-844-786-7711

+ HMO D-SNP

☎ 1-833-260-4124

🖨 或造訪 www.wellcare.com/allwellMS

NEBRASKA

+ HMO 、 PPO

☎ 1-833-542-0693

+ HMO D-SNP 、 PPO D-SNP

1-833-853-0864

🖨 或造訪 www.wellcare.com/NE

NEVADA

+ HMO 、 HMO C-SNP 、 PPO

☎ 1-833-854-4766

+ HMO D-SNP

☎ 1-833-717-0806

🖨 或造訪 www.wellcare.com/allwellNV

NEW MEXICO

+ HMO 、 PPO

☎ 1-833-543-0246

+ HMO D-SNP

☎ 1-844-810-7965

🖨 或造訪 www.wellcare.com/allwellNM

NEW YORK

+ HMO 、 HMO-POS 、 HMO D-SNP

☎ 1-800-247-1447

🖨 或造訪 www.wellcare.com/fidelisNY

OHIO

+ HMO 、 PPO

☎ 1-855-766-1851

+ HMO D-SNP, PPO D-SNP

☎ 1-866-389-7690

🖨 或造訪 www.wellcare.com/allwellOH

OKLAHOMA

+ HMO 、 PPO

☎ 1-833-853-0865

+ HMO D-SNP, PPO D-SNP

☎ 1-833-853-0866

🖨 或造訪 www.wellcare.com/OK

OREGON

+ HMO 、 PPO

☎ 1-888-445-8913

🖨 或造訪 www.wellcare.com/healthnetOR

+ HMO D-SNP

☎ 1-844-867-1156

🖨 或造訪 www.wellcare.com/trilliumOR

PENNSYLVANIA

+ HMO 、 PPO

☎ 1-855-766-1456

+ HMO D-SNP, PPO D-SNP

☎ 1-866-330-9368

🖨 或造訪 www.wellcare.com/allwellPA

SOUTH CAROLINA

+ HMO 、 HMO D-SNP

☎ 1-855-766-1497

🖨 或造訪 www.wellcare.com/allwellSC

TEXAS

+ HMO

☎ 1-844-796-6811

+ HMO D-SNP

☎ 1-877-935-8023

🖥 或造訪 www.wellcare.com/allwellTX

WISCONSIN

+ HMO D-SNP

☎ 1-877-935-8024

🖥 或造訪 www.wellcare.com/allwellWI

WASHINGTON

+ PPO

☎ 1-888-445-8913

🖥 或造訪 www.wellcare.com/healthnetOR

所有州的 TTY：711

服務時間

📅 10月1日至3月31日：週一至週日，上午8點至晚上8點

📅 4月1日至9月30日：週一至週五，上午8點至晚上8點

既有會員請注意：本處方集自去年起已變更。請查閱本文件以確定您服用的藥物仍包含在內。當本藥物清單 (處方集) 提到「我們」、「我方」或「我們的」時，均指 Wellcare。當本藥物清單 (處方集) 提到「計劃」或「我們的計劃」時，均指 Wellcare Giveback (HMO)、Wellcare Giveback Boost (HMO)、Wellcare Low Premium Open (PPO)、Wellcare No Premium (HMO)、Wellcare No Premium Open (PPO)、Wellcare No Premium Ruby (HMO)、Wellcare No Premium Select (HMO)、Wellcare Premium Ultra (HMO)。

本文件包含我們的計劃專用的藥物清單 (處方集)，最近更新日期為 12/01/2023。若需要更新的處方集，請與我們聯絡。我們的聯絡資訊與處方集的最新更新日期都列於首頁和封底。

通常，您必須使用網絡藥房才能享用您的處方藥福利。福利、處方集、藥房網絡和/或共付額/共同保險金可能在 2023 年 1 月 1 日變更，並在該年度當中不定時變動。

Wellcare Giveback (HMO)、Wellcare Giveback Boost (HMO)、Wellcare Low Premium Open (PPO)、Wellcare No Premium (HMO)、Wellcare No Premium Open (PPO)、Wellcare No Premium Ruby (HMO)、Wellcare No Premium Select (HMO)、Wellcare Premium Ultra (HMO) 處方集是什麼？

處方集是我們的計劃諮詢醫療保健服務提供者後選出的承保藥物清單，涵蓋所有我們認為高品質治療方案之處方治療所必須的藥物。只要藥物為醫療所必需、於計劃網絡藥房領取處方以及遵守其他計劃規定，我們的計劃通常承保在我們的處方集內列出的藥物。如需詳細資訊，了解如何領取處方藥，請檢閱您的承保證明。

處方集 (藥物清單) 會更改嗎？

大部分藥物承保變更於 1 月 1 日起生效，但我們可能會在一年當中增加或刪除藥物清單中的藥物、將藥物移至不同的費用分攤層級，或增加新的限制。進行這些變更時，我們必須遵守 Medicare 的規定。

今年可能對您造成影響的變更：在以下情況中，您將受到年度承保變更的影響：

- **新的副廠藥。**如果我們以列於相同或更低分攤費用層級，且限制相同或更低的新副廠藥替換原廠藥，我們可能立即將藥物清單上的原廠藥移除。此外，在加入新副廠藥時，我們可能會決定將原廠藥物保留在我們的藥物清單中，但會立即將其移至不同的分攤費用層級或加入新的限制。如果您目前正使用該原廠藥，我們可能未在進行變更前事先告知，但我們之後會提供您我們所做具體變更的相關資訊。
 - 如果我們做出這類變更，您或您的開立處方者可要求我們為您進行例外處理，繼續為您承保該原廠藥。我們向您提供的通知亦將包含例外處理申請方式資訊。您也可以在標題為「我該如何申請 Wellcare Giveback (HMO)、Wellcare Giveback Boost (HMO)、Wellcare Low Premium Open (PPO)、Wellcare No Premium (HMO)、Wellcare No Premium Open (PPO)、Wellcare No Premium Ruby (HMO)、Wellcare No Premium Select (HMO)、Wellcare Premium Ultra (HMO) 處方集例外處理？」的章節中找到相關資訊。
- **藥物遭下架。**若食品藥物管理局 (Food and Drug Administration, FDA) 認為我們的處方集上的某藥物不安全或製藥商將此藥物下架，我們將立刻將此藥物從我們的處方集上除名，並通知服用此藥物的會員。
- **其他變更。**我們可能實施會影響目前用藥之會員的其他變更。例如，我們可能增加不是新上市的副廠藥，以取代目前處方集上的原廠藥，或對原廠藥增加新的限制及/或移到不同的分攤費用層級。或者，我們可能基於新的臨床準則進行變更。若我們自我們的處方集移除藥物，或對某藥物新增事先授權、數量限制和/或階段療法限制 (或將某藥物移到較高的費用分攤層級)，我們必須在變更生效至少 30 天前，或在會員要求續配處方時，通知受影響的會員。且自當日起，會員即可拿到此藥物 30 天的用量。
 - 如果我們做出這類其他變更，您或您的開立處方者可要求我們為您進行例外處理，繼續為您承保該原廠藥。我們向您提供的通知亦將包含例外處理申請方式資訊。您也可以在標題為「我該如何申請 Wellcare Giveback (HMO)、Wellcare Giveback Boost (HMO)、Wellcare Low Premium Open (PPO)、Wellcare No Premium (HMO)、Wellcare No Premium Open (PPO)、Wellcare No Premium Ruby (HMO)、Wellcare No Premium Select (HMO)、Wellcare Premium Ultra (HMO) 處方集例外處理？」的章節中找到相關資訊。

如果您目前正在服用藥物，變更將不會對您造成影響。通常，如果您正在服用年初已被承保並在 2023 年處方集中的藥物，我們將不會在 2023 承保年度期間停止或減少該藥物的承保，除非出現上述情況。這代表在承保年度的剩餘時間內，正在使用這些藥物的會員仍然能夠以相同的分攤費用取得這些藥物，不會有新的限制。針對不會對您造成影響的變更，您今年將不會收到直接通知。然而在明年的 1 月 1 日，此類變更即會對您造成影響，請務必檢視藥物清單，以瞭解新福利年度的任何藥物變更。

隨附處方集最近更新日期為 12/01/2023。若要取得本計劃承保藥物的更新資訊，請聯絡我們。我們的聯絡資訊列於首頁與封底。

處方集將每月更新且公告於我們的網站上。若要取得更新版本的紙本處方集，或取得我們的計劃承保藥物相關資訊，請瀏覽我們的網站，或致電會員服務部，聯絡資訊位於封面和封底內頁。

如何使用處方集？

您可以用以下兩種方法在處方集中尋找您的藥物：

按病情

處方集從第 1 頁開始。本處方集內的藥物按其用於治療的疾病類型分類。例如，用於治療心臟疾病的藥物，會列在「心血管」類別下。如果您知道您的藥物用途，請在第 1 頁開始的清單中尋找該類別名稱。然後，在該類別名稱下尋找您的藥物。

按字母排序清單

如果您不能確定您該在哪個類別下尋找，您應從 INDEX-1 頁開始的索引中尋找您的藥物。索引為本文包含的所有藥物提供了按字母排序的清單。索引中包含原廠藥和學名藥。請在索引中尋找您的藥物。在藥物名稱旁，您會看到您可以找到承保資訊的頁碼。翻到索引中所列頁碼，並在清單首列內尋找您的藥物名稱。

甚麼是副廠藥？

我們的計劃同時承保原廠藥和副廠藥。副廠藥是 FDA 批准的藥物，具有與原廠藥相同的活性成分。通常，副廠藥的費用低於原廠藥。

我的承保範圍有什麼限制嗎？

一些承保藥物在承保範圍上可能有其他要求或限制。這些要求和限制可能包括：

- **事先授權**：我們的計劃要求您或您的醫師針對特定藥物取得事先授權。這表示您需要先得到我們的計劃核准才能領取處方藥。若您未取得核准，我們的計劃可不承保該藥物。
- **數量限制**：對於某些藥物，我們的計劃限制對此藥物所承保的數量。以 rizatriptan 5mg 為例，我們的計劃承保的每份處方之限額為 18 錠。這可能是對標準一個月或三個月供應量之外所提供的額外量。
- **階段療法**：在某些情況下，我們的計劃要求您先試用某種藥物治療您的疾病，然後才會承保治療相同疾病的另一種藥物。例如，如果藥物 A 和藥物 B 均可用於治療您的疾病，如果您不先嘗試使用藥物 A，我們的計劃可能不會承保藥物 B。如果藥物 A 對您無療效，那麼我們將會承保藥物 B。

您可以從第 1 頁開始的處方集查看您的藥物是否有其他要求或限制。您也可以瀏覽我們的網站，取得對特定承保藥物所加限制的更多資訊。我們已將關於事先授權與階段療法限制的文件公告於網路上。您也可要求我們將這些文件的副本寄給您。我們的聯絡資訊與處方集的最近更新日期都列於首頁和封底。

您可以要求我們的計劃針對這些限制或限額，或針對可治療您健康問題的其他或類似藥物清單，做出例外處理。請參閱第 v 頁的「我該如何申請 Wellcare Giveback (HMO)、Wellcare Giveback Boost (HMO)、Wellcare Low Premium Open (PPO)、Wellcare No Premium (HMO)、Wellcare No Premium Open (PPO)、Wellcare No Premium Ruby (HMO)、Wellcare No Premium Select (HMO)、Wellcare Premium Ultra (HMO) 的處方集例外處理？」章節，了解如何申請例外處理的資訊。

如果處方集上沒有我的藥物，我該怎麼辦？

如果此處方集 (承保藥物清單) 中沒有您的藥物，您應首先聯絡會員服務部並詢問是否承保您的藥物。

如果得知我們的計劃不承保您的藥物，您有兩個選項：

- 您可以向會員服務部索取我們的計劃承保之類似藥物清單。收到此清單後請拿給您的醫師，並請醫師開立我們的計劃所承保之類似藥物。
- 您可以要求我們的計劃進行例外處理並承保您的藥物。請參見以下資訊瞭解如何申請例外處理。

我該如何申請 Wellcare Giveback (HMO)、Wellcare Giveback Boost (HMO)、Wellcare Low Premium Open (PPO)、Wellcare No Premium (HMO)、Wellcare No Premium Open (PPO)、Wellcare No Premium Ruby (HMO)、Wellcare No Premium Select (HMO)、Wellcare Premium Ultra (HMO) 處方集例外處理？

您可要求我們的計劃針對我們的承保規定進行例外情況處理。對於數種類型的例外情況，您可以要求我們做出處理。

- 您可以要求我們承保您的藥物，即使它並不在我們的處方集中。若經核准，此藥物將以預先決定的費用分攤層級承保，您不得要求我們以更低的費用分攤層級提供此藥物。
- 只有當處方集內某藥物屬於專科層級，您才可以要求以更低的費用分攤層級來承保此藥物。如果獲得批准，將降低您必須支付的藥物費用。
- 您可以要求我們撤銷對於您的藥物的要求和限制。例如：對於某些藥物，我們的計劃限制對此藥物所承保的數量。如果您的藥物有數量限制，您可以要求我們撤銷該限制並承保較多的數量。

通常，我們的計劃將只在下列情況下才會核准您所要求的例外情況：若該計劃處方集上包括數種替代藥物、費用分攤較低藥物或額外的使用限制會對治療您的病況無效和／或可能對您造成不良的醫療效果。

您應該聯絡並要求我們就處方集、層級或使用限制例外情況做出初始承保決定。**您要求處方集、藥物層級或使用限制的例外情況時，應遞交支援您要求的開立處方者或醫師所提供的聲明。**通常，我們必須在收到開立處方者的支援聲明後，於 72 小時內做出決定。若您或您的醫師認為等候 72 小時才做決定對您的健康可能造成嚴重危害，您可以要求加快 (快速) 例外情況審核。若您的加快要求得到准許，我們必須在收到您醫師或其他開立處方者的支援聲明後 24 小時內告知您我們的決定。

在與我的醫師討論變更我的用藥或申請例外處理之前，我該怎麼做？

作為我們計劃的新會員或老會員，您服用的藥物可能未包含在我們的處方集中。或者，您所服用的藥物在我們的處方集中，但是您獲得它的條件有限制。例如，您可能需要事先獲得我們的授權，才可以抓您的處方藥。您應與您的醫師討論決定是否換為我們承保的合適藥物，或申請例外處理以是我們承保您服用的藥物。當您和您的醫師討論決定採取正確行動時，在您成為我們計劃會員的頭 90 天，在某些情況下我們可能承保您的藥物。

對於您不在我們處方集內的每種藥物，或您取得藥物的條件有限制，我們將會提供一個臨時 30 天的藥量。如果您處方開立的天數較短，我們將允許您多次續配處方，直到我們為您提供的藥量達到 30 天份上限為止。您最初 30 天的用藥量用完後，我們將不再對這些藥物付費，即便您成為該計劃的會員不到 90 天。

如果您是長期照護機構的住民，且需要未含在我們處方集上的藥物或如果您取得藥物的能力受到限制，但您已成為我們的計劃會員超過 90 天，在您申請處方集例外情況期間，我們將支付該藥物 31 天的緊急情況用量。

如果您發生照護層級改變 (例如長期照護設施的出院和住院)，您的醫師或藥房可以致電我們的提供者服務中心，要求一次性的例外處理。這項一次性的例外處理將提供最多 31 日的份量 (除非您的處方日數較短)。

詳細資訊

欲獲得有關您計劃的處方藥物承保的更多詳細資訊，請參閱您的承保證明及其他計劃材料。

如果您對我們的計劃有所疑問，請聯絡我們。我們的聯絡資訊與處方集的最近更新日期都列於首頁和封底。

若有關於 Medicare 處方藥承保的一般問題，請致電 1-800-MEDICARE (1-800-633-4227) 聯絡 Medicare。該專線每週 7 天，每天 24 小時提供服務。TTY 使用者應致電 1-877-486-2048。或瀏覽 <http://www.medicare.gov>。

我們計劃的處方集

以下處方集提供我們的計劃承保藥物的承保資訊。若您在清單上找不到您的藥物，請查詢從 INDEX-1 頁開始的索引。

表格第一欄所列的是藥物名稱。原廠藥以**大寫字母**表示 (如 **ELIQUIS**)，副廠藥則以斜體小寫字母表示 (如 *simvastatin*)。

您可透過要求/限制欄位中的資訊，瞭解我們的計劃對您藥物的承保是否有任何特殊要求。

- **GC** 代表承保缺口：僅適用於 *Wellcare No Premium (HMO) Nevada*、*Wellcare Low Premium Open (PPO) and Wellcare No Premium (HMO) Oklahoma*：我們在承保缺口階段提供此類處方藥的額外承保。若需此類承保的更多資訊，請參閱您的承保證明。
- **NT** 代表非 Part D：Medicare Prescription Drug 計劃通常不承保此處方藥。您配取本藥物處方時支付的金額不計入您的總藥物費用 (亦即，您支付的金額並無法協助您符合重大傷病承保的資格)。此外，如果您領取支付處方藥的額外補助，您無法取得此藥物的額外補助。
- **NM** 表示該藥物無法通過每月的郵寄服務福利提供。其註記於處方集的要求/限制欄中。對於處方集上大多數透過郵購服務取得的較低費用分攤的藥物，您可能得以取得超過一個月的份量。如需更多資訊，請參閱《承保證明》的第 5 章。
- **PA** 代表事先授權：詳細資訊請參閱第 IV 頁。
- **PA-NS** 代表首次用藥者事先授權：這意味著，如果此藥物是您第一次使用，您將需要得到我們的批准，才可以領取處方藥。如果投保時您正在服用此藥物，您無需滿足批准的條件。
- **B/D** 代表 Medicare B 或 D 承保：此藥物可能符合根據 Medicare Part B 或 Part D 付款的資格。在您根據處方取得此藥物之前，您 (或您的醫師) 必須向我們取得事先授權，以判定 Medicare Part D 是否承保此藥物。如果未獲得事先批准，我們可能無法承保此藥物。

- **QL** 代表數量限制：詳細資訊請參閱第 IV 頁。
- **LA** 是指限制獲得藥物。該處方藥可能只能在特定的藥房取得。如需更多資訊，請查閱您的藥房名錄，或致電會員服務部，電話號碼列於此處方集封面和封底內頁。
- **ST** 代表階段療法：詳細資訊請參閱第 IV 頁。
- **^** 代表藥物可能最多僅能提供 30 天的份量。

藥物層級共付額/共同保險金額

處方藥會分入六個層級之一。如要得知您的藥物屬於哪個層級，請參閱從第1頁開始的處方集「藥物層級」欄位。如需詳細瞭解您的處方藥自付費用，包括任何可能適用的自付額，請參閱您的承保證明和其他計劃資料。

- **層級 1 (首選副廠藥)** 包括首選副廠藥，可能包括一些原廠藥。
 - 首選共付額範圍：\$0 - \$7
 - 標準共付額範圍：\$0 - \$15
- **層級 2 (副廠藥)** 包括副廠藥，可能包括一些原廠藥。
 - 首選共付額範圍：\$0 - \$15
 - 標準共付額範圍：\$8 - \$20
- **層級 3 (首選原廠藥)** 包括首選原廠藥，可能包括一些副廠藥。
 - 首選共付額範圍：\$37 - \$42
 - 標準共付額：\$47
- **層級 4 (非首選藥物)** 包括非首選原廠和非首選副廠藥。
 - 首選共付額/共同保險金範圍：\$90 - \$95 / 43% - 48%
 - 標準共付額/共同保險金範圍：\$100 / 45% - 50%
- **層級 5 (專科層級)** 包括高費用原廠和副廠藥。在此層級的藥物不符合較低層級付款的例外資格。
 - 首選共同保險金範圍：25% - 33%
 - 標準共同保險金範圍：25% - 33%
- **層級 6 (所選照護藥品)** 包括一些通常用於治療特定慢性病或預防疾病 (疫苗) 的副廠藥和原廠藥。
 - 首選共付額：\$0
 - 標準共付額：\$0

請查閱您的承保證明或福利摘要，以了解您適用的共付額/共同保險與金額。

Table of Contents

中樞神經系統.....	3
免疫藥劑.....	22
內分泌及代謝.....	29
呼吸的.....	47
外用的.....	52
心血管.....	57
抗惡性腫瘤藥物.....	66
抗感染藥物.....	77
營養／補充劑.....	91
生殖泌尿道.....	95
眼用藥物.....	96
第五型磷酸二酯酶抑制劑.....	99
耳部.....	100
胃腸道.....	100
血液學.....	104
鎮痛藥.....	106
麻醉藥物.....	109

藥品名稱

藥物層級 規定／上限

中樞神經系統

偏頭痛

AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA; QL (1 ML per 30 days)
dihydroergotamine mesylate injection solution 1 mg/ml	5^	
dihydroergotamine mesylate nasal solution 4 mg/ml	5^	PA; QL (8 ML per 30 days)
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	5^	PA; QL (3 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	3	PA; QL (2 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	3	PA; QL (2 ML per 30 days)
ergotamine-caffeine oral tablet 1-100 mg	3	PA; QL (40 EA per 28 days)
naratriptan hcl oral tablet 1 mg, 2.5 mg	3	QL (12 EA per 30 days)
NURTEC ORAL TABLET DISPERSIBLE 75 MG	5^	PA; QL (16 EA per 30 days)
rizatriptan benzoate oral tablet 10 mg, 5 mg	3	QL (18 EA per 30 days)
rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg	3	QL (18 EA per 30 days)
sumatriptan nasal solution 20 mg/act	4	QL (12 EA per 30 days)
sumatriptan nasal solution 5 mg/act	4	QL (24 EA per 30 days)
sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg	2	GC; QL (12 EA per 30 days)
sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml	4	QL (9 ML per 30 days)
sumatriptan succinate refill subcutaneous solution cartridge 6 mg/0.5ml	4	QL (6 ML per 30 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	4	QL (6 ML per 30 days)
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml	4	QL (9 ML per 30 days)
sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml	4	QL (6 ML per 30 days)

您可以在本表的開頭處找到本表格的符號與縮寫資訊。已於 12/01/2023 更新

藥品名稱	藥物層級	規定／上限
zolmitriptan oral tablet 2.5 mg, 5 mg	4	QL (12 EA per 30 days)
zolmitriptan oral tablet dispersible 2.5 mg, 5 mg	4	QL (12 EA per 30 days)
其他		
AUSTEDO ORAL TABLET 12 MG, 9 MG	5^	PA; LA; QL (120 EA per 30 days)
AUSTEDO ORAL TABLET 6 MG	5^	PA; LA; QL (60 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG	5^	PA; QL (120 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 24 MG	5^	PA; QL (60 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	5^	PA; QL (90 EA per 30 days)
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG	5^	PA; QL (84 EA per 365 days)
GRALISE ORAL TABLET 300 MG	4	PA; QL (180 EA per 30 days)
GRALISE ORAL TABLET 450 MG	4	PA; QL (120 EA per 30 days)
GRALISE ORAL TABLET 600 MG	4	PA; QL (90 EA per 30 days)
GRALISE ORAL TABLET 750 MG, 900 MG	4	PA; QL (60 EA per 30 days)
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	5^	PA; LA; QL (30 EA per 30 days)
INGREZZA ORAL CAPSULE THERAPY PACK 40 & 80 MG	5^	PA; LA; QL (28 EA per 28 days)
lithium carbonate er oral tablet extended release 300 mg, 450 mg	2	GC
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg	1	GC
lithium carbonate oral tablet 300 mg	2	GC
LITHIUM ORAL SOLUTION 8 MEQ/5ML	4	
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 82.5 MG	3	PA; QL (90 EA per 30 days)
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 330 MG	3	PA; QL (60 EA per 30 days)
NUEDEXTA ORAL CAPSULE 20-10 MG	4	PA; QL (60 EA per 30 days)
pyridostigmine bromide oral tablet 60 mg	3	

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藥品名稱	藥物層級 規定／上限	
riluzole oral tablet 50 mg	4	
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	4	PA; QL (60 EA per 30 days)
SAVELLA TITRATION PACK ORAL 12.5 & 25 & 50 MG	4	PA
tetrabenazine oral tablet 12.5 mg	5 [^]	PA; QL (90 EA per 30 days)
tetrabenazine oral tablet 25 mg	5 [^]	PA; QL (120 EA per 30 days)
多發性硬化症藥物		
AUBAGIO ORAL TABLET 14 MG, 7 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
BETASERON SUBCUTANEOUS KIT 0.3 MG	5 [^]	PA-NS; QL (14 EA per 28 days)
dalfampridine er oral tablet extended release 12 hour 10 mg	3	PA
fingolimod hcl oral capsule 0.5 mg	5 [^]	PA-NS; QL (28 EA per 28 days)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	5 [^]	PA-NS; QL (30 ML per 30 days)
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	5 [^]	PA-NS; QL (12 ML per 28 days)
glatopa subcutaneous solution prefilled syringe 20 mg/ml	5 [^]	PA-NS; QL (30 ML per 30 days)
glatopa subcutaneous solution prefilled syringe 40 mg/ml	5 [^]	PA-NS; QL (12 ML per 28 days)
OCREVUS INTRAVENOUS SOLUTION 300 MG/10ML	5 [^]	PA-NS; LA
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG	5 [^]	PA-NS; LA; QL (14 EA per 7 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE 240 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE THERAPY PACK 120 & 240 MG	5 [^]	PA-NS; LA
VUMERITY ORAL CAPSULE DELAYED RELEASE 231 MG	5 [^]	PA-NS; LA; QL (120 EA per 30 days)
安眠藥		
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	3	QL (30 EA per 30 days)
DAYVIGO ORAL TABLET 10 MG, 5 MG	4	QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
doxepin hcl oral tablet 3 mg, 6 mg	3	QL (30 EA per 30 days)
tasimelteon oral capsule 20 mg	5^	PA; QL (30 EA per 30 days)
temazepam oral capsule 15 mg	4	PA; PA if 65 years and older; QL (60 EA per 30 days)
temazepam oral capsule 30 mg, 7.5 mg	4	PA; PA if 65 years and older; QL (30 EA per 30 days)
zolpidem tartrate oral tablet 10 mg, 5 mg	2	PA; GC; PA applies if 70 years and older after a 90 day supply in a calendar year; QL (30 EA per 30 days)
心理治療-各類		
acamprosate calcium oral tablet delayed release 333 mg	4	
buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg	3	PA; QL (90 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg	4	QL (60 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg	4	QL (90 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg	2	GC; QL (90 EA per 30 days)
bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg	3	
disulfiram oral tablet 250 mg, 500 mg	3	
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	2	GC
naloxone hcl injection solution cartridge 0.4 mg/ml	2	GC
naloxone hcl injection solution prefilled syringe 2 mg/2ml	2	GC
naloxone hcl nasal liquid 4 mg/0.1ml	3	
naltrexone hcl oral tablet 50 mg	3	
NICOTROL INHALATION INHALER 10 MG	4	
NICOTROL NS NASAL SOLUTION 10 MG/ML	4	

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藥品名稱	藥物層級 規定／上限	
varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 & 1 mg x 42	4	
varenicline tartrate oral tablet 0.5 mg, 1 mg	4	QL (56 EA per 28 days)
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG	5 [^]	
抗失智症		
donepezil hcl oral tablet 10 mg	1	GC
donepezil hcl oral tablet 5 mg	1	GC; QL (30 EA per 30 days)
donepezil hcl oral tablet dispersible 10 mg	2	GC
donepezil hcl oral tablet dispersible 5 mg	2	GC; QL (30 EA per 30 days)
galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg	3	QL (30 EA per 30 days)
galantamine hydrobromide oral solution 4 mg/ml	4	
galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg	3	QL (60 EA per 30 days)
memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg	4	PA; PA if < 30 yrs
memantine hcl oral solution 2 mg/ml	4	PA; PA if < 30 yrs
memantine hcl oral tablet 10 mg, 5 mg	3	PA; PA if < 30 yrs
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK 7 & 14 & 21 & 28 -10 MG	4	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG	4	
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg	3	QL (60 EA per 30 days)
rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr	4	QL (30 EA per 30 days)
抗帕金森藥物		
amantadine hcl oral capsule 100 mg	3	QL (120 EA per 30 days)
amantadine hcl oral solution 50 mg/5ml	3	
amantadine hcl oral tablet 100 mg	4	

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藥品名稱	藥物層級 規定／上限	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE 30 MG/3ML	5 [^]	PA; LA; QL (60 ML per 30 days)
apomorphine hcl subcutaneous solution cartridge 30 mg/3ml	5 [^]	PA; QL (60 ML per 30 days)
benztropine mesylate injection solution 1 mg/ml	4	
benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg	4	PA; PA if 70 years and older
bromocriptine mesylate oral capsule 5 mg	4	
bromocriptine mesylate oral tablet 2.5 mg	4	
carbidopa oral tablet 25 mg	4	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	2	GC
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	2	GC
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg	4	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	4	
entacapone oral tablet 200 mg	4	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR	4	
pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	4	
pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1	GC
rasagiline mesylate oral tablet 0.5 mg, 1 mg	4	QL (30 EA per 30 days)
ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	4	
ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	2	GC
selegiline hcl oral capsule 5 mg	3	

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藥品名稱	藥物層級	規定／上限
selegiline hcl oral tablet 5 mg	3	
trihexyphenidyl hcl oral solution 0.4 mg/ml	3	PA; PA if 70 years and older
trihexyphenidyl hcl oral tablet 2 mg, 5 mg	3	PA; PA if 70 years and older
抗抑鬱藥物		
amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	4	
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg	3	
AUVELITY ORAL TABLET EXTENDED RELEASE 45-105 MG	4	PA-NS; QL (60 EA per 30 days)
bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg	3	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	2	GC
bupropion hcl oral tablet 100 mg, 75 mg	3	
citalopram hydrobromide oral solution 10 mg/5ml	3	
citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg	1	GC
clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg	4	PA-NS
desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	4	
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	4	PA-NS; QL (30 EA per 30 days)
doxepin hcl oral capsule 10 mg, 100 mg, 25 mg, 50 mg, 75 mg	3	
doxepin hcl oral capsule 150 mg	4	
doxepin hcl oral concentrate 10 mg/ml	3	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG	4	PA-NS; QL (60 EA per 30 days)
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	GC; QL (60 EA per 30 days)
duloxetine hcl oral capsule delayed release particles 40 mg	4	QL (60 EA per 30 days)

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藥品名稱	藥物層級 規定／上限	
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR	5^	PA-NS; QL (30 EA per 30 days)
escitalopram oxalate oral solution 5 mg/5ml	4	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	1	GC
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG	4	PA-NS; QL (30 EA per 30 days)
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 40 MG	4	PA-NS; QL (60 EA per 30 days)
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG	4	PA-NS
fluoxetine hcl oral capsule 10 mg, 20 mg	1	GC
fluoxetine hcl oral capsule 40 mg	2	GC
fluoxetine hcl oral solution 20 mg/5ml	3	
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	2	GC
MARPLAN ORAL TABLET 10 MG	4	QL (180 EA per 30 days)
mirtazapine oral tablet 15 mg, 30 mg, 45 mg	2	GC
mirtazapine oral tablet 7.5 mg	3	
mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg	3	
nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	4	
nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg	2	GC
nortriptyline hcl oral solution 10 mg/5ml	4	
paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg	4	QL (60 EA per 30 days)
paroxetine hcl oral suspension 10 mg/5ml	4	QL (900 ML per 30 days)
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	2	GC
phenelzine sulfate oral tablet 15 mg	3	
protriptyline hcl oral tablet 10 mg, 5 mg	4	
sertraline hcl oral concentrate 20 mg/ml	3	

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藥品名稱	藥物層級	規定／上限
sertraline hcl oral tablet 100 mg, 25 mg, 50 mg	1	GC
tranylcypromine sulfate oral tablet 10 mg	4	
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	1	GC
trimipramine maleate oral capsule 100 mg	4	QL (60 EA per 30 days)
trimipramine maleate oral capsule 25 mg, 50 mg	4	QL (120 EA per 30 days)
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	4	QL (30 EA per 30 days)
venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg	2	GC
venlafaxine hcl oral tablet 100 mg	3	
venlafaxine hcl oral tablet 25 mg, 37.5 mg, 50 mg, 75 mg	2	GC
VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG	4	QL (30 EA per 30 days)
VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG	4	
vilazodone hcl oral tablet 10 mg, 20 mg, 40 mg	4	QL (30 EA per 30 days)
抗焦慮		
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	2	GC; QL (150 EA per 30 days)
bupirone hcl oral tablet 10 mg, 15 mg, 5 mg	2	GC
bupirone hcl oral tablet 30 mg, 7.5 mg	3	
fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg	3	
lorazepam injection solution 2 mg/ml, 4 mg/ml	2	GC
lorazepam intensol oral concentrate 2 mg/ml	3	QL (150 ML per 30 days)
lorazepam oral concentrate 2 mg/ml	3	QL (150 ML per 30 days)
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	2	GC; QL (150 EA per 30 days)
抗精神病藥物		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG	5^	QL (1 EA per 28 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG	5^	QL (1 EA per 28 days)
aripiprazole oral solution 1 mg/ml	4	QL (900 ML per 30 days)
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	4	QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
aripiprazole oral tablet dispersible 10 mg, 15 mg	5 [^]	QL (60 EA per 30 days)
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML	5 [^]	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML	5 [^]	QL (3.9 ML per 56 days)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 441 MG/1.6ML	5 [^]	QL (1.6 ML per 28 days)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 662 MG/2.4ML	5 [^]	QL (2.4 ML per 28 days)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 882 MG/3.2ML	5 [^]	QL (3.2 ML per 28 days)
asenapine maleate sublingual tablet sublingual 10 mg, 2.5 mg, 5 mg	4	QL (60 EA per 30 days)
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	4	QL (30 EA per 30 days)
chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml	4	
CHLORPROMAZINE HCL ORAL CONCENTRATE 100 MG/ML, 30 MG/ML	4	
chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg	4	
clozapine oral tablet 100 mg	4	QL (270 EA per 30 days)
clozapine oral tablet 200 mg	4	QL (120 EA per 30 days)
clozapine oral tablet 25 mg, 50 mg	3	
clozapine oral tablet dispersible 100 mg	4	PA-NS; QL (270 EA per 30 days)
clozapine oral tablet dispersible 12.5 mg, 25 mg	4	PA-NS
clozapine oral tablet dispersible 150 mg	4	PA-NS; QL (180 EA per 30 days)
clozapine oral tablet dispersible 200 mg	5 [^]	PA-NS; QL (120 EA per 30 days)
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	4	PA-NS; QL (60 EA per 30 days)
FANAPT TITRATION PACK ORAL TABLET 1 & 2 & 4 & 6 MG	4	PA-NS
fluphenazine decanoate injection solution 25 mg/ml	4	
fluphenazine hcl injection solution 2.5 mg/ml	4	

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藥品名稱	藥物層級	規定／上限
fluphenazine hcl oral concentrate 5 mg/ml	4	
fluphenazine hcl oral elixir 2.5 mg/5ml	4	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	4	
haloperidol decanoate intramuscular solution 100 mg/ml, 100 mg/ml 1 ml, 50 mg/ml, 50 mg/ml(1ml)	4	
haloperidol lactate injection solution 5 mg/ml	3	
haloperidol lactate oral concentrate 2 mg/ml	3	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg	3	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML	5^	QL (3.5 ML per 180 days)
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1560 MG/5ML	5^	QL (5 ML per 180 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML	5^	QL (0.75 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 156 MG/ML	5^	QL (1 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 234 MG/1.5ML	5^	QL (1.5 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	4	QL (0.25 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 78 MG/0.5ML	5^	QL (0.5 ML per 28 days)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML	5^	QL (0.88 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 410 MG/1.32ML	5^	QL (1.32 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 546 MG/1.75ML	5^	QL (1.75 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 819 MG/2.63ML	5^	QL (2.63 ML per 90 days)
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	4	QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
LATUDA ORAL TABLET 80 MG	4	QL (60 EA per 30 days)
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg	3	
lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg	4	QL (30 EA per 30 days)
lurasidone hcl oral tablet 80 mg	4	QL (60 EA per 30 days)
molindone hcl oral tablet 10 mg, 25 mg, 5 mg	4	
NUPLAZID ORAL CAPSULE 34 MG	4	PA-NS; LA; QL (30 EA per 30 days)
NUPLAZID ORAL TABLET 10 MG	4	PA-NS; LA; QL (30 EA per 30 days)
olanzapine intramuscular solution reconstituted 10 mg	4	QL (3 EA per 1 day)
olanzapine oral tablet 10 mg, 2.5 mg, 5 mg	3	QL (60 EA per 30 days)
olanzapine oral tablet 15 mg, 20 mg, 7.5 mg	3	QL (30 EA per 30 days)
olanzapine oral tablet dispersible 10 mg	4	QL (60 EA per 30 days)
olanzapine oral tablet dispersible 15 mg, 20 mg, 5 mg	4	QL (30 EA per 30 days)
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	4	QL (30 EA per 30 days)
paliperidone er oral tablet extended release 24 hour 6 mg	4	QL (60 EA per 30 days)
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	4	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG	5 [^]	QL (1 EA per 30 days)
pimozide oral tablet 1 mg, 2 mg	4	
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg	4	PA-NS; QL (30 EA per 30 days)
quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg	4	PA-NS; QL (60 EA per 30 days)
quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	3	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG	4	QL (60 EA per 30 days)
REXULTI ORAL TABLET 3 MG, 4 MG	4	QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG, 25 MG	4	QL (2 EA per 28 days)
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 37.5 MG, 50 MG	5^	QL (2 EA per 28 days)
risperidone oral solution 1 mg/ml	3	QL (240 ML per 30 days)
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	2	GC
risperidone oral tablet dispersible 0.25 mg, 0.5 mg	4	QL (90 EA per 30 days)
risperidone oral tablet dispersible 1 mg, 2 mg, 3 mg	4	QL (60 EA per 30 days)
risperidone oral tablet dispersible 4 mg	4	QL (120 EA per 30 days)
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR	4	QL (30 EA per 30 days)
thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg	3	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg	4	
trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg	3	
VERSACLOZ ORAL SUSPENSION 50 MG/ML	4	PA-NS; QL (600 ML per 30 days)
VRAYLAR ORAL CAPSULE 1.5 MG	4	QL (60 EA per 30 days)
VRAYLAR ORAL CAPSULE 3 MG, 4.5 MG, 6 MG	4	QL (30 EA per 30 days)
VRAYLAR ORAL CAPSULE THERAPY PACK 1.5 & 3 MG	4	
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	4	QL (60 EA per 30 days)
ziprasidone mesylate intramuscular solution reconstituted 20 mg	4	QL (6 EA per 3 days)
ZYPREXA RELPREV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	4	PA-NS; QL (2 EA per 28 days)
ZYPREXA RELPREV INTRAMUSCULAR SUSPENSION RECONSTITUTED 300 MG	5^	PA-NS; QL (2 EA per 28 days)
ZYPREXA RELPREV INTRAMUSCULAR SUSPENSION RECONSTITUTED 405 MG	5^	PA-NS; QL (1 EA per 28 days)
抗驚厥藥物		
APTOM ORAL TABLET 200 MG, 400 MG	5^	QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
APTIOM ORAL TABLET 600 MG, 800 MG	5 [^]	QL (60 EA per 30 days)
BRIVIACT INTRAVENOUS SOLUTION 50 MG/5ML	4	PA-NS
BRIVIACT ORAL SOLUTION 10 MG/ML	5 [^]	PA-NS; QL (600 ML per 30 days)
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	5 [^]	PA-NS; QL (60 EA per 30 days)
carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg	4	
carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg	4	
carbamazepine oral suspension 100 mg/5ml	4	
carbamazepine oral tablet 200 mg	3	
carbamazepine oral tablet chewable 100 mg	3	
CELONTIN ORAL CAPSULE 300 MG	4	
clobazam oral suspension 2.5 mg/ml	4	PA-NS; QL (480 ML per 30 days)
clobazam oral tablet 10 mg, 20 mg	4	PA-NS; QL (60 EA per 30 days)
clonazepam oral tablet 0.5 mg, 1 mg	2	GC; QL (90 EA per 30 days)
clonazepam oral tablet 2 mg	2	GC; QL (300 EA per 30 days)
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	3	QL (90 EA per 30 days)
clonazepam oral tablet dispersible 2 mg	3	QL (300 EA per 30 days)
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	4	PA-NS; PA if 65 years and older; QL (180 EA per 30 days)
DIACOMIT ORAL CAPSULE 250 MG	5 [^]	PA-NS; LA; QL (360 EA per 30 days)
DIACOMIT ORAL CAPSULE 500 MG	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
DIACOMIT ORAL PACKET 250 MG	5 [^]	PA-NS; LA; QL (360 EA per 30 days)
DIACOMIT ORAL PACKET 500 MG	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
diazepam injection solution 5 mg/ml	4	
diazepam intensol oral concentrate 5 mg/ml	3	PA-NS; PA if 65 years and older; QL (240 ML per 30 days)
diazepam oral solution 5 mg/5ml	3	PA-NS; PA if 65 years and older; QL (1200 ML per 30 days)

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藥品名稱	藥物層級	規定／上限
diazepam oral tablet 10 mg, 2 mg, 5 mg	2	PA-NS; GC; PA if 65 years and older; QL (120 EA per 30 days)
diazepam rectal gel 10 mg, 2.5 mg, 20 mg	4	
DILANTIN INFATABS ORAL TABLET CHEWABLE 50 MG	4	
DILANTIN ORAL CAPSULE 100 MG, 30 MG	4	
DILANTIN ORAL SUSPENSION 125 MG/5ML	4	
divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg	3	
divalproex sodium oral capsule delayed release sprinkle 125 mg	4	
divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg	3	
EPIDIOLEX ORAL SOLUTION 100 MG/ML	5 [^]	PA-NS; LA; QL (600 ML per 30 days)
epitol oral tablet 200 mg	3	
EPRONTIA ORAL SOLUTION 25 MG/ML	4	PA-NS; QL (480 ML per 30 days)
ethosuximide oral capsule 250 mg	4	
ethosuximide oral solution 250 mg/5ml	3	
felbamate oral suspension 600 mg/5ml	5 [^]	
felbamate oral tablet 400 mg, 600 mg	4	
FINTEPLA ORAL SOLUTION 2.2 MG/ML	5 [^]	PA-NS; LA; QL (360 ML per 30 days)
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	5 [^]	PA-NS; QL (720 ML per 30 days)
FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG	5 [^]	PA-NS; QL (30 EA per 30 days)
FYCOMPA ORAL TABLET 2 MG	4	PA-NS; QL (60 EA per 30 days)
gabapentin oral capsule 100 mg, 300 mg, 400 mg	2	GC; QL (180 EA per 30 days)
gabapentin oral solution 250 mg/5ml, 300 mg/6ml	3	QL (2160 ML per 30 days)
gabapentin oral tablet 600 mg	2	GC; QL (180 EA per 30 days)
gabapentin oral tablet 800 mg	2	GC; QL (120 EA per 30 days)
lacosamide intravenous solution 200 mg/20ml	5 [^]	
lacosamide oral solution 10 mg/ml	4	QL (1200 ML per 30 days)

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藥品名稱	藥物層級	規定／上限
lacosamide oral tablet 100 mg, 150 mg, 200 mg	4	QL (60 EA per 30 days)
lacosamide oral tablet 50 mg	4	QL (120 EA per 30 days)
lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg	4	
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	1	GC
lamotrigine oral tablet chewable 25 mg, 5 mg	3	
lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg	4	
levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg	3	
levetiracetam in nacl intravenous solution 1000 mg/100ml, 1500 mg/100ml, 500 mg/100ml	4	
levetiracetam intravenous solution 500 mg/5ml	4	
levetiracetam oral solution 100 mg/ml	3	
levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg	3	
methsuximide oral capsule 300 mg	4	
NAYZILAM NASAL SOLUTION 5 MG/0.1ML	4	
oxcarbazepine oral suspension 300 mg/5ml	4	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	3	
phenobarbital oral elixir 20 mg/5ml	4	PA-NS; PA if 70 years and older
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	3	PA-NS; PA if 70 years and older
phenobarbital sodium injection solution 130 mg/ml, 65 mg/ml	4	PA-NS; PA if 70 years and older
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	2	GC
phenytoin oral suspension 125 mg/5ml	3	
phenytoin oral tablet chewable 50 mg	3	
phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg	3	
phenytoin sodium injection solution 50 mg/ml	3	

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藥品名稱	藥物層級	規定／上限
pregabalin oral capsule 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	3	QL (120 EA per 30 days)
pregabalin oral capsule 200 mg	3	QL (90 EA per 30 days)
pregabalin oral capsule 225 mg, 300 mg	3	QL (60 EA per 30 days)
pregabalin oral solution 20 mg/ml	4	QL (900 ML per 30 days)
primidone oral tablet 125 mg, 250 mg, 50 mg	2	GC
roweepra oral tablet 500 mg	3	
rufinamide oral suspension 40 mg/ml	5^	PA-NS; QL (2400 ML per 30 days)
rufinamide oral tablet 200 mg	4	PA-NS; QL (480 EA per 30 days)
rufinamide oral tablet 400 mg	5^	PA-NS; QL (240 EA per 30 days)
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 1000 MG	4	QL (90 EA per 30 days)
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG	4	QL (360 EA per 30 days)
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 500 MG	4	QL (180 EA per 30 days)
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 750 MG	4	QL (120 EA per 30 days)
subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg	1	GC
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG	5^	PA-NS; QL (60 EA per 30 days)
tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg	4	
topiramate oral capsule sprinkle 15 mg, 25 mg	3	
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	2	GC
valproate sodium intravenous solution 100 mg/ml	4	
valproic acid oral capsule 250 mg	3	
valproic acid oral solution 250 mg/5ml	3	
VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML	4	
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 7.5 MG/0.1ML	4	
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 10 MG/0.1ML	4	

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藥品名稱	藥物層級 規定／上限	
VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML	4	
vigabatrin oral packet 500 mg	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
vigabatrin oral tablet 500 mg	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
vigadrone oral packet 500 mg	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
vigadrone oral tablet 500 mg	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
VIMPAT ORAL SOLUTION 10 MG/ML	5 [^]	QL (1200 ML per 30 days)
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG	5 [^]	QL (56 EA per 28 days)
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK 150 & 200 MG	5 [^]	QL (56 EA per 28 days)
XCOPRI ORAL TABLET 100 MG, 50 MG	5 [^]	QL (30 EA per 30 days)
XCOPRI ORAL TABLET 150 MG, 200 MG	5 [^]	QL (60 EA per 30 days)
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG	4	QL (28 EA per 28 days)
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X 200 MG, 14 X 50 MG & 14 X 100 MG	5 [^]	QL (28 EA per 28 days)
ZONISADE ORAL SUSPENSION 100 MG/5ML	4	PA-NS; QL (900 ML per 30 days)
zonisamide oral capsule 100 mg, 25 mg, 50 mg	2	GC
ZTALMY ORAL SUSPENSION 50 MG/ML	5 [^]	PA-NS; LA; QL (1100 ML per 30 days)
注意力缺陷多动症		
amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg	4	PA; QL (30 EA per 30 days)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	3	PA; QL (60 EA per 30 days)
amphetamine-dextroamphetamine oral tablet 20 mg	3	PA; QL (90 EA per 30 days)
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg	4	QL (120 EA per 30 days)
atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg	4	QL (30 EA per 30 days)
atomoxetine hcl oral capsule 40 mg	4	QL (60 EA per 30 days)
dexmethylphenidate hcl oral tablet 10 mg	3	PA; QL (60 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
dexmethylphenidate hcl oral tablet 2.5 mg, 5 mg	3	PA; QL (120 EA per 30 days)
guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 4 mg	3	PA; PA if 70 years and older; QL (30 EA per 30 days)
guanfacine hcl er oral tablet extended release 24 hour 3 mg	3	PA; PA if 70 years and older; QL (60 EA per 30 days)
lisdexamfetamine dimesylate oral capsule 10 mg, 20 mg, 30 mg	4	PA; QL (60 EA per 30 days)
lisdexamfetamine dimesylate oral capsule 40 mg, 50 mg, 60 mg, 70 mg	4	PA; QL (30 EA per 30 days)
lisdexamfetamine dimesylate oral tablet chewable 10 mg, 20 mg, 30 mg	4	PA; QL (60 EA per 30 days)
lisdexamfetamine dimesylate oral tablet chewable 40 mg, 50 mg, 60 mg	4	PA; QL (30 EA per 30 days)
metadate er oral tablet extended release 20 mg	4	PA; QL (90 EA per 30 days)
methylphenidate hcl er oral tablet extended release 10 mg, 20 mg	4	PA; QL (90 EA per 30 days)
methylphenidate hcl oral solution 10 mg/5ml	4	PA; QL (900 ML per 30 days)
methylphenidate hcl oral solution 5 mg/5ml	4	PA; QL (1800 ML per 30 days)
methylphenidate hcl oral tablet 10 mg, 5 mg	3	PA; QL (180 EA per 30 days)
methylphenidate hcl oral tablet 20 mg	3	PA; QL (90 EA per 30 days)
methylphenidate hcl oral tablet chewable 10 mg, 2.5 mg, 5 mg	4	PA; QL (180 EA per 30 days)
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG	4	PA; QL (60 EA per 30 days)
VYVANSE ORAL CAPSULE 40 MG, 50 MG, 60 MG, 70 MG	4	PA; QL (30 EA per 30 days)
VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG	4	PA; QL (60 EA per 30 days)
VYVANSE ORAL TABLET CHEWABLE 40 MG, 50 MG, 60 MG	4	PA; QL (30 EA per 30 days)
發作性嗜睡症／猝倒		
armodafinil oral tablet 150 mg, 200 mg, 250 mg	3	PA; QL (30 EA per 30 days)
armodafinil oral tablet 50 mg	3	PA; QL (60 EA per 30 days)
modafinil oral tablet 100 mg	4	PA; QL (30 EA per 30 days)

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藥品名稱	藥物層級 規定／上限	
modafinil oral tablet 200 mg	4	PA; QL (60 EA per 30 days)
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	5^	PA; LA; QL (540 ML per 30 days)
XYREM ORAL SOLUTION 500 MG/ML	5^	PA; LA; QL (540 ML per 30 days)
肌肉骨骼治療藥物		
baclofen oral tablet 10 mg, 20 mg, 5 mg	3	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	2	PA; GC; PA if 70 years and older
dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg	4	
tizanidine hcl oral tablet 2 mg, 4 mg	2	GC
免疫藥劑		
免疫抑制劑		
azathioprine oral tablet 50 mg	3	B/D
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG	5^	PA; LA
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML	5^	PA; LA; QL (8 ML per 28 days)
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML	5^	PA; LA; QL (8 ML per 28 days)
cyclosporine intravenous solution 50 mg/ml	4	B/D
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	4	B/D
cyclosporine modified oral solution 100 mg/ml	4	B/D
cyclosporine oral capsule 100 mg, 25 mg	4	B/D
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	5^	B/D
gengraf oral capsule 100 mg, 25 mg	4	B/D
gengraf oral solution 100 mg/ml	4	B/D
mycophenolate mofetil oral capsule 250 mg	3	B/D
mycophenolate mofetil oral suspension reconstituted 200 mg/ml	5^	B/D
mycophenolate mofetil oral tablet 500 mg	3	B/D

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藥品名稱	藥物層級 規定／上限	
mycophenolate sodium oral tablet delayed release 180 mg, 360 mg	4	B/D
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED 250 MG	5 [^]	B/D
PROGRAF ORAL PACKET 0.2 MG, 1 MG	4	B/D
REZUROCK ORAL TABLET 200 MG	5 [^]	PA; LA
SANDIMMUNE ORAL SOLUTION 100 MG/ML	4	B/D
sirolimus oral solution 1 mg/ml	5 [^]	B/D
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	4	B/D
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	4	B/D
免疫球蛋白		
BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML	5 [^]	PA; LA
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 2.5 GM/50ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	5 [^]	PA
GAMASTAN INTRAMUSCULAR INJECTABLE	4	B/D; LA
GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	5 [^]	PA
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM	5 [^]	PA
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	5 [^]	PA
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	5 [^]	PA; LA
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML	5 [^]	PA
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, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML	5 [^]	PA

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藥品名稱	藥物層級 規定／上限	
PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	5 [^]	PA
PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML	5 [^]	PA
免疫調節劑		
ACTIMMUNE SUBCUTANEOUS SOLUTION 2000000 UNIT/0.5ML	5 [^]	PA-NS; LA
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG	5 [^]	PA; LA
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT, 18000000 UNIT, 50000000 UNIT	5 [^]	B/D; LA
疫苗		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED 120 MCG/0.5ML	6	NM; IRA \$0 for age 60 and older or pregnant during 32-36 weeks
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	6	NM
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 (PREFILLED SYRINGE), 5-2-15.5 LF-MCG/0.5	6	NM
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED 120 MCG/0.5ML	6	NM; IRA \$0 for age 60 and older only
BCG VACCINE INJECTION SOLUTION RECONSTITUTED 50 MG	3	NM
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	6	NM
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	6	NM
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5-2.5-18.5 LF-MCG/0.5	6	NM
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	6	NM
DENGVAXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED	6	NM
DIPHTHERIA-TETANUS TOXOIDS DT INTRAMUSCULAR SUSPENSION 25-5 LFU/0.5ML	6	B/D; NM

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藥品名稱	藥物層級	規定／上限
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	6	B/D; NM
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/0.5ML, 20 MCG/ML	6	B/D; NM
GARDASIL 9 INTRAMUSCULAR SUSPENSION	6	NM
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	6	NM
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	6	NM
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 20 MCG/0.5ML	6	B/D; NM
HIBERIX INJECTION SOLUTION RECONSTITUTED 10 MCG	6	NM
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED 2.5 UNIT/ML	6	B/D; NM
INFANRIX INTRAMUSCULAR SUSPENSION 25-58-10	6	NM
IPOL INJECTION INJECTABLE	6	NM
IXIARO INTRAMUSCULAR SUSPENSION	6	NM
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	6	NM
MENACTRA INTRAMUSCULAR SOLUTION	6	NM
MENQUADFI INTRAMUSCULAR SOLUTION	6	NM
MENVEO INTRAMUSCULAR SOLUTION	6	NM
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	6	NM
M-M-R II INJECTION SOLUTION RECONSTITUTED	6	NM
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	6	NM
PEDVAX HIB INTRAMUSCULAR SUSPENSION 7.5 MCG/0.5ML	6	NM
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	6	NM
PREHEVBRIO INTRAMUSCULAR SUSPENSION 10 MCG/ML	6	B/D; NM

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藥品名稱	藥物層級 規定／上限	
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	6	NM
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	6	NM
QUADRACEL INTRAMUSCULAR SUSPENSION , (58 UNT/ML)	6	NM
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	6	NM
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	6	B/D; NM
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	6	B/D; NM
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/ML, 5 MCG/0.5ML	6	B/D; NM
ROTARIX ORAL SUSPENSION	6	NM
ROTARIX ORAL SUSPENSION RECONSTITUTED	6	NM
ROTATEQ ORAL SOLUTION	6	NM
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	6	NM; A third dose may be considered in post-transplant members (PA required); QL (2 EA per 999 days)
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML	6	B/D; NM
TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU, 5-2 LFU (INJECTION)	6	B/D; NM
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1.2 MCG/0.25ML, 2.4 MCG/0.5ML	6	NM
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	6	NM
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 720-20 ELU-MCG/ML	6	NM
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	6	NM
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 25 MCG/0.5ML	6	NM

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VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 25 UNIT/0.5ML 0.5 ML, 50 UNIT/ML, 50 UNIT/ML 1 ML	6	NM
VARIVAX SUBCUTANEOUS INJECTABLE 1350 PFU/0.5ML	6	NM
YF-VAX SUBCUTANEOUS INJECTABLE , (2.5 ML IN 1 VIAL, MULTI-DOSE)	6	NM
疾病修飾抗風濕病藥物 (DMARDS)		
hydroxychloroquine sulfate oral tablet 200 mg	1	GC
leflunomide oral tablet 10 mg, 20 mg	3	QL (30 EA per 30 days)
methotrexate sodium oral tablet 2.5 mg	1	GC
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	4	
XATMEP ORAL SOLUTION 2.5 MG/ML	4	
自體免疫藥劑		
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML, 300 MG/2ML	5 [^]	PA
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML, 200 MG/1.14ML, 300 MG/2ML	5 [^]	PA
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML	5 [^]	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	5 [^]	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML	5 [^]	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED 25 MG	5 [^]	PA; QL (16 EA per 28 days)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML	5 [^]	PA; QL (8 ML per 28 days)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	5 [^]	PA
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	5 [^]	PA; QL (6 EA per 28 days)

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藥品名稱	藥物層級	規定／上限
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	5^	PA; QL (4 EA per 28 days)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	5^	PA
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	5^	PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	5^	PA
HUMIRA PEN-PSOR/UEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML	5^	PA
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML	5^	PA; QL (2 EA per 28 days)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML, 40 MG/0.8ML	5^	PA; QL (6 EA per 28 days)
INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	5^	PA; LA
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML	5^	PA; QL (2.28 ML per 28 days)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML	5^	PA; QL (2.28 ML per 28 days)
OTEZLA ORAL TABLET 30 MG	5^	PA; QL (60 EA per 30 days)
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG	5^	PA; QL (110 EA per 365 days)
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	5^	PA; LA
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	5^	PA; LA
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG	5^	PA; QL (30 EA per 30 days)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 45 MG	5^	PA; QL (168 EA per 365 days)
SKYRIZI INTRAVENOUS SOLUTION 600 MG/10ML	5^	PA; QL (60 ML per 365 days)

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藥品名稱	藥物層級 規定／上限	
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	5 [^]	PA; QL (6 ML per 365 days)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	5 [^]	PA; QL (1.2 ML per 56 days)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	5 [^]	PA; QL (2.4 ML per 56 days)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	5 [^]	PA; QL (6 ML per 365 days)
STELARA INTRAVENOUS SOLUTION 130 MG/26ML	5 [^]	PA; LA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	5 [^]	PA; LA; QL (0.5 ML per 28 days)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	5 [^]	PA; QL (0.5 ML per 28 days)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	5 [^]	PA; QL (1 ML per 28 days)
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML	5 [^]	PA; LA; QL (3 ML per 28 days)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML	5 [^]	PA; LA; QL (3 ML per 28 days)
XELJANZ ORAL SOLUTION 1 MG/ML	5 [^]	PA; QL (480 ML per 24 days)
XELJANZ ORAL TABLET 10 MG, 5 MG	5 [^]	PA; QL (60 EA per 30 days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG	5 [^]	PA; QL (30 EA per 30 days)
內分泌及代謝		
其他		
ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML	5 [^]	PA; LA
betaine oral powder	5 [^]	LA
cabergoline oral tablet 0.5 mg	3	
carglumic acid oral tablet soluble 200 mg	5 [^]	PA; LA
CERDELGA ORAL CAPSULE 84 MG	5 [^]	PA; LA
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	5 [^]	PA; LA
cinacalcet hcl oral tablet 30 mg	4	B/D; QL (60 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
cinacalcet hcl oral tablet 60 mg	5 [^]	B/D; QL (60 EA per 30 days)
cinacalcet hcl oral tablet 90 mg	5 [^]	B/D; QL (120 EA per 30 days)
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	4	PA; LA
desmopressin ace spray refrig nasal solution 0.01 %	4	
desmopressin acetate injection solution 4 mcg/ml	5 [^]	
desmopressin acetate oral tablet 0.1 mg, 0.2 mg	3	
desmopressin acetate pf injection solution 4 mcg/ml	5 [^]	
desmopressin acetate spray nasal solution 0.01 %	4	
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG	5 [^]	PA; LA
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG	5 [^]	PA
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG	5 [^]	PA
INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML	5 [^]	PA; LA
javygtor oral packet 100 mg, 500 mg	5 [^]	PA; LA
javygtor oral tablet 100 mg	5 [^]	PA; LA
KORLYM ORAL TABLET 300 MG	5 [^]	PA; LA
levocarnitine oral solution 1 gm/10ml	4	B/D
levocarnitine oral tablet 330 mg	4	B/D
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED 50 MG	5 [^]	PA; LA
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG	5 [^]	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED), 30 MG	5 [^]	PA
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT 45 MG	5 [^]	PA
miglustat oral capsule 100 mg	5 [^]	PA; QL (90 EA per 30 days)
NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML	5 [^]	PA; LA

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藥品名稱	藥物層級	規定／上限
nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg	5 [^]	PA
octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml	4	PA
octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml	5 [^]	PA
octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml	4	PA
octreotide acetate subcutaneous solution prefilled syringe 500 mcg/ml	5 [^]	PA
raloxifene hcl oral tablet 60 mg	2	GC
sapropterin dihydrochloride oral packet 100 mg, 500 mg	5 [^]	PA
sapropterin dihydrochloride oral tablet 100 mg	5 [^]	PA
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML	5 [^]	PA; LA
sodium phenylbutyrate oral powder 3 gm/tsp	5 [^]	PA
sodium phenylbutyrate oral tablet 500 mg	5 [^]	PA
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML	5 [^]	PA-NS; LA
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	5 [^]	PA; LA
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	5 [^]	PA; LA
子宮內膜異位症		
danazol oral capsule 100 mg, 200 mg, 50 mg	4	
SYNAREL NASAL SOLUTION 2 MG/ML	5 [^]	
抗糖尿病藥物，胰島素		
ALCOHOL SWABS PAD 70 %	3	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	3	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	3	
FIASP INJECTION SOLUTION 100 UNIT/ML	3	

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藥品名稱	藥物層級	規定／上限
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	3	
FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	3	B/D
GAUZE PADS 2" X 2" PAD 2"X2"	3	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML	5 [^]	B/D
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML	5 [^]	
INSULIN PEN NEEDLE 29G X 12MM	2	GC
INSULIN SYRINGE (DISP) U-100 0.3 ML 29G 0.3 ML	2	GC
INSULIN SYRINGE (DISP) U-100 1 ML 29G X 1/2" 1 ML	2	GC
INSULIN SYRINGE (DISP) U-100 1/2 ML 28G X 1/2" 0.5 ML	2	GC
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	3	
LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
LEVEMIR FLEXPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR 100 UNIT/ML	3	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	3	
LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
NEEDLES, INSULIN DISP., SAFETY 29G X 1/2" 1 ML	2	GC
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	3	(brand RELION not covered)
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70- 30) 100 UNIT/ML	3	(brand RELION not covered)
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML	3	(brand RELION not covered)
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	3	(brand RELION not covered)
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN- INJECTOR 100 UNIT/ML	3	(brand RELION not covered)

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藥品名稱	藥物層級	規定／上限
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML	3	(brand RELION not covered)
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	3	(brand RELION not covered)
NOVOLOG INJECTION SOLUTION 100 UNIT/ML	3	(brand RELION not covered)
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	3	(brand RELION not covered)
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML	3	(brand RELION not covered)
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	3	(brand RELION not covered)
OMNIPOD 5 G6 INTRO (GEN 5) KIT	4	PA; QL (1 EA per 365 days)
OMNIPOD 5 G6 POD (GEN 5)	4	PA; QL (15 EA per 30 days)
OMNIPOD CLASSIC PDM (GEN 3) KIT	4	PA; QL (1 EA per 365 days)
OMNIPOD CLASSIC PODS (GEN 3)	4	PA; QL (15 EA per 30 days)
OMNIPOD DASH INTRO (GEN 4) KIT	4	PA; QL (1 EA per 365 days)
OMNIPOD DASH PODS (GEN 4)	4	PA; QL (15 EA per 30 days)
OMNIPOD GO KIT 10 UNIT/24HR, 15 UNIT/24HR, 20 UNIT/24HR, 25 UNIT/24HR, 30 UNIT/24HR, 35 UNIT/24HR, 40 UNIT/24HR	4	PA; QL (15 EA per 30 days)
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML	3	QL (15 ML per 25 days)
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	3	
TRESIBA SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
V-GO 20 KIT 20 UNIT/24HR	4	PA; QL (30 EA per 30 days)
V-GO 30 KIT 30 UNIT/24HR	4	PA; QL (30 EA per 30 days)
V-GO 40 KIT 40 UNIT/24HR	4	PA; QL (30 EA per 30 days)
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML	3	QL (15 ML per 30 days)

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藥品名稱

藥物層級 規定／上限

抗糖尿病藥物

acarbose oral tablet 100 mg, 25 mg, 50 mg	6	GC
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	3	PA-NS; QL (3.4 ML per 28 days)
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML	4	PA-NS; QL (2.4 ML per 30 days)
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	4	PA-NS; QL (1.2 ML per 30 days)
FARXIGA ORAL TABLET 10 MG, 5 MG	3	QL (30 EA per 30 days)
glimepiride oral tablet 1 mg, 2 mg	6	GC; QL (90 EA per 30 days)
glimepiride oral tablet 4 mg	6	GC; QL (60 EA per 30 days)
glipizide er oral tablet extended release 24 hour 10 mg	6	GC; QL (60 EA per 30 days)
glipizide er oral tablet extended release 24 hour 2.5 mg, 5 mg	6	GC; QL (90 EA per 30 days)
glipizide oral tablet 10 mg	6	GC; QL (120 EA per 30 days)
glipizide oral tablet 5 mg	6	GC; QL (240 EA per 30 days)
glipizide xl oral tablet extended release 24 hour 10 mg	6	GC; QL (60 EA per 30 days)
glipizide xl oral tablet extended release 24 hour 2.5 mg, 5 mg	6	GC; QL (90 EA per 30 days)
glipizide-metformin hcl oral tablet 2.5-250 mg	6	GC; QL (240 EA per 30 days)
glipizide-metformin hcl oral tablet 2.5-500 mg, 5-500 mg	6	GC; QL (120 EA per 30 days)
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	3	QL (30 EA per 30 days)
INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG	4	QL (60 EA per 30 days)
INVOKAMET ORAL TABLET 50-500 MG	4	QL (120 EA per 30 days)
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150-1000 MG, 150-500 MG, 50-1000 MG	4	QL (60 EA per 30 days)
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-500 MG	4	QL (120 EA per 30 days)
INVOKANA ORAL TABLET 100 MG	4	QL (60 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
INVOKANA ORAL TABLET 300 MG	4	QL (30 EA per 30 days)
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG	3	QL (60 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG	3	QL (30 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG	3	QL (60 EA per 30 days)
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	3	QL (30 EA per 30 days)
JARDIANCE ORAL TABLET 10 MG	3	QL (60 EA per 30 days)
JARDIANCE ORAL TABLET 25 MG	3	QL (30 EA per 30 days)
JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG	3	QL (60 EA per 30 days)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	3	QL (60 EA per 30 days)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG	3	QL (30 EA per 30 days)
metformin hcl er oral tablet extended release 24 hour 500 mg	6	GC; (generic of GLUCOPHAGE XR); QL (120 EA per 30 days)
metformin hcl er oral tablet extended release 24 hour 750 mg	6	GC; (generic of GLUCOPHAGE XR); QL (60 EA per 30 days)
metformin hcl oral tablet 1000 mg	6	GC; QL (75 EA per 30 days)
metformin hcl oral tablet 500 mg	6	GC; QL (150 EA per 30 days)
metformin hcl oral tablet 850 mg	6	GC; QL (90 EA per 30 days)
nateglinide oral tablet 120 mg, 60 mg	6	GC; QL (90 EA per 30 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	3	PA-NS; QL (1.5 ML per 28 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML	3	PA-NS; QL (3 ML per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	3	PA-NS; QL (3 ML per 28 days)
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML	3	PA-NS; QL (3 ML per 28 days)
pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg	6	GC; QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg	6	GC; QL (30 EA per 30 days)
pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg	6	GC; QL (90 EA per 30 days)
repaglinide oral tablet 0.5 mg, 1 mg	6	GC; QL (120 EA per 30 days)
repaglinide oral tablet 2 mg	6	GC; QL (240 EA per 30 days)
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	3	PA-NS; QL (30 EA per 30 days)
SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG	3	QL (60 EA per 30 days)
SYNJARDY ORAL TABLET 5-500 MG	3	QL (120 EA per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 5-1000 MG	3	QL (60 EA per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25-1000 MG	3	QL (30 EA per 30 days)
TRADJENTA ORAL TABLET 5 MG	3	QL (30 EA per 30 days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG	3	QL (30 EA per 30 days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG	3	QL (60 EA per 30 days)
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	3	PA-NS; QL (2 ML per 28 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML	3	PA-NS; QL (9 ML per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG	3	QL (30 EA per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	3	QL (60 EA per 30 days)
甲狀腺藥物		
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	GC

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levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	1	GC
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	1	GC
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	GC
liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg	3	
methimazole oral tablet 10 mg, 5 mg	1	GC
propylthiouracil oral tablet 50 mg	3	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	4	
unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	1	GC
磷酸鹽結合劑藥物		
calcium acetate (phos binder) oral capsule 667 mg	3	QL (360 EA per 30 days)
calcium acetate oral tablet 667 mg	3	QL (360 EA per 30 days)
sevelamer carbonate oral packet 0.8 gm	5 [^]	QL (540 EA per 30 days)
sevelamer carbonate oral packet 2.4 gm	5 [^]	QL (180 EA per 30 days)
sevelamer carbonate oral tablet 800 mg	4	QL (540 EA per 30 days)
VELPHORO ORAL TABLET CHEWABLE 500 MG	4	QL (180 EA per 30 days)
維生素 D 類似物		
calcitriol oral capsule 0.25 mcg, 0.5 mcg	2	B/D; GC
calcitriol oral solution 1 mcg/ml	4	B/D
doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg	4	B/D
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	4	B/D
RAYALDEE ORAL CAPSULE EXTENDED RELEASE 30 MCG	5 [^]	

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藥品名稱	藥物層級	規定／上限
螯合劑		
CHEMET ORAL CAPSULE 100 MG	4	
deferasirox granules oral packet 180 mg, 360 mg, 90 mg	5 [^]	PA
deferasirox oral tablet 180 mg, 360 mg	5 [^]	PA
deferasirox oral tablet 90 mg	4	PA
deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg	5 [^]	PA
LOKELMA ORAL PACKET 10 GM, 5 GM	3	
penicillamine oral tablet 250 mg	5 [^]	
sodium polystyrene sulfonate oral powder	3	
sps oral suspension 15 gm/60ml	3	
trientine hcl oral capsule 250 mg	5 [^]	PA
VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM	3	
血糖升高藥物		
diazoxide oral suspension 50 mg/ml	5 [^]	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML	3	
GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML	3	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML, 1 MG/0.2ML	3	
避孕劑		
afirmelle oral tablet 0.1-20 mg-mcg	2	GC
altavera oral tablet 0.15-30 mg-mcg	3	
alyacen 1/35 oral tablet 1-35 mg-mcg	3	
alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	3	
apri oral tablet 0.15-30 mg-mcg	2	GC
aranelle oral tablet 0.5/1/0.5-35 mg-mcg	3	
aubra eq oral tablet 0.1-20 mg-mcg	2	GC
aurovela 1/20 oral tablet 1-20 mg-mcg	3	

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藥品名稱	藥物層級	規定／上限
aurovela fe 1.5/30 oral tablet 1.5-30 mg-mcg	2	GC
aurovela fe 1/20 oral tablet 1-20 mg-mcg	2	GC
aviane oral tablet 0.1-20 mg-mcg	2	GC
ayuna oral tablet 0.15-30 mg-mcg	3	
azurette oral tablet 0.15-0.02/0.01 mg (21/5)	3	
balziva oral tablet 0.4-35 mg-mcg	3	
blisovi fe 1.5/30 oral tablet 1.5-30 mg-mcg	2	GC
briellyn oral tablet 0.4-35 mg-mcg	3	
camila oral tablet 0.35 mg	2	GC
chateal oral tablet 0.15-30 mg-mcg	3	
cryselle-28 oral tablet 0.3-30 mg-mcg	3	
cyred eq oral tablet 0.15-30 mg-mcg	2	GC
dasetta 1/35 oral tablet 1-35 mg-mcg	3	
dasetta 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	3	
deblitane oral tablet 0.35 mg	2	GC
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	3	
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	2	GC
drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg	3	
elinest oral tablet 0.3-30 mg-mcg	3	
eluryng vaginal ring 0.12-0.015 mg/24hr	4	
emoquette oral tablet 0.15-30 mg-mcg	2	GC
enilloring vaginal ring 0.12-0.015 mg/24hr	4	
enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg	2	GC
enskyce oral tablet 0.15-30 mg-mcg	2	GC
errin oral tablet 0.35 mg	2	GC
estarylla oral tablet 0.25-35 mg-mcg	2	GC
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg	2	GC

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藥品名稱	藥物層級 規定／上限	
ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg	3	
etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr	4	
falmina oral tablet 0.1-20 mg-mcg	2	GC
femynor oral tablet 0.25-35 mg-mcg	2	GC
hailey 1.5/30 oral tablet 1.5-30 mg-mcg	3	
haloette vaginal ring 0.12-0.015 mg/24hr	4	
heather oral tablet 0.35 mg	2	GC
iclevia oral tablet 0.15-0.03 mg	3	
incassia oral tablet 0.35 mg	2	GC
introvale oral tablet 0.15-0.03 mg	3	
isibloom oral tablet 0.15-30 mg-mcg	2	GC
jasmiel oral tablet 3-0.02 mg	3	
jolessa oral tablet 0.15-0.03 mg	3	
juleber oral tablet 0.15-30 mg-mcg	2	GC
junel 1.5/30 oral tablet 1.5-30 mg-mcg	3	
junel 1/20 oral tablet 1-20 mg-mcg	3	
junel fe 1.5/30 oral tablet 1.5-30 mg-mcg	2	GC
junel fe 1/20 oral tablet 1-20 mg-mcg	2	GC
kariva oral tablet 0.15-0.02/0.01 mg (21/5)	3	
kelnor 1/35 oral tablet 1-35 mg-mcg	2	GC
kelnor 1/50 oral tablet 1-50 mg-mcg	3	
kurvelo oral tablet 0.15-30 mg-mcg	3	
larin 1.5/30 oral tablet 1.5-30 mg-mcg	3	
larin 1/20 oral tablet 1-20 mg-mcg	3	
larin fe 1.5/30 oral tablet 1.5-30 mg-mcg	2	GC
larin fe 1/20 oral tablet 1-20 mg-mcg	2	GC
leena oral tablet 0.5/1/0.5-35 mg-mcg	3	
lessina oral tablet 0.1-20 mg-mcg	2	GC
levonest oral tablet 50-30/75-40/ 125-30 mcg	2	GC

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levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	3	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg	2	GC
levonorgestrel-ethinyl estrad oral tablet 0.15-30 mg-mcg	3	
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	2	GC
levora 0.15/30 (28) oral tablet 0.15-30 mg-mcg	3	
loestrin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	3	
loestrin 1/20 (21) oral tablet 1-20 mg-mcg	3	
loestrin fe 1.5/30 oral tablet 1.5-30 mg-mcg	2	GC
loestrin fe 1/20 oral tablet 1-20 mg-mcg	2	GC
loryna oral tablet 3-0.02 mg	3	
low-ogestrel oral tablet 0.3-30 mg-mcg	3	
lutra oral tablet 0.1-20 mg-mcg	2	GC
lyleq oral tablet 0.35 mg	2	GC
lyza oral tablet 0.35 mg	2	GC
marlissa oral tablet 0.15-30 mg-mcg	3	
medroxyprogesterone acetate intramuscular suspension 150 mg/ml	3	
medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml	3	
microgestin 1.5/30 oral tablet 1.5-30 mg-mcg	3	
microgestin 1/20 oral tablet 1-20 mg-mcg	3	
microgestin fe 1.5/30 oral tablet 1.5-30 mg-mcg	2	GC
microgestin fe 1/20 oral tablet 1-20 mg-mcg	2	GC
mili oral tablet 0.25-35 mg-mcg	2	GC
mono-linyah oral tablet 0.25-35 mg-mcg	2	GC
necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg	3	
nikki oral tablet 3-0.02 mg	3	
nora-be oral tablet 0.35 mg	2	GC

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norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	2	GC
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	3	
norethindrone oral tablet 0.35 mg	2	GC
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	4	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	2	GC
norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg	3	
norlyroc oral tablet 0.35 mg	2	GC
nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg	3	
nortrel 1/35 (21) oral tablet 1-35 mg-mcg	3	
nortrel 1/35 (28) oral tablet 1-35 mg-mcg	3	
nortrel 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	3	
nylia 1/35 oral tablet 1-35 mg-mcg	3	
nylia 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	3	
nymyo oral tablet 0.25-35 mg-mcg	2	GC
ocella oral tablet 3-0.03 mg	3	
philith oral tablet 0.4-35 mg-mcg	3	
pimtrea oral tablet 0.15-0.02/0.01 mg (21/5)	3	
pirmella 1/35 oral tablet 1-35 mg-mcg	3	
portia-28 oral tablet 0.15-30 mg-mcg	3	
reclipsen oral tablet 0.15-30 mg-mcg	2	GC
setlakin oral tablet 0.15-0.03 mg	3	
sharobel oral tablet 0.35 mg	2	GC
simliya oral tablet 0.15-0.02/0.01 mg (21/5)	3	
sprintec 28 oral tablet 0.25-35 mg-mcg	2	GC
sronyx oral tablet 0.1-20 mg-mcg	2	GC
syeda oral tablet 3-0.03 mg	3	

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藥品名稱	藥物層級	規定／上限
tarina fe 1/20 eq oral tablet 1-20 mg-mcg	2	GC
tilia fe oral tablet 1-20/1-30/1-35 mg-mcg	4	
tri-estarylla oral tablet 0.18/0.215/0.25 mg-35 mcg	3	
tri-legest fe oral tablet 1-20/1-30/1-35 mg-mcg	4	
tri-lynyah oral tablet 0.18/0.215/0.25 mg-35 mcg	3	
tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-25 mcg	3	
tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg	3	
tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg	3	
tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg	3	
tri-mili oral tablet 0.18/0.215/0.25 mg-35 mcg	3	
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	3	
tri-sprintec oral tablet 0.18/0.215/0.25 mg-35 mcg	3	
trivora (28) oral tablet 50-30/75-40/ 125-30 mcg	2	GC
tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-25 mcg	3	
tri-vylibra oral tablet 0.18/0.215/0.25 mg-35 mcg	3	
velivet oral tablet 0.1/0.125/0.15 -0.025 mg	3	
vestura oral tablet 3-0.02 mg	3	
vienva oral tablet 0.1-20 mg-mcg	2	GC
viorele oral tablet 0.15-0.02/0.01 mg (21/5)	3	
vyfemla oral tablet 0.4-35 mg-mcg	3	
vylibra oral tablet 0.25-35 mg-mcg	2	GC
wera oral tablet 0.5-35 mg-mcg	3	
xulane transdermal patch weekly 150-35 mcg/24hr	4	
zafemy transdermal patch weekly 150-35 mcg/24hr	4	
zovia 1/35 (28) oral tablet 1-35 mg-mcg	2	GC
zumandimine oral tablet 3-0.03 mg	3	
醣皮質類固醇		
DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML	4	
dexamethasone oral elixir 0.5 mg/5ml	3	

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藥品名稱	藥物層級	規定／上限
dexamethasone oral solution 0.5 mg/5ml	3	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	3	
dexamethasone sod phosphate pf injection solution 10 mg/ml	3	
dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml	3	
fludrocortisone acetate oral tablet 0.1 mg	2	GC
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	3	
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	3	
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	3	
methylprednisolone oral tablet therapy pack 4 mg	2	GC
methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg	3	
prednisolone oral solution 15 mg/5ml	2	GC
prednisolone sodium phosphate oral solution 15 mg/5ml	2	GC
prednisolone sodium phosphate oral solution 25 mg/5ml	3	
prednisolone sodium phosphate oral solution 6.7 (5 base) mg/5ml	4	
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML	4	
prednisone oral solution 5 mg/5ml	4	
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg	2	GC
prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)	3	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG	4	

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藥品名稱	藥物層級 規定／上限	
鈣調節藥		
alendronate sodium oral solution 70 mg/75ml	4	
alendronate sodium oral tablet 10 mg, 35 mg, 70 mg	1	GC
calcitonin (salmon) nasal solution 200 unit/act	3	B/D
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	5 [^]	PA
FOSAMAX PLUS D ORAL TABLET 70-2800 MG-UNIT, 70-5600 MG-UNIT	4	ST
ibandronate sodium intravenous solution 3 mg/3ml	4	B/D; QL (3 ML per 90 days)
ibandronate sodium oral tablet 150 mg	1	B/D; GC
NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG, 25 MCG, 50 MCG, 75 MCG	5 [^]	PA; LA
pamidronate disodium intravenous solution 30 mg/10ml, 90 mg/10ml	3	B/D
PAMIDRONATE DISODIUM INTRAVENOUS SOLUTION 6 MG/ML	3	B/D
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML	4	QL (1 ML per 180 days)
risedronate sodium oral tablet 150 mg, 35 mg, 35 mg (12 pack), 35 mg (4 pack), 5 mg	3	
risedronate sodium oral tablet 30 mg	4	
risedronate sodium oral tablet delayed release 35 mg	4	
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	5 [^]	PA
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML	5 [^]	PA
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7ML	5 [^]	PA
zoledronic acid intravenous concentrate 4 mg/5ml	4	B/D
zoledronic acid intravenous solution 4 mg/100ml, 5 mg/100ml	4	B/D

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藥品名稱	藥物層級 規定／上限	
雄性素		
depo-testosterone intramuscular solution 100 mg/ml, 200 mg/ml	3	
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)	3	
testosterone enanthate intramuscular solution 200 mg/ml	3	
testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	4	PA; QL (300 GM per 30 days)
雌激素		
amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg	3	
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	4	
dotti transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	3	
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	1	GC
estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	3	
estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	3	
estradiol vaginal cream 0.1 mg/gm	3	
estradiol vaginal tablet 10 mcg	4	
estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml	4	
estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg	3	
fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	3	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG	3	
IMVEXXY STARTER PACK VAGINAL INSERT 10 MCG, 4 MCG	3	

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藥品名稱	藥物層級 規定／上限	
jinteli oral tablet 1-5 mg-mcg	3	
lyllana transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	3	
mimvey oral tablet 1-0.5 mg	3	
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	3	
yuvaferm vaginal tablet 10 mcg	4	
黃體素		
medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg	1	GC
megestrol acetate oral suspension 40 mg/ml	3	
megestrol acetate oral suspension 625 mg/5ml	4	PA
norethindrone acetate oral tablet 5 mg	3	
呼吸的		
B 致效劑		
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act inhalation aerosol solution 108 (90 base) mcg/act	3	(generic of Proair HFA); QL (17 GM per 30 days)
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act inhalation aerosol solution 108 (90 base) mcg/act (nda020503)	3	(generic of Proventil HFA); QL (13.4 GM per 30 days)
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act inhalation aerosol solution 108 (90 base) mcg/act (nda020983)	3	(generic of Ventolin HFA); QL (36 GM per 30 days)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	2	B/D; GC
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	3	B/D
albuterol sulfate oral syrup 2 mg/5ml	3	
albuterol sulfate oral tablet 2 mg, 4 mg	4	
arformoterol tartrate inhalation nebulization solution 15 mcg/2ml	4	B/D

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formoterol fumarate inhalation nebulization solution 20 mcg/2ml	5^	B/D
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	4	B/D
levalbuterol tartrate inhalation aerosol 45 mcg/act	3	ST; QL (30 GM per 30 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	3	QL (60 EA per 30 days)
terbutaline sulfate oral tablet 2.5 mg, 5 mg	4	
VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	3	QL (48 GM per 30 days)
VENTOLIN HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	3	QL (36 GM per 30 days)
其他		
acetylcysteine inhalation solution 10 %, 20 %	4	B/D
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG	5^	PA; LA
cromolyn sodium inhalation nebulization solution 20 mg/2ml	3	B/D
epinephrine injection solution 0.3 mg/0.3ml	3	(generic of Adrenaclick)
epinephrine injection solution auto-injector 0.15 mg/0.15ml	3	(generic of Adrenaclick)
epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml	3	(generic of EpiPen)
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML	5^	PA; LA
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	5^	PA; LA
KALYDECO ORAL PACKET 13.4 MG, 25 MG, 50 MG, 75 MG	5^	PA; LA; QL (56 EA per 28 days)
KALYDECO ORAL TABLET 150 MG	5^	PA; LA; QL (60 EA per 30 days)
OFEV ORAL CAPSULE 100 MG, 150 MG	5^	PA; LA; QL (60 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG	5 [^]	PA; LA; QL (56 EA per 28 days)
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	5 [^]	PA; LA; QL (112 EA per 28 days)
pirfenidone oral capsule 267 mg	5 [^]	PA; QL (270 EA per 30 days)
pirfenidone oral tablet 267 mg	5 [^]	PA; QL (270 EA per 30 days)
pirfenidone oral tablet 534 mg, 801 mg	5 [^]	PA; QL (90 EA per 30 days)
PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML	5 [^]	PA; LA
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5 [^]	PA; LA
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	5 [^]	PA
roflumilast oral tablet 250 mcg, 500 mcg	4	
SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG	5 [^]	PA; LA; QL (56 EA per 28 days)
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 400 MG	4	
theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg, 450 mg	4	
theophylline er oral tablet extended release 24 hour 400 mg, 600 mg	3	
theophylline oral elixir 80 mg/15ml	4	
theophylline oral solution 80 mg/15ml	4	
TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG	5 [^]	PA; LA; QL (84 EA per 28 days)
TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG	5 [^]	PA; LA; QL (56 EA per 28 days)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	5 [^]	PA; LA
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG	5 [^]	PA; LA
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5 [^]	PA; LA

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藥品名稱**藥物層級 規定／上限****抗組織胺藥物**

azelastine hcl nasal solution 0.1 %, 0.15 %	3	
cetirizine hcl oral solution 1 mg/ml	2	GC
cyproheptadine hcl oral syrup 2 mg/5ml	3	PA; PA if 70 years and older
cyproheptadine hcl oral tablet 4 mg	3	PA; PA if 70 years and older
desloratadine oral tablet 5 mg	3	
diphenhydramine hcl injection solution 50 mg/ml	3	
hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml	4	PA; PA if 70 years and older
hydroxyzine hcl oral syrup 10 mg/5ml	3	PA; PA if 70 years and older
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	3	PA; PA if 70 years and older
hydroxyzine pamoate oral capsule 25 mg, 50 mg	3	PA; PA if 70 years and older
levocetirizine dihydrochloride oral solution 2.5 mg/5ml	4	
levocetirizine dihydrochloride oral tablet 5 mg	3	
olopatadine hcl nasal solution 0.6 %	4	

抗膽鹼／B 致效劑複合物

ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	3	QL (60 EA per 30 days)
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT	3	QL (10.7 GM per 30 days)
BREZTRI AEROSPHERE AEROSOL 160-9-4.8 MCG/ACT INHALATION	3	Institutional Pack (5.9g inhaler containing 28 inhalations); QL (23.6 GM per 28 days)
BREZTRI AEROSPHERE INHALATION AEROSOL 160-9-4.8 MCG/ACT	3	Retail Inhalation Canister (10.7g inhaler containing 120 inhalations); QL (10.7 GM per 30 days)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT	4	QL (8 GM per 30 days)
ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml	3	B/D

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藥品名稱	藥物層級 規定／上限	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	3	QL (60 EA per 30 days)
抗膽鹼劑		
ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT	4	QL (25.8 GM per 30 days)
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	3	QL (30 EA per 30 days)
ipratropium bromide inhalation solution 0.02 %	2	B/D; GC
ipratropium bromide nasal solution 0.03 %, 0.06 %	3	
白三烯調節器		
montelukast sodium oral packet 4 mg	4	
montelukast sodium oral tablet 10 mg	1	GC
montelukast sodium oral tablet chewable 4 mg, 5 mg	3	
zafirlukast oral tablet 10 mg, 20 mg	3	
類固醇／B 致效劑複合物		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	3	QL (60 EA per 30 days)
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT	3	QL (12 GM per 30 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH	3	QL (60 EA per 30 days)
SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT	3	QL (30.6 GM per 30 days)
類固醇吸入劑		
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT	3	QL (30 EA per 30 days)
budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml	4	B/D

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藥品名稱	藥物層級	規定／上限
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT	3	QL (240 EA per 30 days)
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	3	QL (180 EA per 30 days)
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	3	QL (24 GM per 30 days)
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	3	QL (21.2 GM per 30 days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT	4	QL (2 EA per 30 days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 90 MCG/ACT	4	QL (3 EA per 30 days)
鼻用類固醇		
flunisolide nasal solution 25 mcg/act (0.025%)	3	QL (75 ML per 30 days)
fluticasone propionate nasal suspension 50 mcg/act	2	GC; QL (16 GM per 30 days)
mometasone furoate nasal suspension 50 mcg/act	4	ST; QL (34 GM per 30 days)
OMNARIS NASAL SUSPENSION 50 MCG/ACT	4	ST; QL (12.5 GM per 30 days)
XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT	4	PA; QL (32 ML per 30 days)
外用的		
口腔／咽喉／牙齒藥物		
cevimeline hcl oral capsule 30 mg	4	
chlorhexidine gluconate mouth/throat solution 0.12 %	1	GC
clotrimazole mouth/throat troche 10 mg	4	QL (150 EA per 30 days)
lidocaine viscous hcl mouth/throat solution 2 %	2	GC
nystatin mouth/throat suspension 100000 unit/ml	3	
periogard mouth/throat solution 0.12 %	1	GC
pilocarpine hcl oral tablet 5 mg, 7.5 mg	3	
triamcinolone acetonide mouth/throat paste 0.1 %	3	
皮膚病，傷口護理藥物		
REGANEX EXTERNAL GEL 0.01 %	5 [^]	PA; QL (30 GM per 30 days)
SANTYL EXTERNAL OINTMENT 250 UNIT/GM	4	QL (180 GM per 30 days)
sodium chloride irrigation solution 0.9 %	3	

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藥品名稱	藥物層級	規定／上限
sterile water for irrigation irrigation solution	2	GC
皮膚病，其他皮膚和黏膜		
ammonium lactate external cream 12 %	2	GC
ammonium lactate external lotion 12 %	3	
azelaic acid external gel 15 %	4	QL (50 GM per 30 days)
bexarotene external gel 1 %	5 [^]	PA-NS; QL (60 GM per 30 days)
diclofenac sodium external gel 1 %	3	QL (1000 GM per 30 days)
FINACEA EXTERNAL FOAM 15 %	4	QL (50 GM per 30 days)
fluorouracil external cream 5 %	4	QL (40 GM per 30 days)
fluorouracil external solution 2 %, 5 %	3	QL (10 ML per 30 days)
hydrocortisone (perianal) external cream 1 %	3	
hydrocortisone (perianal) external cream 2.5 %	2	GC
imiquimod external cream 5 %	3	QL (24 EA per 30 days)
metronidazole external cream 0.75 %	4	QL (45 GM per 30 days)
metronidazole external gel 0.75 %	3	QL (45 GM per 30 days)
metronidazole external lotion 0.75 %	4	QL (59 ML per 30 days)
NORITATE EXTERNAL CREAM 1 %	5 [^]	QL (60 GM per 30 days)
PANRETIN EXTERNAL GEL 0.1 %	5 [^]	PA-NS; QL (60 GM per 30 days)
podofilox external solution 0.5 %	3	QL (7 ML per 28 days)
procto-med hc external cream 2.5 %	3	
proctosol hc external cream 2.5 %	3	
proctozone-hc external cream 2.5 %	3	
RECTIV RECTAL OINTMENT 0.4 %	4	QL (30 GM per 30 days)
tacrolimus external ointment 0.03 %, 0.1 %	4	QL (100 GM per 30 days)
VALCHLOR EXTERNAL GEL 0.016 %	5 [^]	PA-NS; LA; QL (60 GM per 30 days)
ZYCLARA PUMP EXTERNAL CREAM 2.5 %	5 [^]	QL (7.5 GM per 28 days)
皮膚病，局部麻醉藥物		
glydo external prefilled syringe 2 %	4	PA; QL (60 ML per 30 days)
lidocaine external ointment 5 %	4	PA; QL (50 GM per 30 days)
lidocaine external patch 5 %	3	PA; QL (3 EA per 1 day)

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藥品名稱	藥物層級	規定／上限
lidocaine hcl external solution 4 %	3	PA; QL (50 ML per 30 days)
lidocaine-prilocaine external cream 2.5-2.5 %	3	PA; QL (30 GM per 30 days)
皮膚病，抗乾癬劑		
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	4	PA
calcipotriene external ointment 0.005 %	4	PA; QL (120 GM per 30 days)
calcipotriene external solution 0.005 %	4	PA; QL (120 ML per 30 days)
calcitrene external ointment 0.005 %	4	PA; QL (120 GM per 30 days)
tazarotene external cream 0.1 %	3	PA; QL (60 GM per 30 days)
TAZORAC EXTERNAL CREAM 0.05 %	4	PA; QL (60 GM per 30 days)
皮膚病，抗生素		
gentamicin sulfate external cream 0.1 %	4	QL (30 GM per 30 days)
gentamicin sulfate external ointment 0.1 %	3	QL (30 GM per 30 days)
mupirocin external ointment 2 %	2	GC; QL (220 GM per 30 days)
silver sulfadiazine external cream 1 %	2	GC
ssd external cream 1 %	2	GC
SULFAMYLON EXTERNAL CREAM 85 MG/GM	4	QL (453.6 GM per 30 days)
皮膚病，抗真菌藥		
ciclopirox olamine external cream 0.77 %	3	QL (90 GM per 30 days)
ciclopirox olamine external suspension 0.77 %	3	QL (60 ML per 30 days)
clotrimazole external cream 1 %	3	QL (45 GM per 30 days)
clotrimazole external solution 1 %	3	QL (30 ML per 30 days)
clotrimazole-betamethasone external cream 1-0.05 %	3	QL (45 GM per 30 days)
ketoconazole external cream 2 %	3	QL (60 GM per 30 days)
nyamyc external powder 100000 unit/gm	3	QL (60 GM per 30 days)
nystatin external cream 100000 unit/gm	3	QL (30 GM per 30 days)
nystatin external ointment 100000 unit/gm	3	QL (30 GM per 30 days)
nystatin external powder 100000 unit/gm	3	QL (60 GM per 30 days)
nystop external powder 100000 unit/gm	3	QL (60 GM per 30 days)
皮膚病，抗脂溢性皮炎		
ketoconazole external shampoo 2 %	2	GC; QL (120 ML per 30 days)

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藥品名稱	藥物層級 規定／上限	
selenium sulfide external lotion 2.5 %	2	GC
皮膚病，滅疥癬和滅虱藥物		
malathion external lotion 0.5 %	4	QL (59 ML per 30 days)
permethrin external cream 5 %	3	QL (60 GM per 30 days)
皮膚病，痤瘡		
accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	4	PA
amnesteem oral capsule 10 mg, 20 mg, 40 mg	4	PA
benzoyl peroxide-erythromycin external gel 5-3 %	4	QL (46.6 GM per 30 days)
claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg	4	PA
clindamycin phosphate external gel 1 %	4	QL (75 GM per 30 days)
clindamycin phosphate external lotion 1 %	3	QL (60 ML per 30 days)
clindamycin phosphate external solution 1 %	3	QL (60 ML per 30 days)
ery external pad 2 %	3	QL (60 EA per 30 days)
erythromycin external solution 2 %	3	QL (60 ML per 30 days)
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	4	PA
sulfacetamide sodium (acne) external lotion 10 %	4	QL (118 ML per 30 days)
tretinoin external cream 0.025 %, 0.05 %, 0.1 %	4	PA; QL (45 GM per 30 days)
tretinoin external gel 0.01 %, 0.025 %	4	PA; QL (45 GM per 30 days)
zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	4	PA
皮膚病，皮質類固醇		
ala-cort external cream 1 %	1	GC
ala-cort external cream 2.5 %	2	GC
alclometasone dipropionate external cream 0.05 %	3	QL (60 GM per 30 days)
alclometasone dipropionate external ointment 0.05 %	3	QL (60 GM per 30 days)
betamethasone dipropionate aug external cream 0.05 %	2	GC; QL (120 GM per 30 days)
betamethasone dipropionate aug external gel 0.05 %	4	QL (120 GM per 30 days)
betamethasone dipropionate aug external lotion 0.05 %	4	QL (120 ML per 30 days)

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藥品名稱	藥物層級	規定／上限
betamethasone dipropionate aug external ointment 0.05 %	4	QL (120 GM per 30 days)
betamethasone dipropionate external cream 0.05 %	3	QL (120 GM per 30 days)
betamethasone dipropionate external lotion 0.05 %	3	QL (120 ML per 30 days)
betamethasone dipropionate external ointment 0.05 %	4	QL (120 GM per 30 days)
betamethasone valerate external cream 0.1 %	3	QL (120 GM per 30 days)
betamethasone valerate external lotion 0.1 %	3	QL (120 ML per 30 days)
betamethasone valerate external ointment 0.1 %	3	QL (120 GM per 30 days)
clobetasol propionate e external cream 0.05 %	3	QL (60 GM per 30 days)
clobetasol propionate external cream 0.05 %	3	QL (60 GM per 30 days)
clobetasol propionate external gel 0.05 %	4	QL (60 GM per 30 days)
clobetasol propionate external ointment 0.05 %	3	QL (60 GM per 30 days)
clobetasol propionate external solution 0.05 %	3	QL (50 ML per 30 days)
desonide external cream 0.05 %	3	QL (60 GM per 30 days)
desonide external ointment 0.05 %	4	QL (60 GM per 30 days)
ENSTILAR EXTERNAL FOAM 0.005-0.064 %	4	PA; QL (120 GM per 30 days)
fluocinolone acetonide body external oil 0.01 %	3	QL (118.28 ML per 30 days)
fluocinolone acetonide external cream 0.01 %	4	QL (60 GM per 30 days)
fluocinolone acetonide external cream 0.025 %	4	QL (120 GM per 30 days)
fluocinolone acetonide external ointment 0.025 %	3	QL (120 GM per 30 days)
fluocinolone acetonide external solution 0.01 %	4	QL (90 ML per 30 days)
fluocinolone acetonide scalp external oil 0.01 %	3	QL (118.28 ML per 30 days)
fluocinonide emulsified base external cream 0.05 %	3	QL (120 GM per 30 days)
fluocinonide external cream 0.05 %	3	QL (120 GM per 30 days)
fluocinonide external gel 0.05 %	4	QL (60 GM per 30 days)
fluocinonide external ointment 0.05 %	4	QL (60 GM per 30 days)
fluocinonide external solution 0.05 %	3	QL (60 ML per 30 days)
fluticasone propionate external cream 0.05 %	3	
fluticasone propionate external ointment 0.005 %	3	
halobetasol propionate external cream 0.05 %	4	QL (50 GM per 30 days)

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藥品名稱	藥物層級	規定／上限
halobetasol propionate external ointment 0.05 %	4	QL (50 GM per 30 days)
hydrocortisone external cream 1 %	1	GC
hydrocortisone external cream 2.5 %	2	GC
hydrocortisone external lotion 2.5 %	2	GC
hydrocortisone external ointment 2.5 %	2	GC
mometasone furoate external cream 0.1 %	3	
mometasone furoate external ointment 0.1 %	3	
mometasone furoate external solution 0.1 %	3	
triamcinolone acetonide external cream 0.025 %, 0.5 %	2	GC
triamcinolone acetonide external cream 0.1 %	2	GC; QL (454 GM per 30 days)
triamcinolone acetonide external lotion 0.025 %, 0.1 %	3	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	2	GC
心血管		
ACE 抑制劑		
benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	6	GC
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	6	GC
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	6	GC
fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg	6	GC
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	6	GC
moexipril hcl oral tablet 15 mg, 7.5 mg	6	GC
perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg	6	GC
quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	6	GC
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	6	GC
trandolapril oral tablet 1 mg, 2 mg, 4 mg	6	GC
ACE 抑制組合劑		
amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	6	GC; QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	6	GC
captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	6	GC
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	6	GC
fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg	6	GC
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	6	GC
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	6	GC
A 受體阻斷劑		
doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg	1	GC
prazosin hcl oral capsule 1 mg, 2 mg, 5 mg	3	
terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg	2	GC
B-阻斷劑／利尿劑組合藥物		
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	1	GC
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	2	GC
metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg	3	
B-阻斷劑		
acebutolol hcl oral capsule 200 mg, 400 mg	3	
atenolol oral tablet 100 mg, 25 mg, 50 mg	1	GC
bisoprolol fumarate oral tablet 10 mg, 5 mg	2	GC
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	1	GC
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	2	GC
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg	1	GC

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藥品名稱	藥物層級 規定／上限	
metoprolol tartrate intravenous solution 5 mg/5ml	4	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	GC
nadolol oral tablet 20 mg, 40 mg, 80 mg	2	GC
nebivolol hcl oral tablet 10 mg, 2.5 mg, 5 mg	3	QL (30 EA per 30 days)
nebivolol hcl oral tablet 20 mg	3	QL (60 EA per 30 days)
pindolol oral tablet 10 mg, 5 mg	3	
propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg	2	GC
propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml	3	
propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	2	GC
timolol maleate oral tablet 10 mg, 20 mg, 5 mg	4	
其他		
ADRENALIN INJECTION SOLUTION 1 MG/ML	4	
aliskiren fumarate oral tablet 150 mg, 300 mg	4	
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg	6	GC
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	1	GC
clonidine transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr	2	GC
CORLANOR ORAL SOLUTION 5 MG/5ML	4	
CORLANOR ORAL TABLET 5 MG, 7.5 MG	4	
digoxin injection solution 0.25 mg/ml	4	
digoxin oral solution 0.05 mg/ml	4	
digoxin oral tablet 125 mcg, 250 mcg	2	GC; QL (30 EA per 30 days)
droxidopa oral capsule 100 mg	5 [^]	PA; QL (90 EA per 30 days)
droxidopa oral capsule 200 mg, 300 mg	5 [^]	PA; QL (180 EA per 30 days)
epinephrine (anaphylaxis) injection solution 1 mg/ml	4	
guanfacine hcl oral tablet 1 mg, 2 mg	3	PA; PA if 70 years and older
hydralazine hcl injection solution 20 mg/ml	4	

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藥品名稱	藥物層級	規定／上限
hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg	2	GC
metyrosine oral capsule 250 mg	5^	PA
midodrine hcl oral tablet 10 mg	4	
midodrine hcl oral tablet 2.5 mg, 5 mg	3	
minoxidil oral tablet 10 mg, 2.5 mg	2	GC
ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg	4	
其他抗高血脂藥物		
cholestyramine light oral packet 4 gm	3	
cholestyramine light oral powder 4 gm/dose	3	
cholestyramine oral packet 4 gm	3	
cholestyramine oral powder 4 gm/dose	3	
colesevelam hcl oral packet 3.75 gm	4	
colesevelam hcl oral tablet 625 mg	4	
colestipol hcl oral granules 5 gm	4	
colestipol hcl oral packet 5 gm	4	
colestipol hcl oral tablet 1 gm	3	
ezetimibe oral tablet 10 mg	1	GC
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	6	GC
niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg	3	QL (60 EA per 30 days)
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML	3	PA
prevalite oral packet 4 gm	3	
prevalite oral powder 4 gm/dose	3	
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM	4	
利尿劑		
acetazolamide er oral capsule extended release 12 hour 500 mg	4	
acetazolamide oral tablet 125 mg, 250 mg	3	

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藥品名稱	藥物層級	規定／上限
amiloride hcl oral tablet 5 mg	2	GC
amiloride-hydrochlorothiazide oral tablet 5-50 mg	2	GC
bumetanide injection solution 0.25 mg/ml	3	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	3	
chlorthalidone oral tablet 25 mg, 50 mg	2	GC
furosemide injection solution 10 mg/ml	3	
furosemide oral solution 10 mg/ml, 8 mg/ml	2	GC
furosemide oral tablet 20 mg, 40 mg, 80 mg	1	GC
hydrochlorothiazide oral capsule 12.5 mg	1	GC
hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg	1	GC
indapamide oral tablet 1.25 mg, 2.5 mg	1	GC
methazolamide oral tablet 25 mg, 50 mg	4	
metolazone oral tablet 10 mg, 2.5 mg, 5 mg	3	
spironolactone-hctz oral tablet 25-25 mg	2	GC
toremide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	2	GC
triamterene-hctz oral capsule 37.5-25 mg	1	GC
triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg	1	GC
抗心律不整劑		
amiodarone hcl intravenous solution 150 mg/3ml, 450 mg/9ml, 900 mg/18ml	4	
amiodarone hcl oral tablet 100 mg, 400 mg	4	
amiodarone hcl oral tablet 200 mg	1	GC
disopyramide phosphate oral capsule 100 mg, 150 mg	4	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	4	
flecainide acetate oral tablet 100 mg, 150 mg, 50 mg	3	
MULTAQ ORAL TABLET 400 MG	4	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG	4	
pacerone oral tablet 100 mg, 400 mg	4	

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藥品名稱	藥物層級	規定／上限
pacerone oral tablet 200 mg	1	GC
propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg	4	
propafenone hcl oral tablet 150 mg, 225 mg, 300 mg	3	
quinidine sulfate oral tablet 200 mg, 300 mg	3	
sorine oral tablet 120 mg, 160 mg, 240 mg, 80 mg	2	GC
sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg	3	
sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg	2	GC
抗高血脂藥物，HMG-COA 還原酶抑制劑		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG, 40 MG, 60 MG	5^	ST; QL (30 EA per 30 days)
atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 80 mg	6	GC; QL (30 EA per 30 days)
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG	4	ST; QL (30 EA per 30 days)
fluvastatin sodium er oral tablet extended release 24 hour 80 mg	6	GC; QL (30 EA per 30 days)
fluvastatin sodium oral capsule 20 mg, 40 mg	6	GC; QL (60 EA per 30 days)
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG	4	ST; QL (30 EA per 30 days)
lovastatin oral tablet 10 mg, 20 mg, 40 mg	6	GC; QL (60 EA per 30 days)
pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg	6	GC; QL (30 EA per 30 days)
rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg	6	GC; QL (30 EA per 30 days)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg	6	GC; QL (30 EA per 30 days)
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	4	ST; QL (30 EA per 30 days)
抗高血脂藥物，纖維酸衍生物		
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	2	GC
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2	GC

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藥品名稱	藥物層級 規定／上限	
fenofibric acid oral capsule delayed release 135 mg, 45 mg	2	GC
gemfibrozil oral tablet 600 mg	1	GC
硝酸鹽		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	3	
isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg	1	GC
isosorbide mononitrate oral tablet 10 mg, 20 mg	2	GC
NITRO-BID TRANSDERMAL OINTMENT 2 %	3	
nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg	3	
nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	3	
肺動脈高血壓		
ADCIRCA ORAL TABLET 20 MG	5 [^]	PA-NS; QL (60 EA per 30 days)
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	5 [^]	PA-NS; LA; QL (90 EA per 30 days)
alyq oral tablet 20 mg	5 [^]	PA-NS; QL (60 EA per 30 days)
ambrisentan oral tablet 10 mg, 5 mg	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
bosentan oral tablet 125 mg, 62.5 mg	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
OPSUMIT ORAL TABLET 10 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
sildenafil citrate oral tablet 20 mg	3	PA-NS; generic for Revatio; QL (360 EA per 30 days)
tadalafil (pah) oral tablet 20 mg	5 [^]	PA-NS; generic for Adcirca; QL (60 EA per 30 days)
TADLIQ ORAL SUSPENSION 20 MG/5ML	5 [^]	PA-NS; QL (300 ML per 30 days)
treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml	5 [^]	PA-NS; LA
VENTAVIS INHALATION SOLUTION 10 MCG/ML, 20 MCG/ML	5 [^]	PA-NS; LA

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藥品名稱**藥物層級 規定／上限****血管緊張素 II 受體拮抗劑**

candesartan cilexetil oral tablet 16 mg, 4 mg, 8 mg	6	GC; QL (60 EA per 30 days)
candesartan cilexetil oral tablet 32 mg	6	GC; QL (30 EA per 30 days)
EDARBI ORAL TABLET 40 MG, 80 MG	4	QL (30 EA per 30 days)
irbesartan oral tablet 150 mg, 300 mg, 75 mg	6	GC; QL (30 EA per 30 days)
losartan potassium oral tablet 100 mg, 25 mg, 50 mg	6	GC
olmesartan medoxomil oral tablet 20 mg, 40 mg	6	GC; QL (30 EA per 30 days)
olmesartan medoxomil oral tablet 5 mg	6	GC; QL (60 EA per 30 days)
telmisartan oral tablet 20 mg, 40 mg, 80 mg	6	GC; QL (30 EA per 30 days)
valsartan oral tablet 160 mg, 40 mg, 80 mg	6	GC; QL (60 EA per 30 days)
valsartan oral tablet 320 mg	6	GC; QL (30 EA per 30 days)

血管緊張素 II 受體拮抗劑組合藥物

amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	6	GC; QL (30 EA per 30 days)
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	6	GC; QL (30 EA per 30 days)
candesartan cilexetil-hctz oral tablet 16-12.5 mg	6	GC; QL (60 EA per 30 days)
candesartan cilexetil-hctz oral tablet 32-12.5 mg, 32-25 mg	6	GC; QL (30 EA per 30 days)
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG	4	QL (30 EA per 30 days)
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	3	
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg	6	GC; QL (60 EA per 30 days)
irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg	6	GC; QL (30 EA per 30 days)
losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg	6	GC
olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	6	GC; QL (30 EA per 30 days)

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藥品名稱	藥物層級 規定／上限	
olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg	6	GC; QL (30 EA per 30 days)
telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg	6	GC; QL (30 EA per 30 days)
telmisartan-hctz oral tablet 40-12.5 mg, 80-25 mg	6	GC; QL (30 EA per 30 days)
telmisartan-hctz oral tablet 80-12.5 mg	6	GC; QL (60 EA per 30 days)
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	6	GC; QL (30 EA per 30 days)
醛固酮受體拮抗劑		
eplerenone oral tablet 25 mg, 50 mg	3	
KERENDIA ORAL TABLET 10 MG, 20 MG	3	QL (30 EA per 30 days)
spironolactone oral tablet 100 mg, 25 mg, 50 mg	1	GC
鈣離子通道阻斷劑		
amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg	1	GC
cartia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	2	GC
diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	2	GC
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	2	GC
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	4	
diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg	4	
diltiazem hcl er oral tablet extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	4	
diltiazem hcl intravenous solution 125 mg/25ml, 25 mg/5ml, 50 mg/10ml	3	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	2	GC

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藥品名稱	藥物層級 規定／上限	
dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	3	
felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	2	GC
isradipine oral capsule 2.5 mg, 5 mg	4	
matzim la oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	4	
nicardipine hcl oral capsule 20 mg, 30 mg	4	
nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	3	
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	2	GC
nimodipine oral capsule 30 mg	4	
nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg	4	
NYMALIZE ORAL SOLUTION 6 MG/ML	5 [^]	
taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	2	GC
tiadylt er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	2	GC
verapamil hcl er oral capsule extended release 24 hour 100 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg	3	
verapamil hcl er oral capsule extended release 24 hour 120 mg	4	
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	2	GC
verapamil hcl intravenous solution 2.5 mg/ml	4	
verapamil hcl oral tablet 120 mg, 40 mg, 80 mg	1	GC
抗惡性腫瘤藥物		
免疫調節劑		
lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 5 mg	5 [^]	PA-NS; LA; QL (28 EA per 28 days)

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藥品名稱	藥物層級	規定／上限
lenalidomide oral capsule 20 mg, 25 mg	5 [^]	PA-NS; LA; QL (21 EA per 28 days)
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	5 [^]	PA-NS; LA; QL (21 EA per 28 days)
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG	5 [^]	PA-NS; LA; QL (28 EA per 28 days)
REVLIMID ORAL CAPSULE 20 MG, 25 MG	5 [^]	PA-NS; LA; QL (21 EA per 28 days)
THALOMID ORAL CAPSULE 100 MG, 50 MG	5 [^]	PA-NS; LA; QL (28 EA per 28 days)
THALOMID ORAL CAPSULE 150 MG, 200 MG	5 [^]	PA-NS; LA; QL (56 EA per 28 days)
其他		
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 500 MCG/ML	5 [^]	PA-NS; LA
bexarotene oral capsule 75 mg	5 [^]	PA-NS
hydroxyurea oral capsule 500 mg	2	GC
irinotecan hcl intravenous solution 100 mg/5ml, 300 mg/15ml, 40 mg/2ml, 500 mg/25ml	4	B/D
KISQALI FEMARA (200 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG	5 [^]	PA-NS; QL (49 EA per 28 days)
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG	5 [^]	PA-NS; QL (70 EA per 28 days)
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG	5 [^]	PA-NS; QL (91 EA per 28 days)
MATULANE ORAL CAPSULE 50 MG	5 [^]	LA
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED 3.5 MG	5 [^]	PA-NS
tretinoin oral capsule 10 mg	5 [^]	
WELIREG ORAL TABLET 40 MG	5 [^]	PA-NS; LA
分子標靶藥劑		
ALECENSA ORAL CAPSULE 150 MG	5 [^]	PA-NS; LA
ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG	5 [^]	PA-NS; LA
ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG	5 [^]	PA-NS; LA
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG	5 [^]	PA-NS; LA
BORTEZOMIB INJECTION SOLUTION RECONSTITUTED 1 MG, 2.5 MG	5 [^]	PA-NS
bortezomib injection solution reconstituted 3.5 mg	5 [^]	PA-NS
BORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED 3.5 MG	5 [^]	PA-NS
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG	5 [^]	PA-NS
BRAFTOVI ORAL CAPSULE 75 MG	5 [^]	PA-NS; LA
BRUKINSA ORAL CAPSULE 80 MG	5 [^]	PA-NS; LA
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
CALQUENCE ORAL CAPSULE 100 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
CALQUENCE ORAL TABLET 100 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
CAPRELSA ORAL TABLET 100 MG, 300 MG	5 [^]	PA-NS; LA
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	5 [^]	PA-NS; LA
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	5 [^]	PA-NS; LA
COMETRIQ (60 MG DAILY DOSE) ORAL KIT 20 MG	5 [^]	PA-NS; LA
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	5 [^]	PA-NS; LA
COTELLIC ORAL TABLET 20 MG	5 [^]	PA-NS; LA
DAURISMO ORAL TABLET 100 MG, 25 MG	5 [^]	PA-NS; LA
ERIVEDGE ORAL CAPSULE 150 MG	5 [^]	PA-NS; LA
erlotinib hcl oral tablet 100 mg, 150 mg	5 [^]	PA-NS; QL (30 EA per 30 days)
erlotinib hcl oral tablet 25 mg	5 [^]	PA-NS; QL (90 EA per 30 days)
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	5 [^]	PA-NS; QL (30 EA per 30 days)
everolimus oral tablet soluble 2 mg	5 [^]	PA-NS; QL (150 EA per 30 days)
everolimus oral tablet soluble 3 mg	5 [^]	PA-NS; QL (90 EA per 30 days)
everolimus oral tablet soluble 5 mg	5 [^]	PA-NS; QL (60 EA per 30 days)
EXKIVITY ORAL CAPSULE 40 MG	5 [^]	PA-NS; LA
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	5 [^]	PA-NS; LA; QL (21 EA per 28 days)
GAVRETO ORAL CAPSULE 100 MG	5 [^]	PA-NS; LA

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藥品名稱	藥物層級	規定／上限
gefitinib oral tablet 250 mg	5 [^]	PA-NS
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	5 [^]	PA-NS; LA
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION 600-10000 MG-UNT/5ML	5 [^]	PA-NS; LA
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	5 [^]	PA-NS; LA
HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	5 [^]	PA-NS; LA
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	5 [^]	PA-NS; LA; QL (21 EA per 28 days)
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	5 [^]	PA-NS; LA; QL (21 EA per 28 days)
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
IDHIFA ORAL TABLET 100 MG, 50 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
imatinib mesylate oral tablet 100 mg	5 [^]	PA-NS; QL (90 EA per 30 days)
imatinib mesylate oral tablet 400 mg	5 [^]	PA-NS; QL (60 EA per 30 days)
IMBRUVICA ORAL CAPSULE 140 MG	5 [^]	PA-NS; LA; QL (120 EA per 30 days)
IMBRUVICA ORAL CAPSULE 70 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
IMBRUVICA ORAL SUSPENSION 70 MG/ML	5 [^]	PA-NS; LA; QL (216 ML per 27 days)
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG, 560 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
INLYTA ORAL TABLET 1 MG	5 [^]	PA-NS; LA; QL (180 EA per 30 days)
INLYTA ORAL TABLET 5 MG	5 [^]	PA-NS; LA; QL (120 EA per 30 days)
INREBIC ORAL CAPSULE 100 MG	5 [^]	PA-NS; LA
IRESSA ORAL TABLET 250 MG	5 [^]	PA-NS; LA
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
JAYPIRCA ORAL TABLET 100 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
JAYPIRCA ORAL TABLET 50 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 160 MG	5 [^]	B/D; LA
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	5 [^]	PA-NS; LA

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藥品名稱	藥物層級	規定／上限
KEYTRUDA INTRAVENOUS SOLUTION 100 MG/4ML	5 [^]	PA-NS; LA
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG	5 [^]	PA-NS; QL (21 EA per 28 days)
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG	5 [^]	PA-NS; QL (42 EA per 28 days)
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG	5 [^]	PA-NS; QL (63 EA per 28 days)
KRAZATI ORAL TABLET 200 MG	5 [^]	PA-NS; LA
lapatinib ditosylate oral tablet 250 mg	5 [^]	PA-NS
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG	5 [^]	PA-NS; LA; QL (90 EA per 30 days)
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG	5 [^]	PA-NS; LA; QL (90 EA per 30 days)
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG	5 [^]	PA-NS; LA; QL (90 EA per 30 days)
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG	5 [^]	PA-NS; LA; QL (60 EA per 30 days)
LORBRENA ORAL TABLET 100 MG, 25 MG	5 [^]	PA-NS; LA
LUMAKRAS ORAL TABLET 120 MG, 320 MG	5 [^]	PA-NS; LA
LYNPARZA ORAL TABLET 100 MG, 150 MG	5 [^]	PA-NS; LA; QL (120 EA per 30 days)
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG	5 [^]	PA-NS; LA
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG	5 [^]	PA-NS; LA

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藥品名稱	藥物層級	規定／上限
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG	5 [^]	PA-NS; LA
MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML	5 [^]	PA-NS; LA
MEKINIST ORAL TABLET 0.5 MG, 2 MG	5 [^]	PA-NS; LA
MEKTOVI ORAL TABLET 15 MG	5 [^]	PA-NS; LA
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	5 [^]	PA-NS; LA
MVASI INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML	5 [^]	PA-NS; LA
NERLYNX ORAL TABLET 40 MG	5 [^]	PA-NS; LA
NEXAVAR ORAL TABLET 200 MG	5 [^]	PA-NS; LA; QL (120 EA per 30 days)
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	5 [^]	PA-NS; QL (3 EA per 28 days)
ODOMZO ORAL CAPSULE 200 MG	5 [^]	PA-NS; LA
OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	5 [^]	PA-NS; LA
ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	5 [^]	PA-NS; LA
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	5 [^]	PA-NS; LA
PHESGO SUBCUTANEOUS SOLUTION 60-60-2000 MG-MG-U/ML, 80-40-2000 MG-MG-U/ML	5 [^]	PA-NS; LA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 MG	5 [^]	PA-NS
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 & 50 MG	5 [^]	PA-NS
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK 2 X 150 MG	5 [^]	PA-NS
QINLOCK ORAL TABLET 50 MG	5 [^]	PA-NS; LA
RETEVMO ORAL CAPSULE 40 MG, 80 MG	5 [^]	PA-NS; LA
REZLIDHIA ORAL CAPSULE 150 MG	5 [^]	PA-NS; LA
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG	5 [^]	PA-NS; LA
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	5 [^]	PA-NS; LA; QL (120 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
RYDAPT ORAL CAPSULE 25 MG	5 [^]	PA-NS
SCSEMBLIX ORAL TABLET 20 MG	5 [^]	PA-NS; QL (60 EA per 30 days)
SCSEMBLIX ORAL TABLET 40 MG	5 [^]	PA-NS; QL (300 EA per 30 days)
sorafenib tosylate oral tablet 200 mg	5 [^]	PA-NS; QL (120 EA per 30 days)
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	5 [^]	PA-NS
STIVARGA ORAL TABLET 40 MG	5 [^]	PA-NS; LA
sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg	5 [^]	PA-NS; QL (30 EA per 30 days)
TABRECTA ORAL TABLET 150 MG, 200 MG	5 [^]	PA-NS
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	5 [^]	PA-NS; LA
TAFINLAR ORAL TABLET SOLUBLE 10 MG	5 [^]	PA-NS; LA
TAGRISSE ORAL TABLET 40 MG, 80 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
TALZENNA ORAL CAPSULE 0.25 MG	5 [^]	PA-NS; LA; QL (90 EA per 30 days)
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG	5 [^]	PA-NS
TAZVERIK ORAL TABLET 200 MG	5 [^]	PA-NS; LA
TECENTRIQ INTRAVENOUS SOLUTION 1200 MG/20ML, 840 MG/14ML	5 [^]	PA-NS; LA
TEPMETKO ORAL TABLET 225 MG	5 [^]	PA-NS; LA
TIBSOVO ORAL TABLET 250 MG	5 [^]	PA-NS; LA
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	5 [^]	PA-NS
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 100 MG	5 [^]	PA-NS; LA
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 100 & 25 MG	5 [^]	PA-NS; LA
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 25 MG	5 [^]	PA-NS; LA
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 25 MG	5 [^]	PA-NS; LA

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藥品名稱	藥物層級	規定／上限
TRUXIMA INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML	5^	PA-NS
TUKYSA ORAL TABLET 150 MG, 50 MG	5^	PA-NS; LA
TURALIO ORAL CAPSULE 125 MG, 200 MG	5^	PA-NS; LA
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	5^	PA-NS; LA
VENCLEXTA ORAL TABLET 10 MG	4	PA-NS; LA; QL (112 EA per 28 days)
VENCLEXTA ORAL TABLET 100 MG	5^	PA-NS; LA; QL (180 EA per 30 days)
VENCLEXTA ORAL TABLET 50 MG	5^	PA-NS; LA; QL (112 EA per 28 days)
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG	5^	PA-NS; LA; QL (42 EA per 28 days)
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	5^	PA-NS; LA; QL (56 EA per 28 days)
VITRAKVI ORAL CAPSULE 100 MG, 25 MG	5^	PA-NS; LA
VITRAKVI ORAL SOLUTION 20 MG/ML	5^	PA-NS; LA
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	5^	PA-NS; LA
VONJO ORAL CAPSULE 100 MG	5^	PA-NS; LA; QL (120 EA per 30 days)
VOTRIENT ORAL TABLET 200 MG	5^	PA-NS; LA
XALKORI ORAL CAPSULE 200 MG, 250 MG	5^	PA-NS; LA
XOSPATA ORAL TABLET 40 MG	5^	PA-NS; LA
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	5^	PA-NS; LA; QL (8 EA per 28 days)
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	5^	PA-NS; LA; QL (4 EA per 28 days)
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	5^	PA-NS; LA; QL (8 EA per 28 days)
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	5^	PA-NS; LA; QL (4 EA per 28 days)
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	5^	PA-NS; LA; QL (24 EA per 28 days)
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	5^	PA-NS; LA; QL (8 EA per 28 days)

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藥品名稱	藥物層級	規定／上限
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	5 [^]	PA-NS; LA; QL (32 EA per 28 days)
ZEJULA ORAL CAPSULE 100 MG	5 [^]	PA-NS; LA; QL (90 EA per 30 days)
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	5 [^]	PA-NS; LA; QL (30 EA per 30 days)
ZELBORAF ORAL TABLET 240 MG	5 [^]	PA-NS; LA
ZIRABEV INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML	5 [^]	PA-NS; LA
ZOLINZA ORAL CAPSULE 100 MG	5 [^]	PA-NS
ZYDELIG ORAL TABLET 100 MG, 150 MG	5 [^]	PA-NS; LA
ZYKADIA ORAL TABLET 150 MG	5 [^]	PA-NS; LA
抗代謝藥物		
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	5 [^]	B/D
azacitidine injection suspension reconstituted 100 mg	5 [^]	B/D
cytarabine injection solution 20 mg/ml	3	B/D
fluorouracil intravenous solution 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 500 mg/10ml	3	B/D
gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml	4	B/D
gemcitabine hcl intravenous solution reconstituted 1 gm, 2 gm, 200 mg	4	B/D
INQOVI ORAL TABLET 35-100 MG	5 [^]	PA-NS; LA
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	5 [^]	PA-NS; LA
mercaptopurine oral tablet 50 mg	3	
methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml	3	B/D
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	3	B/D
methotrexate sodium injection solution reconstituted 1 gm	3	B/D
ONUREG ORAL TABLET 200 MG, 300 MG	5 [^]	PA-NS; LA

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藥品名稱	藥物層級 規定／上限	
pemetrexed disodium intravenous solution reconstituted 100 mg, 1000 mg, 500 mg, 750 mg	5 [^]	B/D
PURIXAN ORAL SUSPENSION 2000 MG/100ML	5 [^]	
TABLOID ORAL TABLET 40 MG	4	
抗生素		
doxorubicin hcl intravenous solution 2 mg/ml	4	B/D
doxorubicin hcl liposomal intravenous injectable 2 mg/ml	5 [^]	B/D
ELLECE INTRAVENOUS SOLUTION 200 MG/100ML, 50 MG/25ML	4	B/D
核分裂抑制劑		
DOCETAXEL CONCENTRATE 160 MG/8ML INTRAVENOUS	5 [^]	B/D
DOCETAXEL CONCENTRATE 80 MG/4ML INTRAVENOUS	5 [^]	B/D
docetaxel intravenous concentrate 160 mg/8ml, 80 mg/4ml	5 [^]	B/D
docetaxel intravenous concentrate 20 mg/ml	4	B/D
docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml	5 [^]	B/D
DOCETAXEL SOLUTION 160 MG/16ML INTRAVENOUS	5 [^]	B/D
DOCETAXEL SOLUTION 20 MG/2ML INTRAVENOUS	5 [^]	B/D
DOCETAXEL SOLUTION 80 MG/8ML INTRAVENOUS	5 [^]	B/D
etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	3	B/D
paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml	4	B/D
paclitaxel protein-bound part intravenous suspension reconstituted 100 mg	5 [^]	B/D
vincristine sulfate intravenous solution 1 mg/ml	2	B/D; GC
vinorelbine tartrate intravenous solution 10 mg/ml, 50 mg/5ml	4	B/D

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藥品名稱

藥物層級 規定／上限

激素抗惡性腫瘤藥物

abiraterone acetate oral tablet 250 mg, 500 mg	5 [^]	PA-NS
anastrozole oral tablet 1 mg	2	GC
bicalutamide oral tablet 50 mg	2	GC
ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG	4	PA-NS
EMCYT ORAL CAPSULE 140 MG	5 [^]	
ERLEADA ORAL TABLET 240 MG, 60 MG	5 [^]	PA-NS; LA
EULEXIN ORAL CAPSULE 125 MG	5 [^]	
exemestane oral tablet 25 mg	4	
fulvestrant intramuscular solution prefilled syringe 250 mg/5ml	5 [^]	B/D
letrozole oral tablet 2.5 mg	2	GC
leuprolide acetate injection kit 1 mg/0.2ml	4	PA-NS
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	5 [^]	PA-NS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	5 [^]	PA-NS
LYSODREN ORAL TABLET 500 MG	5 [^]	
megestrol acetate oral tablet 20 mg, 40 mg	3	
nilutamide oral tablet 150 mg	5 [^]	
NUBEQA ORAL TABLET 300 MG	5 [^]	PA-NS; LA
ORGOVYX ORAL TABLET 120 MG	5 [^]	PA-NS; LA
ORSERDU ORAL TABLET 345 MG, 86 MG	5 [^]	PA-NS; LA
SOLTAMOX ORAL SOLUTION 10 MG/5ML	5 [^]	
tamoxifen citrate oral tablet 10 mg, 20 mg	2	GC
toremifene citrate oral tablet 60 mg	5 [^]	
XTANDI ORAL CAPSULE 40 MG	5 [^]	PA-NS; LA
XTANDI ORAL TABLET 40 MG, 80 MG	5 [^]	PA-NS; LA

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BENDEKA INTRAVENOUS SOLUTION 100 MG/4ML	5 [^]	B/D; LA
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藥品名稱	藥物層級	規定／上限
carboplatin intravenous solution 150 mg/15ml, 450 mg/45ml, 50 mg/5ml, 600 mg/60ml	3	B/D
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml	3	B/D
cyclophosphamide injection solution reconstituted 1 gm, 2 gm, 500 mg	5 [^]	B/D
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 1 GM/5ML, 2 GM/10ML, 500 MG/2.5ML, 500 MG/ML	5 [^]	B/D
cyclophosphamide oral capsule 25 mg, 50 mg	3	B/D
CYCLOPHOSPHAMIDE ORAL TABLET 25 MG, 50 MG	4	B/D
GLEOSTINE ORAL CAPSULE 10 MG, 40 MG	4	
GLEOSTINE ORAL CAPSULE 100 MG	5 [^]	
LEUKERAN ORAL TABLET 2 MG	4	
oxaliplatin intravenous solution 100 mg/20ml, 200 mg/40ml, 50 mg/10ml	4	B/D
oxaliplatin intravenous solution reconstituted 100 mg, 50 mg	5 [^]	B/D
paraplatin intravenous solution 1000 mg/100ml	3	B/D
防護藥物		
leucovorin calcium injection solution 500 mg/50ml	4	B/D
leucovorin calcium injection solution reconstituted 100 mg, 200 mg, 350 mg, 50 mg, 500 mg	4	B/D
leucovorin calcium oral tablet 10 mg, 15 mg, 5 mg	3	
leucovorin calcium oral tablet 25 mg	4	
MESNEX ORAL TABLET 400 MG	5 [^]	
抗感染藥物		
其他抗感染藥物		
albendazole oral tablet 200 mg	5 [^]	
amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml	4	
atovaquone oral suspension 750 mg/5ml	4	

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藥品名稱	藥物層級 規定／上限	
aztreonam injection solution reconstituted 1 gm, 2 gm	4	
CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG	5 [^]	PA; LA
clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	2	GC
clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml	4	
clindamycin phosphate in d5w intravenous solution 300 mg/50ml, 600 mg/50ml, 900 mg/50ml	4	
CLINDAMYCIN PHOSPHATE IN NAACL INTRAVENOUS SOLUTION 300-0.9 MG/50ML-%, 600-0.9 MG/50ML-%, 900-0.9 MG/50ML-%	4	
clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml, 900 mg/6ml, 9000 mg/60ml	3	
colistimethate sodium (cba) injection solution reconstituted 150 mg	4	
dapsone oral tablet 100 mg, 25 mg	3	
daptomycin intravenous solution reconstituted 350 mg, 500 mg	5 [^]	
DAPTOMYCIN SOLUTION RECONSTITUTED 350 MG INTRAVENOUS	5 [^]	
EMVERM ORAL TABLET CHEWABLE 100 MG	5 [^]	QL (12 EA per 365 days)
ertapenem sodium injection solution reconstituted 1 gm	4	
gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%, 2-0.9 mg/ml-%	3	
gentamicin sulfate injection solution 10 mg/ml, 40 mg/ml	3	
imipenem-cilastatin intravenous solution reconstituted 250 mg, 500 mg	4	
ivermectin oral tablet 3 mg	3	PA; QL (12 EA per 90 days)
linezolid in sodium chloride intravenous solution 600-0.9 mg/300ml-%	4	

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藥品名稱	藥物層級 規定／上限	
linezolid intravenous solution 600 mg/300ml	4	
linezolid oral suspension reconstituted 100 mg/5ml	5^	QL (1800 ML per 30 days)
linezolid oral tablet 600 mg	4	QL (60 EA per 30 days)
meropenem intravenous solution reconstituted 1 gm, 500 mg	4	
methenamine hippurate oral tablet 1 gm	4	
metronidazole intravenous solution 500 mg/100ml	3	
metronidazole oral tablet 250 mg, 500 mg	1	GC
neomycin sulfate oral tablet 500 mg	2	GC
nitazoxanide oral tablet 500 mg	5^	QL (6 EA per 30 days)
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	3	
nitrofurantoin monohyd macro oral capsule 100 mg	3	
paromomycin sulfate oral capsule 250 mg	4	
pentamidine isethionate inhalation solution reconstituted 300 mg	4	B/D
pentamidine isethionate injection solution reconstituted 300 mg	4	
praziquantel oral tablet 600 mg	4	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	5^	
SIVEXTRO ORAL TABLET 200 MG	5^	
streptomycin sulfate intramuscular solution reconstituted 1 gm	4	
sulfadiazine oral tablet 500 mg	4	
sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5ml	4	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	3	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	1	GC
tinidazole oral tablet 250 mg, 500 mg	3	

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藥品名稱	藥物層級 規定／上限	
tobramycin inhalation nebulization solution 300 mg/5ml	5 [^]	PA
tobramycin sulfate injection solution 1.2 gm/30ml, 10 mg/ml, 2 gm/50ml, 80 mg/2ml	3	
trimethoprim oral tablet 100 mg	3	
VANCOMYCIN HCL IN NAACL INTRAVENOUS SOLUTION 1-0.9 GM/200ML-%, 500-0.9 MG/100ML-%, 750-0.9 MG/150ML-%	4	
vancomycin hcl intravenous solution reconstituted 1 gm, 10 gm, 5 gm, 500 mg, 750 mg	4	
vancomycin hcl oral capsule 125 mg	4	QL (80 EA per 180 days)
vancomycin hcl oral capsule 250 mg	4	QL (160 EA per 180 days)
四環素		
doxy 100 intravenous solution reconstituted 100 mg	4	
doxycycline hyclate intravenous solution reconstituted 100 mg	4	
doxycycline hyclate oral capsule 100 mg, 50 mg	3	
doxycycline hyclate oral tablet 100 mg, 20 mg	3	
doxycycline monohydrate oral capsule 100 mg, 50 mg	2	GC
doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg	3	
minocycline hcl oral capsule 100 mg, 50 mg, 75 mg	3	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	5 [^]	LA
NUZYRA ORAL TABLET 150 MG	5 [^]	LA
tetracycline hcl oral capsule 250 mg, 500 mg	4	PA
tigecycline intravenous solution reconstituted 50 mg	5 [^]	
TIGECYCLINE SOLUTION RECONSTITUTED 50 MG INTRAVENOUS	5 [^]	
抗病毒藥物		
acyclovir oral capsule 200 mg	2	GC

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藥品名稱	藥物層級 規定／上限	
acyclovir oral suspension 200 mg/5ml	4	
acyclovir oral tablet 400 mg, 800 mg	2	GC
acyclovir sodium intravenous solution 50 mg/ml	4	B/D
adefovir dipivoxil oral tablet 10 mg	5 [^]	
BARACLUDE ORAL SOLUTION 0.05 MG/ML	5 [^]	
entecavir oral tablet 0.5 mg, 1 mg	4	
EPCLUSA ORAL PACKET 150-37.5 MG, 200-50 MG	5 [^]	PA
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG	5 [^]	PA
EPIVIR HBV ORAL SOLUTION 5 MG/ML	4	
famciclovir oral tablet 125 mg, 250 mg, 500 mg	3	
ganciclovir sodium intravenous solution reconstituted 500 mg	4	B/D
HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG	5 [^]	PA
HARVONI ORAL TABLET 45-200 MG, 90-400 MG	5 [^]	PA
lamivudine oral tablet 100 mg	4	
MAVYRET ORAL PACKET 50-20 MG	5 [^]	PA
MAVYRET ORAL TABLET 100-40 MG	5 [^]	PA
oseltamivir phosphate oral capsule 30 mg	3	QL (168 EA per 365 days)
oseltamivir phosphate oral capsule 45 mg, 75 mg	3	QL (84 EA per 365 days)
oseltamivir phosphate oral suspension reconstituted 6 mg/ml	3	QL (1080 ML per 365 days)
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	5 [^]	PA
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML	5 [^]	PA
PREVYMIS ORAL TABLET 240 MG, 480 MG	5 [^]	PA; QL (28 EA per 28 days)
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	3	QL (120 EA per 365 days)
ribavirin oral capsule 200 mg	3	
ribavirin oral tablet 200 mg	4	
rimantadine hcl oral tablet 100 mg	4	
valacyclovir hcl oral tablet 1 gm, 500 mg	3	

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藥品名稱	藥物層級 規定／上限	
valganciclovir hcl oral solution reconstituted 50 mg/ml	5 [^]	
valganciclovir hcl oral tablet 450 mg	3	
VEMLIDY ORAL TABLET 25 MG	5 [^]	
VOSEVI ORAL TABLET 400-100-100 MG	5 [^]	PA
抗瘧疾藥物		
atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg	4	
chloroquine phosphate oral tablet 250 mg, 500 mg	4	
COARTEM ORAL TABLET 20-120 MG	4	
mefloquine hcl oral tablet 250 mg	3	
PRIMAQUINE PHOSPHATE ORAL TABLET 26.3 (15 BASE) MG	3	
primaquine phosphate tablet 26.3 (15 base) mg oral	3	
quinine sulfate oral capsule 324 mg	4	PA
抗真菌藥物		
ABELCET INTRAVENOUS SUSPENSION 5 MG/ML	4	B/D
amphotericin b intravenous solution reconstituted 50 mg	4	B/D
amphotericin b liposome intravenous suspension reconstituted 50 mg	5 [^]	B/D
caspofungin acetate intravenous solution reconstituted 50 mg, 70 mg	4	
fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%	3	
fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml	3	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	2	GC
flucytosine oral capsule 250 mg, 500 mg	5 [^]	PA
griseofulvin microsize oral suspension 125 mg/5ml	4	
griseofulvin microsize oral tablet 500 mg	4	

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藥品名稱	藥物層級	規定／上限
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	4	
itraconazole oral capsule 100 mg	4	PA
ketoconazole oral tablet 200 mg	3	PA
micafungin sodium intravenous solution reconstituted 100 mg, 50 mg	5^	
NOXAFIL ORAL SUSPENSION 40 MG/ML	5^	PA; QL (630 ML per 30 days)
nystatin oral tablet 500000 unit	3	
posaconazole oral suspension 40 mg/ml	5^	PA; QL (630 ML per 30 days)
posaconazole oral tablet delayed release 100 mg	5^	PA; QL (93 EA per 30 days)
terbinafine hcl oral tablet 250 mg	1	GC; QL (90 EA per 365 days)
voriconazole intravenous solution reconstituted 200 mg	5^	PA
voriconazole oral suspension reconstituted 40 mg/ml	5^	PA
voriconazole oral tablet 200 mg	4	PA; QL (120 EA per 30 days)
voriconazole oral tablet 50 mg	4	PA; QL (480 EA per 30 days)
抗結核藥物		
cycloserine oral capsule 250 mg	5^	
ethambutol hcl oral tablet 100 mg, 400 mg	3	
isoniazid oral syrup 50 mg/5ml	4	
isoniazid oral tablet 100 mg, 300 mg	1	GC
PRIFTIN ORAL TABLET 150 MG	4	
pyrazinamide oral tablet 500 mg	4	
rifabutin oral capsule 150 mg	4	
rifampin intravenous solution reconstituted 600 mg	4	
rifampin oral capsule 150 mg, 300 mg	3	
SIRTURO ORAL TABLET 100 MG, 20 MG	5^	PA; LA
TRECTOR ORAL TABLET 250 MG	4	
抗逆轉錄病毒組合藥物		
abacavir sulfate-lamivudine oral tablet 600-300 mg	3	

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藥品名稱	藥物層級	規定／上限
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	5 [^]	
CIMDUO ORAL TABLET 300-300 MG	5 [^]	
COMPLERA ORAL TABLET 200-25-300 MG	5 [^]	
DELSTRIGO ORAL TABLET 100-300-300 MG	5 [^]	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	5 [^]	QL (30 EA per 30 days)
DOVATO ORAL TABLET 50-300 MG	5 [^]	
efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg	5 [^]	
efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg, 600-300-300 mg	5 [^]	
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	5 [^]	QL (30 EA per 30 days)
EVOTAZ ORAL TABLET 300-150 MG	5 [^]	
GENVOYA ORAL TABLET 150-150-200-10 MG	5 [^]	
JULUCA ORAL TABLET 50-25 MG	5 [^]	
lamivudine-zidovudine oral tablet 150-300 mg	4	
lopinavir-ritonavir oral solution 400-100 mg/5ml	4	
lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg	4	
ODEFSEY ORAL TABLET 200-25-25 MG	5 [^]	
PREZCOBIX ORAL TABLET 800-150 MG	5 [^]	
STRIBILD ORAL TABLET 150-150-200-300 MG	5 [^]	
SYMTUZA ORAL TABLET 800-150-200-10 MG	5 [^]	
TRIUMEQ ORAL TABLET 600-50-300 MG	5 [^]	
TRIUMEQ PD ORAL TABLET SOLUBLE 60-5-30 MG	5 [^]	
TRIZIVIR ORAL TABLET 300-150-300 MG	5 [^]	
抗逆轉錄病毒藥物		
abacavir sulfate oral solution 20 mg/ml	4	
abacavir sulfate oral tablet 300 mg	3	
APTIVUS ORAL CAPSULE 250 MG	5 [^]	

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藥品名稱	藥物層級 規定／上限	
atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg	4	
EDURANT ORAL TABLET 25 MG	5 [^]	
efavirenz oral capsule 200 mg, 50 mg	4	
efavirenz oral tablet 600 mg	4	
emtricitabine oral capsule 200 mg	3	
EMTRIVA ORAL SOLUTION 10 MG/ML	4	
etravirine oral tablet 100 mg, 200 mg	5 [^]	
fosamprenavir calcium oral tablet 700 mg	5 [^]	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG	5 [^]	
INTELENCE ORAL TABLET 25 MG	4	
ISENTRESS HD ORAL TABLET 600 MG	5 [^]	
ISENTRESS ORAL PACKET 100 MG	5 [^]	
ISENTRESS ORAL TABLET 400 MG	5 [^]	
ISENTRESS ORAL TABLET CHEWABLE 100 MG	5 [^]	
ISENTRESS ORAL TABLET CHEWABLE 25 MG	4	
lamivudine oral solution 10 mg/ml	3	
lamivudine oral tablet 150 mg, 300 mg	3	
LEXIVA ORAL SUSPENSION 50 MG/ML	4	
maraviroc oral tablet 150 mg, 300 mg	5 [^]	
nevirapine er oral tablet extended release 24 hour 400 mg	4	
nevirapine oral suspension 50 mg/5ml	4	
nevirapine oral tablet 200 mg	2	GC
NORVIR ORAL PACKET 100 MG	4	
PIFELTRO ORAL TABLET 100 MG	5 [^]	
PREZISTA ORAL SUSPENSION 100 MG/ML	5 [^]	QL (400 ML per 30 days)
PREZISTA ORAL TABLET 150 MG	5 [^]	QL (240 EA per 30 days)
PREZISTA ORAL TABLET 600 MG	5 [^]	QL (60 EA per 30 days)
PREZISTA ORAL TABLET 75 MG	4	QL (480 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
PREZISTA ORAL TABLET 800 MG	5 [^]	QL (30 EA per 30 days)
REYATAZ ORAL PACKET 50 MG	5 [^]	
ritonavir oral tablet 100 mg	3	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG	5 [^]	
SELZENTRY ORAL SOLUTION 20 MG/ML	5 [^]	
SELZENTRY ORAL TABLET 25 MG	4	
SELZENTRY ORAL TABLET 75 MG	5 [^]	
SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG, 5 X 300 MG	5 [^]	LA
tenofovir disoproxil fumarate oral tablet 300 mg	3	
TIVICAY ORAL TABLET 10 MG	3	
TIVICAY ORAL TABLET 25 MG, 50 MG	5 [^]	
TIVICAY PD ORAL TABLET SOLUBLE 5 MG	5 [^]	
TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33ML	5 [^]	LA
TYBOST ORAL TABLET 150 MG	3	
VIRACEPT ORAL TABLET 250 MG, 625 MG	5 [^]	
VIREAD ORAL POWDER 40 MG/GM	5 [^]	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	5 [^]	
zidovudine oral capsule 100 mg	4	
zidovudine oral syrup 50 mg/5ml	4	
zidovudine oral tablet 300 mg	3	
氟喹諾酮類藥物		
CIPRO ORAL SUSPENSION RECONSTITUTED 500 MG/5ML (10%)	4	
ciprofloxacin hcl oral tablet 100 mg	4	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	1	GC
ciprofloxacin in d5w intravenous solution 200 mg/100ml, 400 mg/200ml	3	
levofloxacin in d5w intravenous solution 250 mg/50ml, 500 mg/100ml, 750 mg/150ml	3	

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藥品名稱	藥物層級	規定／上限
levofloxacin intravenous solution 25 mg/ml	4	
levofloxacin oral solution 25 mg/ml	4	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	1	GC
moxifloxacin hcl oral tablet 400 mg	4	
紅黴素／大環內酯類藥物		
azithromycin intravenous solution reconstituted 500 mg	3	
azithromycin oral packet 1 gm	3	
azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	3	
azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg	1	GC
clarithromycin er oral tablet extended release 24 hour 500 mg	3	
clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	4	
clarithromycin oral tablet 250 mg, 500 mg	3	
DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML	5 [^]	
DIFICID ORAL TABLET 200 MG	5 [^]	
e.e.s. 400 oral tablet 400 mg	4	
ery-tab oral tablet delayed release 250 mg, 333 mg, 500 mg	4	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	4	
erythrocin stearate oral tablet 250 mg	4	
erythromycin base oral capsule delayed release particles 250 mg	4	
erythromycin base oral tablet 250 mg, 500 mg	4	
erythromycin ethylsuccinate oral tablet 400 mg	4	
erythromycin lactobionate intravenous solution reconstituted 500 mg	4	

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藥品名稱	藥物層級	規定／上限
erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg	4	
青黴素類藥物		
amoxicillin oral capsule 250 mg, 500 mg	1	GC
amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1	GC
amoxicillin oral tablet 500 mg, 875 mg	1	GC
amoxicillin oral tablet chewable 125 mg, 250 mg	2	GC
amoxicillin-pot clavulanate er oral tablet extended release 12 hour 1000-62.5 mg	4	
amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml	3	
amoxicillin-pot clavulanate oral suspension reconstituted 250-62.5 mg/5ml	4	
amoxicillin-pot clavulanate oral tablet 250-125 mg	3	
amoxicillin-pot clavulanate oral tablet 500-125 mg, 875-125 mg	2	GC
amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg	4	
ampicillin oral capsule 500 mg	2	GC
ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 2 gm, 250 mg, 500 mg	4	
ampicillin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm	4	
ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm	4	
ampicillin-sulbactam sodium intravenous solution reconstituted 1.5 (1-0.5) gm, 15 (10-5) gm, 3 (2-1) gm	4	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1200000 UNIT/2ML, 2400000 UNIT/4ML, 600000 UNIT/ML	4	
dicloxacillin sodium oral capsule 250 mg, 500 mg	3	

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藥品名稱	藥物層級 規定／上限	
nafcillin sodium injection solution reconstituted 1 gm, 2 gm	4	
nafcillin sodium intravenous solution reconstituted 10 gm	5 [^]	
oxacillin sodium injection solution reconstituted 1 gm, 2 gm	4	
oxacillin sodium intravenous solution reconstituted 10 gm	4	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION 40000 UNIT/ML, 60000 UNIT/ML	4	
penicillin g potassium injection solution reconstituted 20000000 unit, 5000000 unit	4	
PENICILLIN G PROCAINE INTRAMUSCULAR SUSPENSION 600000 UNIT/ML	4	
penicillin g sodium injection solution reconstituted 5000000 unit	4	
penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml	2	GC
penicillin v potassium oral tablet 250 mg, 500 mg	1	GC
pfizerpen injection solution reconstituted 20000000 unit, 5000000 unit	4	
piperacillin sod-tazobactam so intravenous solution reconstituted 13.5 (12-1.5) gm, 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm	4	
頭孢菌素		
CEFACLOR ER ORAL TABLET EXTENDED RELEASE 12 HOUR 500 MG	4	
cefaclor oral capsule 250 mg, 500 mg	3	
cefaclor oral suspension reconstituted 250 mg/5ml	4	
cefadroxil oral capsule 500 mg	2	GC
cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml	3	

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藥品名稱	藥物層級	規定／上限
cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 2 gm, 500 mg	3	
cefazolin sodium intravenous solution reconstituted 1 gm	3	
CEFAZOLIN SODIUM INTRAVENOUS SOLUTION RECONSTITUTED 2 GM, 3 GM	4	
CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION 1-4 GM/50ML-%, 2-4 GM/100ML-%	4	
cefdinir oral capsule 300 mg	2	GC
cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	3	
cefepime hcl injection solution reconstituted 1 gm	4	
cefepime hcl intravenous solution reconstituted 2 gm	4	
cefixime oral capsule 400 mg	4	
cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	4	
cefoxitin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm	4	
cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml	4	
cefpodoxime proxetil oral tablet 100 mg, 200 mg	3	
cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	3	
cefprozil oral tablet 250 mg, 500 mg	3	
ceftazidime injection solution reconstituted 1 gm, 6 gm	4	
ceftazidime intravenous solution reconstituted 2 gm	4	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	4	
ceftriaxone sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm	4	
cefuroxime axetil oral tablet 250 mg, 500 mg	3	

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藥品名稱	藥物層級	規定／上限
cefuroxime sodium injection solution reconstituted 750 mg	3	
cefuroxime sodium intravenous solution reconstituted 1.5 gm	3	
cephalexin oral capsule 250 mg, 500 mg	2	GC
cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	3	
tazicef injection solution reconstituted 1 gm	4	
tazicef intravenous solution reconstituted 1 gm, 2 gm, 6 gm	4	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 400 MG, 600 MG	5 [^]	
營養／補充劑		
電解質/礦物質，注射		
DEXTROSE 5%/ELECTROLYTE #48 INTRAVENOUS SOLUTION	4	
dextrose in lactated ringers intravenous solution 5 %	3	
DEXTROSE-NACL INTRAVENOUS SOLUTION 10-0.2 %	3	
dextrose-nacl intravenous solution 10-0.45 %, 5-0.2 %, 5-0.45 %, 5-0.9 %	3	
DEXTROSE-NACL INTRAVENOUS SOLUTION 2.5-0.45 %	4	
dextrose-sodium chloride intravenous solution 2.5-0.45 %, 5-0.225 %, 5-0.3 %	3	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	4	
ISOLYTE-S INTRAVENOUS SOLUTION	4	
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	4	
kcl in dextrose-nacl intravenous solution 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-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%	3	

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藥品名稱	藥物層級 規定／上限
KCL IN DEXTROSE-NACL SOLUTION 40-5-0.9 MEQ/L- %- % INTRAVENOUS	4
lactated ringers intravenous solution	3
magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-%	3
MAGNESIUM SULFATE IN D5W SOLUTION 1-5 GM/100ML-% INTRAVENOUS	3
magnesium sulfate injection solution 50 %, 50 % (10ml syringe)	3
magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	3
MAGNESIUM SULFATE SOLUTION 2 GM/50ML INTRAVENOUS	3
MAGNESIUM SULFATE SOLUTION 20 GM/500ML INTRAVENOUS	3
MAGNESIUM SULFATE SOLUTION 4 GM/100ML INTRAVENOUS	3
MAGNESIUM SULFATE SOLUTION 4 GM/50ML INTRAVENOUS	3
MAGNESIUM SULFATE SOLUTION 40 GM/1000ML INTRAVENOUS	3
multiple electro type 1 ph 5.5 intravenous solution	4
multiple electro type 1 ph 7.4 intravenous solution	4
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	4
PLASMA-LYTE A INTRAVENOUS SOLUTION	4
potassium chloride in nacl intravenous solution 20- 0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%	3
POTASSIUM CHLORIDE IN NAACL SOLUTION 20-0.45 MEQ/L-% INTRAVENOUS	4
POTASSIUM CHLORIDE IN NAACL SOLUTION 20-0.9 MEQ/L-% INTRAVENOUS	3

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藥品名稱	藥物層級 規定／上限	
POTASSIUM CHLORIDE IN NAACL SOLUTION 40-0.9 MEQ/L-% INTRAVENOUS	4	
POTASSIUM CHLORIDE INTRAVENOUS SOLUTION 10 MEQ/50ML, 20 MEQ/50ML	4	
potassium chloride intravenous solution 2 meq/ml, 2 meq/ml (20 ml)	3	
potassium chloride solution 10 meq/100ml intravenous	4	
potassium chloride solution 20 meq/100ml intravenous	4	
potassium chloride solution 20 meq/50ml intravenous	4	
potassium chloride solution 40 meq/100ml intravenous	4	
potassium cl in dextrose 5% intravenous solution 20 meq/l	3	
sodium chloride injection solution 2.5 meq/ml	3	
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	3	
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	4	B/D
電解質/礦物質/維生素，口服		
klor-con 10 oral tablet extended release 10 meq	2	GC
klor-con m10 oral tablet extended release 10 meq	2	GC
klor-con m15 oral tablet extended release 15 meq	3	
klor-con m20 oral tablet extended release 20 meq	2	GC
klor-con oral packet 20 meq	4	
klor-con oral tablet extended release 8 meq	2	GC
M-NATAL PLUS ORAL TABLET 27-1 MG	3	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	2	GC
potassium chloride crys er oral tablet extended release 15 meq	3	

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藥品名稱	藥物層級	規定／上限
potassium chloride er oral capsule extended release 10 meq, 8 meq	3	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	2	GC
potassium chloride oral packet 20 meq	4	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	4	
PRENATAL VITAMIN WITH FOLIC ACID GREATER THAN 0.8 MG ORAL TABLET ORAL TABLET 27-1 MG	3	
sodium fluoride chew, tab, 1.1 (0.5 f) mg/ml soln oral tablet 2.2 (1 f) mg	2	GC
靜脈輸入營養		
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 %	4	B/D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 %	4	B/D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 %	4	B/D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 %	4	B/D
CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION 6 %	4	B/D
CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION 8 %	4	B/D
CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION 8 %	4	B/D
clinisol sf intravenous solution 15 %	4	B/D
CLINOLIPID INTRAVENOUS EMULSION 20 %	4	B/D
dextrose intravenous solution 10 %, 5 %	3	
dextrose intravenous solution 50 %, 70 %	3	B/D
INTRALIPID INTRAVENOUS EMULSION 20 %, 30 %	4	B/D
NUTRILIPID INTRAVENOUS EMULSION 20 %	4	B/D
plenamine intravenous solution 15 %	4	B/D

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藥品名稱	藥物層級 規定／上限	
PREMASOL INTRAVENOUS SOLUTION 10 %	5 [^]	B/D
PROSOL INTRAVENOUS SOLUTION 20 %	4	B/D
TRAVASOL INTRAVENOUS SOLUTION 10 %	4	B/D
TROPHAMINE INTRAVENOUS SOLUTION 10 %	4	B/D
生殖泌尿道		
其他		
acetic acid irrigation solution 0.25 %	2	GC
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	3	
potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg)	4	
尿路解痙藥		
darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg	4	ST; QL (30 EA per 30 days)
fesoterodine fumarate er oral tablet extended release 24 hour 4 mg, 8 mg	4	QL (30 EA per 30 days)
GEMTESA ORAL TABLET 75 MG	4	QL (30 EA per 30 days)
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER 8 MG/ML	4	QL (300 ML per 28 days)
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG	4	QL (30 EA per 30 days)
oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg	2	GC; QL (60 EA per 30 days)
oxybutynin chloride er oral tablet extended release 24 hour 5 mg	2	GC; QL (30 EA per 30 days)
oxybutynin chloride oral solution 5 mg/5ml	2	GC
oxybutynin chloride oral tablet 5 mg	2	GC
solifenacin succinate oral tablet 10 mg, 5 mg	3	QL (30 EA per 30 days)
tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg	4	ST; QL (30 EA per 30 days)
tolterodine tartrate oral tablet 1 mg, 2 mg	4	QL (60 EA per 30 days)

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藥品名稱	藥物層級 規定／上限	
tropium chloride er oral capsule extended release 24 hour 60 mg	4	QL (30 EA per 30 days)
tropium chloride oral tablet 20 mg	3	QL (60 EA per 30 days)
抗陰道感染藥		
clindamycin phosphate vaginal cream 2 %	3	
metronidazole vaginal gel 0.75 %	3	
terconazole vaginal cream 0.4 %, 0.8 %	3	
terconazole vaginal suppository 80 mg	3	
良性前列腺增生症		
alfuzosin hcl er oral tablet extended release 24 hour 10 mg	2	GC; QL (30 EA per 30 days)
dutasteride oral capsule 0.5 mg	2	GC; QL (30 EA per 30 days)
dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg	4	QL (30 EA per 30 days)
finasteride oral tablet 5 mg	1	GC
silodosin oral capsule 4 mg, 8 mg	3	QL (30 EA per 30 days)
tamsulosin hcl oral capsule 0.4 mg	2	GC
眼用藥物		
其他		
atropine sulfate ophthalmic solution 1 %	3	
ATROPINE SULFATE SOLUTION 1 % OPHTHALMIC	3	
CYSTADROPS OPHTHALMIC SOLUTION 0.37 %	5 [^]	PA; LA
CYSTARAN OPHTHALMIC SOLUTION 0.44 %	5 [^]	PA; LA
proparacaine hcl ophthalmic solution 0.5 %	3	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	3	
RESTASIS OPHTHALMIC EMULSION 0.05 %	3	
TYRVAYA NASAL SOLUTION 0.03 MG/ACT	4	
抗感染／抗發炎		
bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %	3	

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藥品名稱	藥物層級 規定／上限	
neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1	2	GC
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	2	GC
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	4	
neo-polycin hc ophthalmic ointment 1 %	3	
sulfacetamide-prednisolone ophthalmic solution 10-0.23 %	2	GC
TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 %	3	
TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 %	3	
tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %	4	
ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 %	3	
抗感染藥物		
bacitracin ophthalmic ointment 500 unit/gm	3	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	2	GC
BESIVANCE OPHTHALMIC SUSPENSION 0.6 %	3	
CILOXAN OPHTHALMIC OINTMENT 0.3 %	3	
ciprofloxacin hcl ophthalmic solution 0.3 %	2	GC
erythromycin ophthalmic ointment 5 mg/gm	2	GC
gatifloxacin ophthalmic solution 0.5 %	2	GC
gentak ophthalmic ointment 0.3 %	3	
gentamicin sulfate ophthalmic solution 0.3 %	2	GC
moxifloxacin hcl ophthalmic solution 0.5 %	3	
NATACYN OPHTHALMIC SUSPENSION 5 %	4	
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	3	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	3	

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藥品名稱	藥物層級 規定／上限	
neo-polycin ophthalmic ointment 3.5-400-10000	3	
ofloxacin ophthalmic solution 0.3 %	2	GC
polycin ophthalmic ointment 500-10000 unit/gm	2	GC
polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%	1	GC
sulfacetamide sodium ophthalmic ointment 10 %	3	
sulfacetamide sodium ophthalmic solution 10 %	3	
tobramycin ophthalmic solution 0.3 %	1	GC
trifluridine ophthalmic solution 1 %	4	
ZIRGAN OPHTHALMIC GEL 0.15 %	4	
抗過敏		
azelastine hcl ophthalmic solution 0.05 %	3	
cromolyn sodium ophthalmic solution 4 %	2	GC
olopatadine hcl ophthalmic solution 0.1 %	3	
ZERVIAE OPHTHALMIC SOLUTION 0.24 %	4	
抗青光眼		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	3	
betaxolol hcl ophthalmic solution 0.5 %	3	
BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 %	3	
brimonidine tartrate ophthalmic solution 0.15 %	4	
brimonidine tartrate ophthalmic solution 0.2 %	1	GC
brinzolamide ophthalmic suspension 1 %	4	
carteolol hcl ophthalmic solution 1 %	2	GC
COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 %	3	
dorzolamide hcl ophthalmic solution 2 %	2	GC
dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 %	2	GC
latanoprost ophthalmic solution 0.005 %	1	GC
levobunolol hcl ophthalmic solution 0.5 %	2	GC
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	3	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	3	

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藥品名稱	藥物層級 規定／上限	
RHOPRESSA OPHTHALMIC SOLUTION 0.02 %	3	
ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 %	4	
SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 %	3	
timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %	4	
timolol maleate ophthalmic solution 0.25 %, 0.5 %	1	GC
travoprost (bak free) ophthalmic solution 0.004 %	4	
VYZULTA OPHTHALMIC SOLUTION 0.024 %	4	
消炎藥物		
ALREX OPHTHALMIC SUSPENSION 0.2 %	3	
bromfenac sodium (once-daily) ophthalmic solution 0.09 %	4	
BROMSITE OPHTHALMIC SOLUTION 0.075 %	4	
dexamethasone sodium phosphate ophthalmic solution 0.1 %	3	
diclofenac sodium ophthalmic solution 0.1 %	2	GC
difluprednate ophthalmic emulsion 0.05 %	4	
FLAREX OPHTHALMIC SUSPENSION 0.1 %	4	
fluorometholone ophthalmic suspension 0.1 %	3	
flurbiprofen sodium ophthalmic solution 0.03 %	3	
ILEVRO OPHTHALMIC SUSPENSION 0.3 %	3	
ketorolac tromethamine ophthalmic solution 0.4 %	3	
ketorolac tromethamine ophthalmic solution 0.5 %	2	GC
LOTEMAX OPHTHALMIC OINTMENT 0.5 %	3	
prednisolone acetate ophthalmic suspension 1 %	3	
PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION 1 %	3	
PROLENSA OPHTHALMIC SOLUTION 0.07 %	3	
第五型磷酸二酯酶抑制劑		
第五型磷酸二酯酶抑制劑		
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	NT; QL (6 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
varafenil hcl oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	1	NT; QL (6 EA per 30 days)
耳部		
耳用藥劑		
acetic acid otic solution 2 %	3	
CIPRO HC OTIC SUSPENSION 0.2-1 %	4	
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	3	
flac otic oil 0.01 %	2	GC
fluocinolone acetonide otic oil 0.01 %	2	GC
neomycin-polymyxin-hc otic solution 1 %	3	
neomycin-polymyxin-hc otic suspension 3.5-10000-1	3	
ofloxacin otic solution 0.3 %	4	
胃腸道		
H2 受體拮抗劑		
famotidine (pf) intravenous solution 20 mg/2ml	3	
famotidine intravenous solution 200 mg/20ml, 40 mg/4ml	3	
famotidine oral suspension reconstituted 40 mg/5ml	4	QL (300 ML per 30 days)
famotidine oral tablet 20 mg	1	GC; QL (120 EA per 30 days)
famotidine oral tablet 40 mg	1	GC; QL (60 EA per 30 days)
famotidine premixed intravenous solution 20-0.9 mg/50ml-%	3	
nizatidine oral capsule 150 mg, 300 mg	4	
其他		
alosetron hcl oral tablet 0.5 mg, 1 mg	5^	PA; QL (60 EA per 30 days)
CARAFATE ORAL SUSPENSION 1 GM/10ML	4	PA
cromolyn sodium oral concentrate 100 mg/5ml	4	
diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml	4	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	3	
GATTEX SUBCUTANEOUS KIT 5 MG	5^	PA; LA

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藥品名稱	藥物層級	規定／上限
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	4	QL (30 EA per 30 days)
loperamide hcl oral capsule 2 mg	3	
lubiprostone oral capsule 24 mcg, 8 mcg	4	QL (60 EA per 30 days)
misoprostol oral tablet 100 mcg, 200 mcg	3	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	3	QL (30 EA per 30 days)
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 12 MG/0.6ML (0.6ML SYRINGE), 8 MG/0.4ML	5 [^]	PA
sucalfate oral suspension 1 gm/10ml	4	PA
sucalfate oral tablet 1 gm	3	
ursodiol oral capsule 300 mg	3	
ursodiol oral tablet 250 mg, 500 mg	4	
XERMELO ORAL TABLET 250 MG	5 [^]	PA; LA; QL (90 EA per 30 days)
XIFAXAN ORAL TABLET 550 MG	5 [^]	PA
止吐藥物		
aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg, 80 mg	4	B/D
compro rectal suppository 25 mg	4	
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	4	B/D; QL (60 EA per 30 days)
granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml	4	
granisetron hcl oral tablet 1 mg	4	B/D
meclizine hcl oral tablet 12.5 mg, 25 mg	2	GC
metoclopramide hcl injection solution 5 mg/ml	3	
metoclopramide hcl oral solution 5 mg/5ml	3	
metoclopramide hcl oral tablet 10 mg, 5 mg	1	GC
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml	3	
ondansetron hcl injection solution prefilled syringe 4 mg/2ml	3	
ondansetron hcl oral solution 4 mg/5ml	4	
ondansetron hcl oral tablet 4 mg, 8 mg	3	

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藥品名稱	藥物層級	規定／上限
ondansetron oral tablet dispersible 4 mg, 8 mg	3	
prochlorperazine edisylate injection solution 10 mg/2ml	4	
prochlorperazine maleate oral tablet 10 mg, 5 mg	2	GC
prochlorperazine rectal suppository 25 mg	4	
promethazine hcl injection solution 25 mg/ml, 50 mg/ml	3	PA; PA if 70 years and older
promethazine hcl oral syrup 6.25 mg/5ml	3	PA; PA if 70 years and older
promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg	3	PA; PA if 70 years and older
scopolamine transdermal patch 72 hour 1 mg/3days	4	PA; PA if 70 years and older; QL (10 EA per 30 days)
炎症性腸病		
balsalazide disodium oral capsule 750 mg	3	
budesonide er oral tablet extended release 24 hour 9 mg	5^	PA; QL (30 EA per 30 days)
budesonide oral capsule delayed release particles 3 mg	4	PA; QL (90 EA per 30 days)
hydrocortisone rectal enema 100 mg/60ml	4	
mesalamine er oral capsule extended release 24 hour 0.375 gm	4	QL (120 EA per 30 days)
mesalamine oral capsule delayed release 400 mg	4	QL (180 EA per 30 days)
mesalamine oral tablet delayed release 1.2 gm, 800 mg	4	
mesalamine rectal enema 4 gm	4	
mesalamine rectal suppository 1000 mg	4	
mesalamine-cleanser rectal kit 4 gm	4	
sulfasalazine oral tablet 500 mg	2	GC
sulfasalazine oral tablet delayed release 500 mg	3	
緩瀉劑		
constulose oral solution 10 gm/15ml	3	
enulose oral solution 10 gm/15ml	3	
gavilyte-c oral solution reconstituted 240 gm	2	GC

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藥品名稱	藥物層級 規定／上限	
gavilyte-g oral solution reconstituted 236 gm	2	GC
generlac oral solution 10 gm/15ml	3	
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	3	
lactulose encephalopathy oral solution 10 gm/15ml	3	
lactulose oral solution 10 gm/15ml	3	
na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml	4	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm	2	GC
peg-3350/electrolytes oral solution reconstituted 236 gm	2	GC
PLENVU ORAL SOLUTION RECONSTITUTED 140 GM	4	
SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/177ML	4	
胰蛋白酶		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT	3	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	4	
質子泵抑制劑		
dexlansoprazole oral capsule delayed release 30 mg, 60 mg	4	
esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg	4	ST
lansoprazole oral capsule delayed release 15 mg, 30 mg	3	
lansoprazole oral tablet delayed release dispersible 15 mg, 30 mg	4	ST

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藥品名稱	藥物層級	規定／上限
omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg	1	GC
pantoprazole sodium intravenous solution reconstituted 40 mg	4	
pantoprazole sodium oral tablet delayed release 20 mg, 40 mg	1	GC
rabeprazole sodium oral tablet delayed release 20 mg	3	
鎮痙藥物		
dicyclomine hcl oral capsule 10 mg	3	
dicyclomine hcl oral solution 10 mg/5ml	4	
dicyclomine hcl oral tablet 20 mg	3	
glycopyrrolate oral tablet 1 mg, 2 mg	3	
血液學		
其他		
anagrelide hcl oral capsule 0.5 mg, 1 mg	4	
BERINERT INTRAVENOUS KIT 500 UNIT	5 [^]	PA; LA; QL (24 EA per 30 days)
cilostazol oral tablet 100 mg, 50 mg	2	GC
DOPTELET ORAL TABLET 20 MG, 20 MG (10 PACK), 20 MG(15 PACK)	5 [^]	PA; LA
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	3	
ENDARI ORAL PACKET 5 GM	5 [^]	PA; LA
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	5 [^]	PA; LA; QL (30 EA per 30 days)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	5 [^]	PA; LA; QL (20 EA per 30 days)
icatibant acetate subcutaneous solution prefilled syringe 30 mg/3ml	5 [^]	PA; QL (27 ML per 30 days)
pentoxifylline er oral tablet extended release 400 mg	2	GC
PROMACTA ORAL PACKET 12.5 MG	5 [^]	PA; LA; QL (360 EA per 30 days)
PROMACTA ORAL PACKET 25 MG	5 [^]	PA; LA; QL (180 EA per 30 days)

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藥品名稱	藥物層級 規定／上限	
PROMACTA ORAL TABLET 12.5 MG, 25 MG	5 [^]	PA; LA; QL (30 EA per 30 days)
PROMACTA ORAL TABLET 50 MG, 75 MG	5 [^]	PA; LA; QL (60 EA per 30 days)
sajazir subcutaneous solution prefilled syringe 30 mg/3ml	5 [^]	PA; LA; QL (27 ML per 30 days)
tranexamic acid intravenous solution 1000 mg/10ml	4	
tranexamic acid oral tablet 650 mg	3	
抗凝血劑		
dabigatran etexilate mesylate oral capsule 150 mg, 75 mg	4	QL (60 EA per 30 days)
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG	3	QL (74 EA per 30 days)
ELIQUIS ORAL TABLET 2.5 MG	3	QL (60 EA per 30 days)
ELIQUIS ORAL TABLET 5 MG	3	QL (74 EA per 30 days)
enoxaparin sodium injection solution 300 mg/3ml	4	
enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml	4	
fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml	5 [^]	
fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml	4	
HEPARIN (PORCINE) IN NAACL INTRAVENOUS SOLUTION 12500-0.45 UT/250ML-%, 25000-0.45 UT/250ML-%, 25000-0.45 UT/500ML-%	3	
heparin sod (porcine) in d5w intravenous solution 100 unit/ml, 25000-5 ut/500ml-%, 40-5 unit/ml-%	3	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	3	B/D
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	GC
PRADAXA ORAL CAPSULE 110 MG	4	QL (120 EA per 30 days)
PRADAXA ORAL CAPSULE 150 MG, 75 MG	4	QL (60 EA per 30 days)

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藥品名稱	藥物層級	規定／上限
warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	GC
XARELTO ORAL SUSPENSION RECONSTITUTED 1 MG/ML	3	QL (620 ML per 30 days)
XARELTO ORAL TABLET 10 MG, 20 MG	3	QL (30 EA per 30 days)
XARELTO ORAL TABLET 15 MG, 2.5 MG	3	QL (60 EA per 30 days)
XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG	3	QL (51 EA per 30 days)
血小板聚合抑制劑		
aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg	4	
BRILINTA ORAL TABLET 60 MG, 90 MG	3	
clopidogrel bisulfate oral tablet 75 mg	1	GC
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	3	PA; PA if 70 years and older
prasugrel hcl oral tablet 10 mg, 5 mg	3	
造血生長因子		
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	3	PA
PROCRIT INJECTION SOLUTION 20000 UNIT/ML, 40000 UNIT/ML	5^	PA
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML	5^	PA
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML	5^	PA
鎮痛藥		
痛風		
allopurinol oral tablet 100 mg, 300 mg	1	GC
colchicine oral tablet 0.6 mg	4	QL (120 EA per 30 days)
colchicine-probenecid oral tablet 0.5-500 mg	3	
febuxostat oral tablet 40 mg, 80 mg	4	PA
MITIGARE ORAL CAPSULE 0.6 MG	3	QL (60 EA per 30 days)
probenecid oral tablet 500 mg	3	

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藥品名稱

藥物層級 規定／上限

非類固醇抗炎藥

celecoxib oral capsule 100 mg, 200 mg, 50 mg	3	QL (60 EA per 30 days)
celecoxib oral capsule 400 mg	3	QL (30 EA per 30 days)
diclofenac potassium oral tablet 50 mg	3	QL (120 EA per 30 days)
diclofenac sodium er oral tablet extended release 24 hour 100 mg	3	
diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg	2	GC
diclofenac-misoprostol oral tablet delayed release 50-0.2 mg, 75-0.2 mg	4	
diflunisal oral tablet 500 mg	3	
ec-naproxen oral tablet delayed release 375 mg	2	GC; QL (120 EA per 30 days)
ec-naproxen oral tablet delayed release 500 mg	4	QL (90 EA per 30 days)
etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg	2	GC
etodolac oral capsule 200 mg, 300 mg	2	GC
etodolac oral tablet 400 mg, 500 mg	2	GC
flurbiprofen oral tablet 100 mg	3	
ibu oral tablet 400 mg, 600 mg, 800 mg	1	GC
ibuprofen oral suspension 100 mg/5ml	3	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	GC
meloxicam oral tablet 15 mg, 7.5 mg	1	GC
nabumetone oral tablet 500 mg, 750 mg	2	GC
naproxen oral tablet 250 mg, 375 mg, 500 mg	1	GC
naproxen oral tablet delayed release 375 mg	2	GC; QL (120 EA per 30 days)
naproxen oral tablet delayed release 500 mg	4	QL (90 EA per 30 days)
naproxen sodium oral tablet 275 mg, 550 mg	3	
oxaprozin oral tablet 600 mg	4	
piroxicam oral capsule 10 mg, 20 mg	3	
sulindac oral tablet 150 mg, 200 mg	2	GC

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藥品名稱

藥物層級 規定／上限

類鴉片止痛劑，短效

acetaminophen-codeine oral solution 120-12 mg/5ml	3	QL (2700 ML per 30 days)
acetaminophen-codeine oral tablet 300-15 mg	3	QL (400 EA per 30 days)
acetaminophen-codeine oral tablet 300-30 mg	3	QL (360 EA per 30 days)
acetaminophen-codeine oral tablet 300-60 mg	3	QL (180 EA per 30 days)
butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml	4	
butorphanol tartrate nasal solution 10 mg/ml	3	QL (10 ML per 30 days)
endocet oral tablet 10-325 mg	3	QL (180 EA per 30 days)
endocet oral tablet 2.5-325 mg, 5-325 mg	3	QL (360 EA per 30 days)
endocet oral tablet 7.5-325 mg	3	QL (240 EA per 30 days)
fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 400 mcg, 600 mcg, 800 mcg	5 [^]	PA; QL (120 EA per 30 days)
fentanyl citrate buccal lozenge on a handle 200 mcg	4	PA; QL (120 EA per 30 days)
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	4	QL (2700 ML per 30 days)
hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg	3	QL (180 EA per 30 days)
hydrocodone-acetaminophen oral tablet 5-325 mg	3	QL (240 EA per 30 days)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	3	QL (150 EA per 30 days)
hydromorphone hcl oral liquid 1 mg/ml	4	QL (600 ML per 30 days)
hydromorphone hcl oral tablet 2 mg, 4 mg, 8 mg	3	QL (180 EA per 30 days)
morphine sulfate (concentrate) oral solution 20 mg/ml	3	QL (180 ML per 30 days)
MORPHINE SULFATE (PF) INJECTION SOLUTION 10 MG/ML, 2 MG/ML, 4 MG/ML, 5 MG/ML, 8 MG/ML	4	B/D
MORPHINE SULFATE (PF) INTRAVENOUS SOLUTION 1 MG/ML, 10 MG/ML, 2 MG/ML, 4 MG/ML, 8 MG/ML	4	B/D
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml	4	B/D

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藥品名稱	藥物層級	規定／上限
morphine sulfate oral solution 10 mg/5ml, 20 mg/5ml	3	QL (900 ML per 30 days)
morphine sulfate oral tablet 15 mg, 30 mg	3	QL (180 EA per 30 days)
nalbuphine hcl injection solution 10 mg/ml, 20 mg/ml	4	
oxycodone hcl oral capsule 5 mg	4	QL (180 EA per 30 days)
oxycodone hcl oral concentrate 100 mg/5ml	4	QL (180 ML per 30 days)
oxycodone hcl oral solution 5 mg/5ml	4	QL (900 ML per 30 days)
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	3	QL (180 EA per 30 days)
oxycodone-acetaminophen oral tablet 10-325 mg	3	QL (180 EA per 30 days)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	3	QL (360 EA per 30 days)
oxycodone-acetaminophen oral tablet 7.5-325 mg	3	QL (240 EA per 30 days)
tramadol hcl oral tablet 50 mg	2	GC; QL (240 EA per 30 days)
tramadol-acetaminophen oral tablet 37.5-325 mg	3	QL (240 EA per 30 days)
類鴉片止痛劑，長效		
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	4	PA; QL (10 EA per 30 days)
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	3	PA; QL (30 EA per 30 days)
methadone hcl intensol oral concentrate 10 mg/ml	3	PA; QL (90 ML per 30 days)
methadone hcl oral solution 10 mg/5ml, 5 mg/5ml	3	PA; QL (450 ML per 30 days)
methadone hcl oral tablet 10 mg, 5 mg	3	PA; QL (90 EA per 30 days)
morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	3	PA; QL (90 EA per 30 days)
麻醉藥物		
局部麻醉藥物		
lidocaine hcl (pf) injection solution 0.5 %, 1 %, 1.5 %	3	B/D
lidocaine hcl injection solution 0.5 %, 1 %, 2 %	3	B/D

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藥物索引

<i>abacavir sulfate</i>	84	ALREX.....	99	<i>arformoterol tartrate</i>	47
<i>abacavir sulfate-lamivudine</i>	83	<i>altavera</i>	38	<i>aripiprazole</i>	11, 12
ABELCET.....	82	ALTOPREV.....	62	ARISTADA.....	12
ABILIFY MAINTENA.....	11	ALUNBRIG.....	67	ARISTADA INITIO.....	12
<i>abiraterone acetate</i>	76	<i>alyacen 1/35</i>	38	<i>armodafinil</i>	21
ABRYSVO.....	24	<i>alyacen 7/7/7</i>	38	ARNUITY ELLIPTA.....	51
<i>acamprosate calcium</i>	6	<i>alyq</i>	63	<i>asenapine maleate</i>	12
<i>acarbose</i>	34	<i>amabelz</i>	46	<i>aspirin-dipyridamole er</i>	106
<i>accutane</i>	55	<i>amantadine hcl</i>	7	<i>atazanavir sulfate</i>	85
<i>acebutolol hcl</i>	58	<i>ambrisentan</i>	63	<i>atenolol</i>	58
<i>acetaminophen-codeine</i>	108	<i>amikacin sulfate</i>	77	<i>atenolol-chlorthalidone</i>	58
<i>acetazolamide</i>	60	<i>amiloride hcl</i>	61	<i>atomoxetine hcl</i>	20
<i>acetazolamide er</i>	60	<i>amiloride-hydrochlorothiazide</i> ...	61	<i>atorvastatin calcium</i>	62
<i>acetic acid</i>	95, 100	<i>amiodarone hcl</i>	61	<i>atovaquone</i>	77
<i>acetylcysteine</i>	48	<i>amitriptyline hcl</i>	9	<i>atovaquone-proguanil hcl</i>	82
<i>acitretin</i>	54	<i>amlodipine besy-benazepril hcl</i> ..	57	<i>atropine sulfate</i>	96
ACTHIB.....	24	<i>amlodipine besylate</i>	65	ATROPINE SULFATE.....	96
ACTIMMUNE.....	24	<i>amlodipine besylate-valsartan</i> ...	64	ATROVENT HFA.....	51
<i>acyclovir</i>	80, 81	<i>amlodipine-atorvastatin</i>	59	AUBAGIO.....	5
<i>acyclovir sodium</i>	81	<i>amlodipine-olmesartan</i>	64	<i>abra eq</i>	38
ADACEL.....	24	<i>ammonium lactate</i>	53	<i>aurovela 1/20</i>	38
ADCIRCA.....	63	<i>amnesteem</i>	55	<i>aurovela fe 1.5/30</i>	39
<i>adefovir dipivoxil</i>	81	<i>amoxapine</i>	9	<i>aurovela fe 1/20</i>	39
ADEMPAS.....	63	<i>amoxicillin</i>	88	AUSTEDO.....	4
ADRENALIN.....	59	<i>amoxicillin-pot clavulanate</i>	88	AUSTEDO XR.....	4
ADVAIR DISKUS.....	51	<i>amoxicillin-pot clavulanate er</i> ...	88	AUSTEDO XR PATIENT	
ADVAIR HFA.....	51	<i>amphetamine-dextroamphet er</i> ..	20	TITRATION.....	4
<i>afirmelle</i>	38	<i>amphetamine-</i>		AUVELITY.....	9
AIMOVIG.....	3	<i>dextroamphetamine</i>	20	<i>aviane</i>	39
<i>ala-cort</i>	55	<i>amphotericin b</i>	82	<i>ayuna</i>	39
<i>albendazole</i>	77	<i>amphotericin b liposome</i>	82	AYVAKIT.....	67
<i>albuterol sulfate</i>	47	<i>ampicillin</i>	88	<i>azacitidine</i>	74
<i>albuterol sulfate hfa inhalation</i>		<i>ampicillin sodium</i>	88	<i>azathioprine</i>	22
<i>aerosol solution 108 (90 base)</i>		<i>ampicillin-sulbactam sodium</i>	88	<i>azelaic acid</i>	53
<i>mcg/act</i>	47	<i>anagrelide hcl</i>	104	<i>azelastine hcl</i>	50, 98
<i>alclometasone dipropionate</i>	55	<i>anastrozole</i>	76	<i>azithromycin</i>	87
ALCOHOL SWABS.....	31	ANORO ELLIPTA.....	50	<i>aztreonam</i>	78
ALDURAZYME.....	29	APOKYN.....	8	<i>azurette</i>	39
ALECENSA.....	67	<i>apomorphine hcl</i>	8	<i>bacitracin</i>	97
<i>alendronate sodium</i>	45	<i>aprepitant</i>	101	<i>bacitracin-polymyxin b</i>	97
<i>alfuzosin hcl er</i>	96	<i>apri</i>	38	<i>bacitra-neomycin-polymyxin-hc</i> ..	96
ALIMTA.....	74	APTIOM.....	15, 16	<i>baclofen</i>	22
<i>aliskiren fumarate</i>	59	APTIVUS.....	84	<i>balsalazide disodium</i>	102
<i>allopurinol</i>	106	ARALAST NP.....	48	BALVERSA.....	68
<i>alosetron hcl</i>	100	<i>aranelle</i>	38	<i>balziva</i>	39
ALPHAGAN P.....	98	ARCALYST.....	24	BARACLUDE.....	81
<i>alprazolam</i>	11	AREXVY.....	24	BASAGLAR KWIKPEN.....	31

12/01/2023

BCG VACCINE.....	24	<i>budesonide er</i>	102	CEFAZOLIN SODIUM.....	90
BELSOMRA.....	5	<i>bumetanide</i>	61	CEFAZOLIN SODIUM-DEXTROSE..	90
<i>benazepril hcl</i>	57	<i>buprenorphine hcl</i>	6	<i>cefdinir</i>	90
<i>benazepril-hydrochlorothiazide</i> ..	58	<i>buprenorphine hcl-naloxone hcl</i> ...	6	<i>cefepime hcl</i>	90
BENDEKA.....	76	<i>bupropion hcl</i>	9	<i>cefixime</i>	90
BENLYSTA.....	22	<i>bupropion hcl er (smoking det)</i>	6	<i>cefoxitin sodium</i>	90
<i>benzoyl peroxide-erythromycin</i> ..	55	<i>bupropion hcl er (sr)</i>	9	<i>cefpodoxime proxetil</i>	90
<i>benztropine mesylate</i>	8	<i>bupropion hcl er (xl)</i>	9	<i>cefprozil</i>	90
BERINERT.....	104	<i>buspirone hcl</i>	11	<i>ceftazidime</i>	90
BESIVANCE.....	97	<i>butorphanol tartrate</i>	108	<i>ceftriaxone sodium</i>	90
BESREMI.....	67	BYDUREON BCISE.....	34	<i>cefuroxime axetil</i>	90
<i>betaine</i>	29	BYETTA 10 MCG PEN.....	34	<i>cefuroxime sodium</i>	91
<i>betamethasone dipropionate</i>	56	BYETTA 5 MCG PEN.....	34	<i>celecoxib</i>	107
<i>betamethasone dipropionate</i>		<i>cabergoline</i>	29	CELONTIN.....	16
<i>aug</i>	55, 56	CABOMETYX.....	68	<i>cephalexin</i>	91
<i>betamethasone valerate</i>	56	<i>calcipotriene</i>	54	CERDELGA.....	29
BETASERON.....	5	<i>calcitonin (salmon)</i>	45	CEREZYME.....	29
<i>betaxolol hcl</i>	98	<i>calcitrene</i>	54	<i>cetirizine hcl</i>	50
<i>bethanechol chloride</i>	95	<i>calcitriol</i>	37	<i>cevimeline hcl</i>	52
BETOPTIC-S.....	98	<i>calcium acetate</i>	37	<i>chateal</i>	39
BEVESPI AEROSPHERE.....	50	<i>calcium acetate (phos binder)</i>	37	CHEMET.....	38
<i>bexarotene</i>	53, 67	CALQUENCE.....	68	<i>chlorhexidine gluconate</i>	52
BEXSERO.....	24	<i>camila</i>	39	<i>chloroquine phosphate</i>	82
<i>bicalutamide</i>	76	<i>candesartan cilexetil</i>	64	<i>chlorpromazine hcl</i>	12
BICILLIN L-A.....	88	<i>candesartan cilexetil-hctz</i>	64	CHLORPROMAZINE HCL.....	12
BIKTARVY.....	84	CAPLYTA.....	12	<i>chlorthalidone</i>	61
<i>bisoprolol fumarate</i>	58	CAPRELSA.....	68	<i>cholestyramine</i>	60
<i>bisoprolol-hydrochlorothiazide</i> ..	58	<i>captopril</i>	57	<i>cholestyramine light</i>	60
BIVIGAM.....	23	<i>captopril-hydrochlorothiazide</i>	58	<i>ciclopirox olamine</i>	54
<i>blisovi fe 1.5/30</i>	39	CARAFATE.....	100	<i>cilostazol</i>	104
BOOSTRIX.....	24	<i>carbamazepine</i>	16	CILOXAN.....	97
BORTEZOMIB.....	68	<i>carbamazepine er</i>	16	CIMDUO.....	84
<i>bortezomib</i>	68	<i>carbidopa</i>	8	<i>cinacalcet hcl</i>	29, 30
<i>bosentan</i>	63	<i>carbidopa-levodopa</i>	8	CIPRO.....	86
BOSULIF.....	68	<i>carbidopa-levodopa er</i>	8	CIPRO HC.....	100
BRAFTOVI.....	68	<i>carbidopa-levodopa-</i>		CIPRODEX.....	100
BREO ELLIPTA.....	51	<i>entacapone</i>	8	<i>ciprofloxacin hcl</i>	86, 97
BREZTRI AEROSPHERE.....	50	<i>carboplatin</i>	77	<i>ciprofloxacin in d5w</i>	86
<i>briellyn</i>	39	<i>carglumic acid</i>	29	<i>cisplatin</i>	77
BRILINTA.....	106	<i>carteolol hcl</i>	98	<i>citalopram hydrobromide</i>	9
<i>brimonidine tartrate</i>	98	<i>cartia xt</i>	65	<i>claravis</i>	55
<i>brinzolamide</i>	98	<i>carvedilol</i>	58	<i>clarithromycin</i>	87
BRIVIACT.....	16	<i>caspofungin acetate</i>	82	<i>clarithromycin er</i>	87
<i>bromfenac sodium (once-daily)</i> ..	99	CAYSTON.....	78	<i>clindamycin hcl</i>	78
<i>bromocriptine mesylate</i>	8	<i>cefaclor</i>	89	<i>clindamycin palmitate hcl</i>	78
BROMSITE.....	99	CEFACTOR ER.....	89	<i>clindamycin phosphate</i> ... 55, 78, 96	
BRUKINSA.....	68	<i>cefadroxil</i>	89	<i>clindamycin phosphate in d5w</i> ... 78	
<i>budesonide</i>	51, 102	<i>cefazolin sodium</i>	90		

CLINDAMYCIN PHOSPHATE IN NACL.....	78	CYCLOPHOSPHAMIDE	77	<i>dextrose</i>	94
CLINIMIX/DEXTROSE (4.25/10)...	94	<i>cycloserine</i>	83	DEXTROSE 5%/ELECTROLYTE #48.....	91
CLINIMIX/DEXTROSE (4.25/5).....	94	<i>cyclosporine</i>	22	<i>dextrose in lactated ringers</i>	91
CLINIMIX/DEXTROSE (5/15).....	94	<i>cyclosporine modified</i>	22	DEXTROSE-NACL.....	91
CLINIMIX/DEXTROSE (5/20).....	94	<i>cyproheptadine hcl</i>	50	<i>dextrose-nacl</i>	91
CLINIMIX/DEXTROSE (6/5).....	94	<i>cyred eq</i>	39	<i>dextrose-sodium chloride</i>	91
CLINIMIX/DEXTROSE (8/10).....	94	CYSTADROPS.....	96	DIACOMIT.....	16
CLINIMIX/DEXTROSE (8/14).....	94	CYSTAGON.....	30	<i>diazepam</i>	16, 17
<i>clinisol sf</i>	94	CYSTARAN.....	96	<i>diazepam intensol</i>	16
CLINOLIPID.....	94	<i>cytarabine</i>	74	<i>diazoxide</i>	38
<i>clobazam</i>	16	<i>dabigatran etexilate mesylate</i> ..	105	<i>diclofenac potassium</i>	107
<i>clobetasol propionate</i>	56	<i>dalfampridine er</i>	5	<i>diclofenac sodium</i>	53, 99, 107
<i>clobetasol propionate e</i>	56	<i>danazol</i>	31	<i>diclofenac sodium er</i>	107
<i>clomipramine hcl</i>	9	<i>dantrolene sodium</i>	22	<i>diclofenac-misoprostol</i>	107
<i>clonazepam</i>	16	<i>dapsone</i>	78	<i>dicloxacillin sodium</i>	88
<i>clonidine</i>	59	DAPTACEL.....	24	<i>dicyclomine hcl</i>	104
<i>clonidine hcl</i>	59	<i>daptomycin</i>	78	DIFICID.....	87
<i>clopidogrel bisulfate</i>	106	DAPTOMYCIN.....	78	<i>diflunisal</i>	107
<i>clorazepate dipotassium</i>	16	<i>darifenacin hydrobromide er</i>	95	<i>difluprednate</i>	99
<i>clotrimazole</i>	52, 54	<i>dasetta 1/35</i>	39	<i>digoxin</i>	59
<i>clotrimazole-betamethasone</i>	54	<i>dasetta 7/7/7</i>	39	<i>dihydroergotamine mesylate</i>	3
<i>clozapine</i>	12	DAURISMO.....	68	DILANTIN.....	17
COARTEM.....	82	DAYVIGO.....	5	DILANTIN INFATABS.....	17
<i>colchicine</i>	106	<i>deblitane</i>	39	<i>diltiazem hcl</i>	65
<i>colchicine-probenecid</i>	106	<i>deferasirox</i>	38	<i>diltiazem hcl er</i>	65
<i>colesevelam hcl</i>	60	<i>deferasirox granules</i>	38	<i>diltiazem hcl er beads</i>	65
<i>colestipol hcl</i>	60	DELESTROGEN.....	46	<i>diltiazem hcl er coated beads</i>	65
<i>colistimethate sodium (cba)</i>	78	DELSTRIGO.....	84	<i>dilt-xr</i>	66
COMBIGAN.....	98	DENGVAXIA.....	24	<i>diphenhydramine hcl</i>	50
COMBIVENT RESPIMAT.....	50	<i>depo-testosterone</i>	46	<i>diphenoxylate-atropine</i>	100
COMETRIQ (100 MG DAILY DOSE).....	68	DESCOVY.....	84	DIPHThERIA-TETANUS TOXOIDS DT.....	24
COMETRIQ (140 MG DAILY DOSE).....	68	<i>desipramine hcl</i>	9	<i>dipyridamole</i>	106
COMETRIQ (60 MG DAILY DOSE).....	68	<i>desloratadine</i>	50	<i>disopyramide phosphate</i>	61
COMPLERA.....	84	<i>desmopressin ace spray refrig</i>	30	<i>disulfiram</i>	6
<i>compro</i>	101	<i>desmopressin acetate</i>	30	<i>divalproex sodium</i>	17
<i>constulose</i>	102	<i>desmopressin acetate pf</i>	30	<i>divalproex sodium er</i>	17
COPIKTRA.....	68	<i>desmopressin acetate spray</i>	30	DOCETAXEL.....	75
CORLANOR.....	59	<i>desogestrel-ethinyl estradiol</i>	39	<i>docetaxel</i>	75
COTELLIC.....	68	<i>desonide</i>	56	<i>dofetilide</i>	61
CREON.....	103	<i>desvenlafaxine succinate er</i>	9	<i>donepezil hcl</i>	7
<i>cromolyn sodium</i>	48, 98, 100	<i>dexamethasone</i>	43, 44	DOPTELET.....	104
<i>cryselle-28</i>	39	DEXAMETHASONE INTENSOL.....	43	<i>dorzolamide hcl</i>	98
<i>cyclobenzaprine hcl</i>	22	<i>dexamethasone sod phosphate</i> <i>pf</i>	44	<i>dorzolamide hcl-timolol mal</i>	98
<i>cyclophosphamide</i>	77	<i>dexamethasone sodium</i> <i>phosphate</i>	44, 99	<i>dotti</i>	46
		<i>dexlansoprazole</i>	103	DOVATO.....	84
		<i>dexmethylphenidate hcl</i>	20, 21	<i>doxazosin mesylate</i>	58

<i>doxepin hcl</i>	6, 9	<i>enoxaparin sodium</i>	105	<i>exemestane</i>	76
<i>doxercalciferol</i>	37	<i>enpresse-28</i>	39	EXKIVITY.....	68
<i>doxorubicin hcl</i>	75	<i>enskyce</i>	39	EZALLOR SPRINKLE.....	62
<i>doxorubicin hcl liposomal</i>	75	ENSTILAR.....	56	<i>ezetimibe</i>	60
<i>doxy 100</i>	80	<i>entacapone</i>	8	<i>ezetimibe-simvastatin</i>	60
<i>doxycycline hyclate</i>	80	<i>entecavir</i>	81	FABRAZYME.....	30
<i>doxycycline monohydrate</i>	80	ENTRESTO.....	64	<i>falmina</i>	40
DRIZALMA SPRINKLE.....	9	<i>enulose</i>	102	<i>famciclovir</i>	81
<i>dronabinol</i>	101	EPCLUSA.....	81	<i>famotidine</i>	100
<i>drospirenone-ethinyl estradiol</i> ...	39	EPIDIOLEX.....	17	<i>famotidine (pf)</i>	100
DROXIA.....	104	<i>epinephrine</i>	48	<i>famotidine premixed</i>	100
<i>droxidopa</i>	59	<i>epinephrine (anaphylaxis)</i>	59	FANAPT.....	12
<i>duloxetine hcl</i>	9	<i>epitol</i>	17	FANAPT TITRATION PACK.....	12
DUPIXENT.....	27	EPIVIR HBV.....	81	FARXIGA.....	34
<i>dutasteride</i>	96	<i>eplerenone</i>	65	FASENRA.....	48
<i>dutasteride-tamsulosin hcl</i>	96	EPRONTIA.....	17	FASENRA PEN.....	48
<i>e.e.s. 400</i>	87	<i>ergotamine-caffeine</i>	3	<i>febuxostat</i>	106
<i>ec-naproxen</i>	107	ERIVEDGE.....	68	<i>felbamate</i>	17
EDARBI.....	64	ERLEADA.....	76	<i>felodipine er</i>	66
EDARBYCLOR.....	64	<i>erlotinib hcl</i>	68	<i>femynor</i>	40
EDURANT.....	85	<i>errin</i>	39	<i>fenofibrate</i>	62
<i>efavirenz</i>	85	<i>ertapenem sodium</i>	78	<i>fenofibrate micronized</i>	62
<i>efavirenz-emtricitab-tenofo df</i> ...	84	<i>ery</i>	55	<i>fenofibric acid</i>	63
<i>efavirenz-lamivudine-tenofovir</i> ...	84	<i>ery-tab</i>	87	<i>fentanyl</i>	109
ELIGARD.....	76	ERYTHROCIN LACTOBIONATE.....	87	<i>fentanyl citrate</i>	108
<i>elinest</i>	39	<i>erythrocin stearate</i>	87	<i>fesoterodine fumarate er</i>	95
ELIQUIS.....	105	<i>erythromycin</i>	55, 88, 97	FETZIMA.....	10
ELIQUIS DVT/PE STARTER PACK	105	<i>erythromycin base</i>	87	FETZIMA TITRATION.....	10
ELLECE.....	75	<i>erythromycin ethylsuccinate</i>	87	FIASP.....	31
<i>eluryng</i>	39	<i>erythromycin lactobionate</i>	87	FIASP FLEXTOUCH.....	31
EMCYT.....	76	<i>escitalopram oxalate</i>	10	FIASP PENFILL.....	32
EMGALITY.....	3	<i>esomeprazole magnesium</i>	103	FIASP PUMPCART.....	32
EMGALITY (300 MG DOSE).....	3	<i>estarylla</i>	39	FINACEA.....	53
<i>emoquette</i>	39	<i>estradiol</i>	46	<i>finasteride</i>	96
EMSAM.....	10	<i>estradiol valerate</i>	46	<i>ingolimod hcl</i>	5
<i>emtricitabine</i>	85	<i>estradiol-norethindrone acet</i>	46	FINTEPLA.....	17
<i>emtricitabine-tenofovir df</i>	84	<i>ethambutol hcl</i>	83	<i>flac</i>	100
EMTRIVA.....	85	<i>ethosuximide</i>	17	FLAREX.....	99
EMVERM.....	78	<i>ethynodiol diac-eth estradiol</i> 39, 40		FLEBOGAMMA DIF.....	23
<i>enalapril maleate</i>	57	<i>etodolac</i>	107	<i>flecainide acetate</i>	61
<i>enalapril-hydrochlorothiazide</i>	58	<i>etodolac er</i>	107	FLOVENT DISKUS.....	52
ENBREL.....	27	<i>etonogestrel-ethinyl estradiol</i>	40	FLOVENT HFA.....	52
ENBREL MINI.....	27	<i>etoposide</i>	75	<i>fluconazole</i>	82
ENBREL SURECLICK.....	27	<i>etravirine</i>	85	<i>fluconazole in sodium chloride</i> ...	82
ENDARI.....	104	EULEXIN.....	76	<i>flucytosine</i>	82
<i>endocet</i>	108	<i>euthyrox</i>	36	<i>fludrocortisone acetate</i>	44
ENGERIX-B.....	25	<i>everolimus</i>	22, 68	<i>flunisolide</i>	52
<i>enilloring</i>	39	EVOTAZ.....	84	<i>fluocinolone acetonide</i>	56, 100

<i>fluocinolone acetonide body</i>	56	GEMTESA.....	95	HIBERIX.....	25
<i>fluocinolone acetonide scalp</i>	56	<i>generlac</i>	103	HUMIRA.....	28
<i>fluocinonide</i>	56	<i>gengraf</i>	22	HUMIRA PEDIATRIC CROHNS	
<i>fluocinonide emulsified base</i>	56	GENOTROPIN.....	30	START.....	27
<i>fluorometholone</i>	99	GENOTROPIN MINIQUICK.....	30	HUMIRA PEN.....	27, 28
<i>fluorouracil</i>	53, 74	<i>gentak</i>	97	HUMIRA PEN-CD/UC/HS	
<i>fluoxetine hcl</i>	10	<i>gentamicin in saline</i>	78	STARTER.....	28
<i>fluphenazine decanoate</i>	12	<i>gentamicin sulfate</i>	54, 78, 97	HUMIRA PEN-PEDIATRIC UC	
<i>fluphenazine hcl</i>	12, 13	GENVOYA.....	84	START.....	28
<i>flurbiprofen</i>	107	GILOTRIF.....	69	HUMIRA PEN-PS/UV/ADOL HS	
<i>flurbiprofen sodium</i>	99	<i>glatiramer acetate</i>	5	START.....	28
<i>fluticasone propionate</i>	52, 56	<i>glatopa</i>	5	HUMIRA PEN-PSOR/UEIT	
<i>fluvastatin sodium</i>	62	GLEOSTINE.....	77	STARTER.....	28
<i>fluvastatin sodium er</i>	62	<i>glimepiride</i>	34	HUMULIN R U-500	
<i>fluvoxamine maleate</i>	11	<i>glipizide</i>	34	(CONCENTRATED).....	32
<i>fondaparinux sodium</i>	105	<i>glipizide er</i>	34	HUMULIN R U-500 KWIKPEN.....	32
<i>formoterol fumarate</i>	48	<i>glipizide xl</i>	34	<i>hydralazine hcl</i>	59, 60
FORTEO.....	45	<i>glipizide-metformin hcl</i>	34	<i>hydrochlorothiazide</i>	61
FOSAMAX PLUS D.....	45	<i>glycopyrrolate</i>	104	<i>hydrocodone-acetaminophen</i> ...108	
<i>fosamprenavir calcium</i>	85	<i>glydo</i>	53	<i>hydrocodone-ibuprofen</i>	108
<i>fosinopril sodium</i>	57	GLYXAMBI.....	34	<i>hydrocortisone</i>	44, 57, 102
<i>fosinopril sodium-hctz</i>	58	GOLYTELY.....	103	<i>hydrocortisone (perianal)</i>	53
FOTIVDA.....	68	GRALISE.....	4	<i>hydromorphone hcl</i>	108
<i>fulvestrant</i>	76	<i>granisetron hcl</i>	101	<i>hydroxychloroquine sulfate</i>	27
<i>furosemide</i>	61	<i>griseofulvin microsize</i>	82	<i>hydroxyurea</i>	67
FUZEON.....	85	<i>griseofulvin ultramicrosize</i>	83	<i>hydroxyzine hcl</i>	50
<i>fyavolv</i>	46	<i>guanfacine hcl</i>	59	<i>hydroxyzine pamoate</i>	50
FYCOMPA.....	17	<i>guanfacine hcl er</i>	21	HYSINGLA ER.....	109
<i>gabapentin</i>	17	GVOKE HYPOPEN 2-PACK.....	38	<i>ibandronate sodium</i>	45
<i>galantamine hydrobromide</i>	7	GVOKE KIT.....	38	IBRANCE.....	69
<i>galantamine hydrobromide er</i>	7	GVOKE PFS.....	38	<i>ibu</i>	107
GAMASTAN.....	23	HAEGARDA.....	104	<i>ibuprofen</i>	107
GAMMAGARD.....	23	<i>hailey 1.5/30</i>	40	<i>icatibant acetate</i>	104
GAMMAGARD S/D LESS IGA.....	23	<i>halobetasol propionate</i>	56, 57	<i>iclevia</i>	40
GAMMAKED.....	23	<i>haloette</i>	40	ICLUSIG.....	69
GAMMAPLEX.....	23	<i>haloperidol</i>	13	IDHIFA.....	69
GAMUNEX-C.....	23	<i>haloperidol decanoate</i>	13	ILEVRO.....	99
<i>ganciclovir sodium</i>	81	<i>haloperidol lactate</i>	13	<i>imatinib mesylate</i>	69
GARDASIL 9.....	25	HARVONI.....	81	IMBRUVICA.....	69
<i>gatifloxacin</i>	97	HAVRIX.....	25	<i>imipenem-cilastatin</i>	78
GATTEX.....	100	<i>heather</i>	40	<i>imipramine hcl</i>	10
GAUZE PADS 2" X 2".....	32	HEPARIN (PORCINE) IN NACL....	105	<i>imiquimod</i>	53
<i>gavilyte-c</i>	102	<i>heparin sod (porcine) in d5w</i>	105	IMOVAX RABIES.....	25
<i>gavilyte-g</i>	103	<i>heparin sodium (porcine)</i>	105	IMVEXXY MAINTENANCE PACK..	46
GAVRETO.....	68	HEPLISAV-B.....	25	IMVEXXY STARTER PACK.....	46
<i>gefitinib</i>	69	HERCEPTIN.....	69	<i>incassia</i>	40
<i>gemcitabine hcl</i>	74	HERCEPTIN HYLECTA.....	69	INCRELEX.....	30
<i>gemfibrozil</i>	63	HERZUMA.....	69	INCRUSE ELLIPTA.....	51

<i>indapamide</i>	61	JANUMET.....	35	<i>labetalol hcl</i>	58
INFANRIX.....	25	JANUMET XR.....	35	<i>lacosamide</i>	17, 18
INFLIXIMAB.....	28	JANUVIA.....	35	<i>lactated ringers</i>	92
INGREZZA.....	4	JARDIANCE.....	35	<i>lactulose</i>	103
INLYTA.....	69	<i>jasmiel</i>	40	<i>lactulose encephalopathy</i>	103
INQOVI.....	74	<i>javygtor</i>	30	<i>lamivudine</i>	81, 85
INREBIC.....	69	JAYPIRCA.....	69	<i>lamivudine-zidovudine</i>	84
INSULIN PEN NEEDLE.....	32	JENTADUETO.....	35	<i>lamotrigine</i>	18
INSULIN SYRINGE (DISP) U-100		JENTADUETO XR.....	35	<i>lamotrigine er</i>	18
0.3 ML.....	32	<i>jinteli</i>	47	<i>lansoprazole</i>	103
INSULIN SYRINGE (DISP) U-100		<i>jolessa</i>	40	LANTUS.....	32
1 ML.....	32	<i>juleber</i>	40	LANTUS SOLOSTAR.....	32
INSULIN SYRINGE (DISP) U-100		JULUCA.....	84	<i>lapatinib ditosylate</i>	70
1/2 ML.....	32	<i>junel 1.5/30</i>	40	<i>larin 1.5/30</i>	40
INTELENCE.....	85	<i>junel 1/20</i>	40	<i>larin 1/20</i>	40
INTRALIPID.....	94	<i>junel fe 1.5/30</i>	40	<i>larin fe 1.5/30</i>	40
INTRON A.....	24	<i>junel fe 1/20</i>	40	<i>larin fe 1/20</i>	40
<i>introvale</i>	40	KADCYLA.....	69	<i>latanoprost</i>	98
INVEGA HAFYERA.....	13	KALYDECO.....	48	LATUDA.....	13, 14
INVEGA SUSTENNA.....	13	KANJINTI.....	69	<i>leena</i>	40
INVEGA TRINZA.....	13	<i>kariva</i>	40	<i>leflunomide</i>	27
INVOKAMET.....	34	<i>kcl in dextrose-nacl</i>	91	<i>lenalidomide</i>	66, 67
INVOKAMET XR.....	34	KCL IN DEXTROSE-NACL.....	92	LENVIMA (10 MG DAILY DOSE)...	70
INVOKANA.....	34, 35	<i>kelnor 1/35</i>	40	LENVIMA (12 MG DAILY DOSE)...	70
IPOL.....	25	<i>kelnor 1/50</i>	40	LENVIMA (14 MG DAILY DOSE)...	70
<i>ipratropium bromide</i>	51	KERENDIA.....	65	LENVIMA (18 MG DAILY DOSE)...	70
<i>ipratropium-albuterol</i>	50	<i>ketoconazole</i>	54, 83	LENVIMA (20 MG DAILY DOSE)...	70
<i>irbesartan</i>	64	<i>ketorolac tromethamine</i>	99	LENVIMA (24 MG DAILY DOSE)...	70
<i>irbesartan-hydrochlorothiazide</i> ..	64	KEVZARA.....	28	LENVIMA (4 MG DAILY DOSE).....	70
IRESSA.....	69	KEYTRUDA.....	70	LENVIMA (8 MG DAILY DOSE).....	70
<i>irinotecan hcl</i>	67	KINRIX.....	25	<i>lessina</i>	40
ISENTRESS.....	85	KISQALI (200 MG DOSE).....	70	<i>letrozole</i>	76
ISENTRESS HD.....	85	KISQALI (400 MG DOSE).....	70	<i>leucovorin calcium</i>	77
<i>isibloom</i>	40	KISQALI (600 MG DOSE).....	70	LEUKERAN.....	77
ISOLYTE-P IN D5W.....	91	KISQALI FEMARA (200 MG		<i>leuprolide acetate</i>	76
ISOLYTE-S.....	91	DOSE).....	67	<i>levalbuterol hcl</i>	48
ISOLYTE-S PH 7.4.....	91	KISQALI FEMARA (400 MG		<i>levalbuterol tartrate</i>	48
<i>isoniazid</i>	83	DOSE).....	67	LEVEMIR.....	32
<i>isosorbide dinitrate</i>	63	KISQALI FEMARA (600 MG		LEVEMIR FLEXPEN.....	32
<i>isosorbide mononitrate</i>	63	DOSE).....	67	LEVEMIR FLEXTOUCH.....	32
<i>isosorbide mononitrate er</i>	63	<i>klor-con</i>	93	<i>levetiracetam</i>	18
<i>isotretinoin</i>	55	<i>klor-con 10</i>	93	<i>levetiracetam er</i>	18
<i>isradipine</i>	66	<i>klor-con m10</i>	93	<i>levetiracetam in nacl</i>	18
<i>itraconazole</i>	83	<i>klor-con m15</i>	93	<i>levobunolol hcl</i>	98
<i>ivermectin</i>	78	<i>klor-con m20</i>	93	<i>levocarnitine</i>	30
IXIARO.....	25	KORLYM.....	30	<i>levocetirizine dihydrochloride</i>	50
JAKAFI.....	69	KRAZATI.....	70	<i>levofloxacin</i>	87
<i>jantoven</i>	105	<i>kurvelo</i>	40	<i>levofloxacin in d5w</i>	86

<i>levonest</i>	40	LUPRON DEPOT (3-MONTH).....	76	<i>metadate er</i>	21
<i>levonorgest-eth estrad 91-day</i> ...	41	LUPRON DEPOT-PED (1-		<i>metformin hcl</i>	35
<i>levonorgestrel-ethinyl estrad</i>	41	MONTH).....	30	<i>metformin hcl er</i>	35
<i>levonorg-eth estrad triphasic</i>	41	LUPRON DEPOT-PED (3-		<i>methadone hcl</i>	109
<i>levora 0.15/30 (28)</i>	41	MONTH).....	30	<i>methadone hcl intensol</i>	109
<i>levo-t</i>	37	LUPRON DEPOT-PED (6-		<i>methazolamide</i>	61
<i>levothyroxine sodium</i>	37	MONTH).....	30	<i>methenamine hippurate</i>	79
<i>levoxyl</i>	37	<i>lurasidone hcl</i>	14	<i>methimazole</i>	37
LEXIVA.....	85	<i>lutera</i>	41	<i>methotrexate sodium</i>	27, 74
<i>lidocaine</i>	53	<i>lyleq</i>	41	<i>methotrexate sodium (pf)</i>	74
<i>lidocaine hcl</i>	54, 109	<i>lyllana</i>	47	<i>methsuximide</i>	18
<i>lidocaine hcl (pf)</i>	109	LYNPARZA.....	70	<i>methylphenidate hcl</i>	21
<i>lidocaine viscous hcl</i>	52	LYRICA CR.....	4	<i>methylphenidate hcl er</i>	21
<i>lidocaine-prilocaine</i>	54	LYSODREN.....	76	<i>methylprednisolone</i>	44
<i>linezolid</i>	79	LYTGOBI (12 MG DAILY DOSE) ...	70	<i>methylprednisolone acetate</i>	44
<i>linezolid in sodium chloride</i>	78	LYTGOBI (16 MG DAILY DOSE) ...	70	<i>methylprednisolone sodium</i>	
LINZESS.....	101	LYTGOBI (20 MG DAILY DOSE) ...	71	<i>succ</i>	44
<i>liothyronine sodium</i>	37	<i>lyza</i>	41	<i>metoclopramide hcl</i>	101
<i>lisdexamfetamine dimesylate</i>	21	<i>magnesium sulfate</i>	92	<i>metolazone</i>	61
<i>lisinopril</i>	57	MAGNESIUM SULFATE.....	92	<i>metoprolol succinate er</i>	58
<i>lisinopril-hydrochlorothiazide</i>	58	<i>magnesium sulfate in d5w</i>	92	<i>metoprolol tartrate</i>	59
LITHIUM.....	4	MAGNESIUM SULFATE IN D5W ..	92	<i>metoprolol-hydrochlorothiazide</i>	58
<i>lithium carbonate</i>	4	<i>malathion</i>	55	<i>metronidazole</i>	53, 79, 96
<i>lithium carbonate er</i>	4	<i>maraviroc</i>	85	<i>metyrosine</i>	60
LIVALO.....	62	<i>marlissa</i>	41	<i>micafungin sodium</i>	83
<i>loestrin 1.5/30 (21)</i>	41	MARPLAN.....	10	<i>microgestin 1.5/30</i>	41
<i>loestrin 1/20 (21)</i>	41	MATULANE.....	67	<i>microgestin 1/20</i>	41
<i>loestrin fe 1.5/30</i>	41	<i>matzim la</i>	66	<i>microgestin fe 1.5/30</i>	41
<i>loestrin fe 1/20</i>	41	MAVYRET.....	81	<i>microgestin fe 1/20</i>	41
LOKELMA.....	38	<i>meclizine hcl</i>	101	<i>midodrine hcl</i>	60
LONSURF.....	74	<i>medroxyprogesterone acetate</i>		<i>miglustat</i>	30
<i>loperamide hcl</i>	101	41, 47	<i>mili</i>	41
<i>lopinavir-ritonavir</i>	84	<i>mefloquine hcl</i>	82	<i>mimvey</i>	47
<i>lorazepam</i>	11	<i>megestrol acetate</i>	47, 76	<i>minocycline hcl</i>	80
<i>lorazepam intensol</i>	11	MEKINIST.....	71	<i>minoxidil</i>	60
LORBRENA.....	70	MEKTOVI.....	71	<i>mirtazapine</i>	10
<i>loryna</i>	41	<i>meloxicam</i>	107	<i>misoprostol</i>	101
<i>losartan potassium</i>	64	<i>memantine hcl</i>	7	MITIGARE.....	106
<i>losartan potassium-hctz</i>	64	<i>memantine hcl er</i>	7	M-M-R II.....	25
LOTEMAX.....	99	MENACTRA.....	25	M-NATAL PLUS.....	93
<i>lovastatin</i>	62	MENQUADFI.....	25	<i>modafinil</i>	21, 22
<i>low-ogestrel</i>	41	MENVEO.....	25	<i>moexipril hcl</i>	57
<i>loxapine succinate</i>	14	<i>mercaptapurine</i>	74	<i>molindone hcl</i>	14
<i>lubiprostone</i>	101	<i>meropenem</i>	79	<i>mometasone furoate</i>	52, 57
LUMAKRAS.....	70	<i>mesalamine</i>	102	MONJUVI.....	71
LUMIGAN.....	98	<i>mesalamine er</i>	102	<i>mono-linyah</i>	41
LUMIZYME.....	30	<i>mesalamine-cleanser</i>	102	<i>montelukast sodium</i>	51
LUPRON DEPOT (1-MONTH).....	76	MESNEX.....	77	<i>morphine sulfate</i>	108, 109

<i>morphine sulfate (concentrate)</i>	108	<i>nicardipine hcl</i>	66	NUEDEXTA.....	4
MORPHINE SULFATE (PF).....	108	NICOTROL.....	6	NULOJIX.....	23
<i>morphine sulfate er</i>	109	NICOTROL NS.....	6	NUPLAZID.....	14
MOVANTIK.....	101	<i>nifedipine er</i>	66	NURTEC.....	3
<i>moxifloxacin hcl</i>	87, 97	<i>nifedipine er osmotic release</i>	66	NUTRILIPID.....	94
MULTAQ.....	61	<i>nikki</i>	41	NUZYRA.....	80
<i>multiple electro type 1 ph 5.5</i>	92	<i>nilutamide</i>	76	<i>nyamyc</i>	54
<i>multiple electro type 1 ph 7.4</i>	92	<i>nimodipine</i>	66	<i>nylia 1/35</i>	42
<i>mupirocin</i>	54	NINLARO.....	71	<i>nylia 7/7/7</i>	42
MVASI.....	71	<i>nisoldipine er</i>	66	NYMALIZE.....	66
<i>mycophenolate mofetil</i>	22	<i>nitazoxanide</i>	79	<i>nymyo</i>	42
<i>mycophenolate sodium</i>	23	<i>nitisinone</i>	31	<i>nystatin</i>	52, 54, 83
MYRBETRIQ.....	95	NITRO-BID.....	63	<i>nystop</i>	54
<i>na sulfate-k sulfate-mg sulf</i>	103	<i>nitrofurantoin macrocrystal</i>	79	<i>ocella</i>	42
<i>nabumetone</i>	107	<i>nitrofurantoin monohyd macro</i> ..	79	OCREVUS.....	5
<i>nadolol</i>	59	<i>nitroglycerin</i>	63	OCTAGAM.....	23
<i>nafcilin sodium</i>	89	<i>nizatidine</i>	100	<i>octreotide acetate</i>	31
NAGLAZYME.....	30	<i>nora-be</i>	41	ODEFSEY.....	84
<i>nalbuphine hcl</i>	109	<i>norethin ace-eth estrad-fe</i>	42	ODOMZO.....	71
<i>naloxone hcl</i>	6	<i>norethindrone</i>	42	OFEV.....	48
<i>naltrexone hcl</i>	6	<i>norethindrone acetate</i>	47	<i>ofloxacin</i>	98, 100
NAMZARIC.....	7	<i>norethindrone acet-ethinyl est</i> ..	42	OGIVRI.....	71
<i>naproxen</i>	107	<i>norethindrone-eth estradiol</i>	47	<i>olanzapine</i>	14
<i>naproxen sodium</i>	107	<i>norethindron-ethinyl estrad-fe</i> ...	42	<i>olmesartan medoxomil</i>	64
<i>naratriptan hcl</i>	3	<i>norgestimate-eth estradiol</i>	42	<i>olmesartan medoxomil-hctz</i>	64
NATACYN.....	97	<i>norgestim-eth estrad triphasic</i> ...	42	<i>olmesartan-amlodipine-hctz</i>	65
<i>nateglinide</i>	35	NORITATE.....	53	<i>olopatadine hcl</i>	50, 98
NATPARA.....	45	<i>norlyroc</i>	42	<i>omeprazole</i>	104
NAYZILAM.....	18	NORPACE CR.....	61	OMNARIS.....	52
<i>nebivolol hcl</i>	59	<i>nortrel 0.5/35 (28)</i>	42	OMNIPOD 5 G6 INTRO (GEN 5)..	33
<i>necon 0.5/35 (28)</i>	41	<i>nortrel 1/35 (21)</i>	42	OMNIPOD 5 G6 POD (GEN 5).....	33
NEEDLES, INSULIN DISP., SAFETY.....	32	<i>nortrel 1/35 (28)</i>	42	OMNIPOD CLASSIC PDM (GEN 3).....	33
<i>nefazodone hcl</i>	10	<i>nortrel 7/7/7</i>	42	OMNIPOD CLASSIC PODS (GEN 3).....	33
<i>neomycin sulfate</i>	79	<i>nortriptyline hcl</i>	10	OMNIPOD DASH INTRO (GEN 4).	33
<i>neomycin-bacitracin zn- polymyx</i>	97	NORVIR.....	85	OMNIPOD DASH PODS (GEN 4)..	33
<i>neomycin-polymyxin-dexameth</i> ..	97	NOVOLIN 70/30.....	32	OMNIPOD GO.....	33
<i>neomycin-polymyxin-gramicidin</i> ..	97	NOVOLIN 70/30 FLEXPEN.....	32	<i>ondansetron</i>	102
<i>neomycin-polymyxin-hc</i>	97, 100	NOVOLIN N.....	32	<i>ondansetron hcl</i>	101
<i>neo-polycin</i>	98	NOVOLIN N FLEXPEN.....	32	ONTRUZANT.....	71
<i>neo-polycin hc</i>	97	NOVOLIN R.....	33	ONUREG.....	74
NERLYNX.....	71	NOVOLIN R FLEXPEN.....	32	OPSUMIT.....	63
NEUPRO.....	8	NOVOLOG.....	33	ORGOVYX.....	76
<i>nevirapine</i>	85	NOVOLOG FLEXPEN.....	33	ORKAMBI.....	49
<i>nevirapine er</i>	85	NOVOLOG MIX 70/30.....	33	ORSERDU.....	76
NEXAVAR.....	71	NOVOLOG MIX 70/30 FLEXPEN..	33	<i>oseltamivir phosphate</i>	81
<i>niacin er (antihyperlipidemic)</i>	60	NOVOLOG PENFILL.....	33	OTEZLA.....	28
		NOXAFIL.....	83		
		NUBEQA.....	76		

<i>oxacillin sodium</i>	89	<i>phenelzine sulfate</i>	10	<i>pravastatin sodium</i>	62
<i>oxaliplatin</i>	77	<i>phenobarbital</i>	18	<i>praziquantel</i>	79
<i>oxaprozin</i>	107	<i>phenobarbital sodium</i>	18	<i>prazosin hcl</i>	58
<i>oxcarbazepine</i>	18	PHENYTEK.....	18	<i>prednisolone</i>	44
<i>oxybutynin chloride</i>	95	<i>phenytoin</i>	18	<i>prednisolone acetate</i>	99
<i>oxybutynin chloride er</i>	95	<i>phenytoin sodium</i>	18	<i>prednisolone sodium phosphate</i>	44
<i>oxycodone hcl</i>	109	<i>phenytoin sodium extended</i>	18	PREDNISOLONE SODIUM	
<i>oxycodone-acetaminophen</i>	109	PHESGO.....	71	PHOSPHATE.....	99
OZEMPIC (0.25 OR 0.5		<i>philith</i>	42	<i>prednisone</i>	44
MG/DOSE).....	35	PIFELTRO.....	85	PREDNISONE INTENSOL.....	44
OZEMPIC (1 MG/DOSE).....	35	<i>pilocarpine hcl</i>	52, 98	<i>pregabalin</i>	19
OZEMPIC (2 MG/DOSE).....	35	<i>pimozide</i>	14	PREHEVBRIO.....	25
<i>pacerone</i>	61, 62	<i>pimtreea</i>	42	PREMASOL.....	95
<i>paclitaxel</i>	75	<i>pindolol</i>	59	PRENATAL VITAMIN WITH	
<i>paclitaxel protein-bound part</i>	75	<i>pioglitazone hcl</i>	35	FOLIC ACID GREATER THAN 0.8	
<i>paliperidone er</i>	14	<i>pioglitazone hcl-glimepiride</i>	36	MG ORAL TABLET.....	94
<i>pamidronate disodium</i>	45	<i>pioglitazone hcl-metformin hcl</i>	36	<i>prevalite</i>	60
PAMIDRONATE DISODIUM.....	45	<i>piperacillin sod-tazobactam so</i>	89	PREVYMIS.....	81
PANRETIN.....	53	PIQRAY (200 MG DAILY DOSE).....	71	PREZCOBIX.....	84
<i>pantoprazole sodium</i>	104	PIQRAY (250 MG DAILY DOSE).....	71	PREZISTA.....	85, 86
PANZYGA.....	24	PIQRAY (300 MG DAILY DOSE).....	71	PRIFTIN.....	83
<i>paraplatin</i>	77	<i>pirfenidone</i>	49	PRIMAQUINE PHOSPHATE.....	82
<i>paricalcitol</i>	37	<i>pirmella 1/35</i>	42	<i>primaquine phosphate</i>	82
<i>paromomycin sulfate</i>	79	<i>piroxicam</i>	107	<i>primidone</i>	19
<i>paroxetine hcl</i>	10	PLASMA-LYTE 148.....	92	PRIORIX.....	26
<i>paroxetine hcl er</i>	10	PLASMA-LYTE A.....	92	PRIVIGEN.....	24
PEDIARIX.....	25	<i>plenamine</i>	94	<i>probenecid</i>	106
PEDVAX HIB.....	25	PLENVU.....	103	<i>prochlorperazine</i>	102
<i>peg 3350-kcl-na bicarb-nacl</i>	103	<i>podofilox</i>	53	<i>prochlorperazine edisylate</i>	102
<i>peg-3350/electrolytes</i>	103	<i>polycin</i>	98	<i>prochlorperazine maleate</i>	102
PEGASYS.....	81	<i>polymyxin b-trimethoprim</i>	98	PROCRIT.....	106
PEMAZYRE.....	71	POMALYST.....	67	<i>procto-med hc</i>	53
<i>pemetrexed disodium</i>	75	<i>portia-28</i>	42	<i>proctosol hc</i>	53
<i>penicillamine</i>	38	<i>posaconazole</i>	83	<i>proctozone-hc</i>	53
PENICILLIN G POT IN DEXTROSE.....	89	POTASSIUM CHLORIDE.....	93	PROGRAF.....	23
<i>penicillin g potassium</i>	89	<i>potassium chloride</i>	93, 94	PROLASTIN-C.....	49
PENICILLIN G PROCAINE.....	89	<i>potassium chloride crys er</i>	93	PROLENSA.....	99
<i>penicillin g sodium</i>	89	<i>potassium chloride er</i>	94	PROLIA.....	45
<i>penicillin v potassium</i>	89	<i>potassium chloride in nacl</i>	92	PROMACTA.....	104, 105
PENTACEL.....	25	POTASSIUM CHLORIDE IN NACL		<i>promethazine hcl</i>	102
<i>pentamidine isethionate</i>	79	92, 93	<i>propafenone hcl</i>	62
<i>pentoxifylline er</i>	104	<i>potassium citrate er</i>	95	<i>propafenone hcl er</i>	62
<i>perindopril erbumine</i>	57	<i>potassium cl in dextrose 5%</i>	93	<i>proparacaine hcl</i>	96
<i>perio gard</i>	52	PRADAXA.....	105	<i>propranolol hcl</i>	59
<i>permethrin</i>	55	PRALUENT.....	60	<i>propranolol hcl er</i>	59
<i>perphenazine</i>	14	<i>pramipexole dihydrochloride</i>	8	<i>propylthiouracil</i>	37
PERSERIS.....	14	<i>pramipexole dihydrochloride er</i>	8	PROQUAD.....	26
<i>pfizerpen</i>	89	<i>prasugrel hcl</i>	106	PROSOL.....	95

<i>protriptyline hcl</i>	10	<i>ritonavir</i>	86	<i>sodium chloride</i>	52, 93
PULMICORT FLEXHALER.....	52	<i>rivastigmine</i>	7	<i>sodium fluoride chew, tab, 1.1</i> <i>(0.5 f) mg/ml soln</i>	94
PULMOZYME.....	49	<i>rivastigmine tartrate</i>	7	SODIUM OXYBATE.....	22
PURIXAN.....	75	<i>rizatriptan benzoate</i>	3	<i>sodium phenylbutyrate</i>	31
<i>pyrazinamide</i>	83	ROCKLATAN.....	99	<i>sodium polystyrene sulfonate</i>	38
<i>pyridostigmine bromide</i>	4	<i>roflumilast</i>	49	<i>solifenacin succinate</i>	95
QINLOCK.....	71	<i>ropinirole hcl</i>	8	SOLQUA.....	33
QUADRACEL.....	26	<i>ropinirole hcl er</i>	8	SOLTAMOX.....	76
<i>quetiapine fumarate</i>	14	<i>rosuvastatin calcium</i>	62	SOLU-CORTEF.....	44
<i>quetiapine fumarate er</i>	14	ROTARIX.....	26	SOMATULINE DEPOT.....	31
<i>quinapril hcl</i>	57	ROTATEQ.....	26	SOMAVERT.....	31
<i>quinapril-hydrochlorothiazide</i>	58	<i>roweepra</i>	19	<i>sorafenib tosylate</i>	72
<i>quinidine sulfate</i>	62	ROZLYTREK.....	71	<i>sorine</i>	62
<i>quinine sulfate</i>	82	RUBRACA.....	71	<i>sotalol hcl</i>	62
RABAVERT.....	26	<i>rufinamide</i>	19	<i>sotalol hcl (af)</i>	62
<i>rabeprazole sodium</i>	104	RUKOBIA.....	86	<i>spironolactone</i>	65
<i>raloxifene hcl</i>	31	RYBELSUS.....	36	<i>spironolactone-hctz</i>	61
<i>ramipril</i>	57	RYDAPT.....	72	<i>sprintec 28</i>	42
<i>ranolazine er</i>	60	<i>sajazir</i>	105	SPRITAM.....	19
<i>rasagiline mesylate</i>	8	SANDIMMUNE.....	23	SPRYCEL.....	72
RAYALDEE.....	37	SANTYL.....	52	<i>sps</i>	38
<i>reclipsen</i>	42	<i>sapropterin dihydrochloride</i>	31	<i>sronyx</i>	42
RECOMBIVAX HB.....	26	SAVELLA.....	5	<i>ssd</i>	54
RECTIV.....	53	SAVELLA TITRATION PACK.....	5	STELARA.....	29
REGANEX.....	52	SCEMBLIX.....	72	<i>sterile water for irrigation</i>	53
RELENZA DISKHALER.....	81	<i>scopolamine</i>	102	STIVARGA.....	72
RELISTOR.....	101	SECUADO.....	15	<i>streptomycin sulfate</i>	79
REMICADE.....	28	<i>selegiline hcl</i>	8, 9	STRIBILD.....	84
RENFLEXIS.....	28	<i>selenium sulfide</i>	55	<i>subvenite</i>	19
<i>repaglinide</i>	36	SELZENTRY.....	86	<i>sucrafate</i>	101
RESTASIS.....	96	SEREVENT DISKUS.....	48	<i>sulfacetamide sodium</i>	98
RESTASIS MULTIDOSE.....	96	<i>sertraline hcl</i>	10, 11	<i>sulfacetamide sodium (acne)</i>	55
RETEVMO.....	71	<i>setlakin</i>	42	<i>sulfacetamide-prednisolone</i>	97
REVLIMID.....	67	<i>sevelamer carbonate</i>	37	<i>sulfadiazine</i>	79
REXULTI.....	14	<i>sharobel</i>	42	<i>sulfamethoxazole-trimethoprim</i>	79
REYATAZ.....	86	SHINGRIX.....	26	SULFAMYLON.....	54
REZLIDHIA.....	71	SIGNIFOR.....	31	<i>sulfasalazine</i>	102
REZUROCK.....	23	<i>sildenafil citrate</i>	63, 99	<i>sulindac</i>	107
RHOPRESSA.....	99	<i>silodosin</i>	96	<i>sumatriptan</i>	3
<i>ribavirin</i>	81	<i>silver sulfadiazine</i>	54	<i>sumatriptan succinate</i>	3
<i>rifabutin</i>	83	SIMBRINZA.....	99	<i>sumatriptan succinate refill</i>	3
<i>rifampin</i>	83	<i>simliya</i>	42	<i>sunitinib malate</i>	72
<i>riluzole</i>	5	<i>simvastatin</i>	62	SUNLENCA.....	86
<i>rimantadine hcl</i>	81	<i>sirolimus</i>	23	SUPREP BOWEL PREP KIT.....	103
RINVOQ.....	28	SIRTURO.....	83	<i>syeda</i>	42
<i>risedronate sodium</i>	45	SIVEXTRO.....	79	SYMBICORT.....	51
RISPERDAL CONSTA.....	15	SKYRIZI.....	28, 29	SYMDEKO.....	49
<i>risperidone</i>	15	SKYRIZI PEN.....	29		

SYMPAZAN.....	19	THEO-24.....	49	<i>triamterene-hctz</i>	61
SYMTUZA.....	84	<i>theophylline</i>	49	<i>trientine hcl</i>	38
SYNAREL.....	31	<i>theophylline er</i>	49	<i>tri-estarylla</i>	43
SYNJARDY.....	36	<i>thioridazine hcl</i>	15	<i>trifluoperazine hcl</i>	15
SYNJARDY XR.....	36	<i>thiothixene</i>	15	<i>trifluridine</i>	98
SYNRIBO.....	67	<i>tiadylt er</i>	66	<i>trihexyphenidyl hcl</i>	9
SYNTHROID.....	37	<i>tiagabine hcl</i>	19	TRIJARDY XR.....	36
TABLOID.....	75	TIBSOVO.....	72	TRIKAFTA.....	49
TABRECTA.....	72	TICOVAC.....	26	<i>tri-legest fe</i>	43
<i>tacrolimus</i>	23, 53	<i>tigecycline</i>	80	<i>tri-linyah</i>	43
<i>tadalafil (pah)</i>	63	TIGECYCLINE.....	80	<i>tri-lo-estarylla</i>	43
TADLIQ.....	63	<i>tilia fe</i>	43	<i>tri-lo-marzia</i>	43
TAFINLAR.....	72	<i>timolol maleate</i>	59, 99	<i>tri-lo-mili</i>	43
TAGRISSO.....	72	<i>tinidazole</i>	79	<i>tri-lo-sprintec</i>	43
TALTZ.....	29	TIVICAY.....	86	<i>trimethoprim</i>	80
TALZENNA.....	72	TIVICAY PD.....	86	<i>tri-mili</i>	43
<i>tamoxifen citrate</i>	76	<i>tizanidine hcl</i>	22	<i>trimipramine maleate</i>	11
<i>tamsulosin hcl</i>	96	TOBRADEX.....	97	TRINTELLIX.....	11
<i>tarina fe 1/20 eq</i>	43	TOBRADEX ST.....	97	<i>tri-nymyo</i>	43
TASIGNA.....	72	<i>tobramycin</i>	80, 98	<i>tri-sprintec</i>	43
<i>tasimelteon</i>	6	<i>tobramycin sulfate</i>	80	TRIUMEQ.....	84
<i>tazarotene</i>	54	<i>tobramycin-dexamethasone</i>	97	TRIUMEQ PD.....	84
<i>tazicef</i>	91	<i>tolterodine tartrate</i>	95	<i>trivora (28)</i>	43
TAZORAC.....	54	<i>tolterodine tartrate er</i>	95	<i>tri-vylibra</i>	43
<i>taztia xt</i>	66	<i>topiramate</i>	19	<i>tri-vylibra lo</i>	43
TAZVERIK.....	72	<i>toremifene citrate</i>	76	TRIZIVIR.....	84
TDVAX.....	26	<i>torse mide</i>	61	TROGARZO.....	86
TECENTRIQ.....	72	TOUJEO MAX SOLOSTAR.....	33	TROPHAMINE.....	95
TECFIDERA.....	5	TOUJEO SOLOSTAR.....	33	<i>tropium chloride</i>	96
TEFLARO.....	91	TPN ELECTROLYTES.....	93	<i>tropium chloride er</i>	96
<i>telmisartan</i>	64	TRADJENTA.....	36	TRULICITY.....	36
<i>telmisartan-amlodipine</i>	65	<i>tramadol hcl</i>	109	TRUMENBA.....	26
<i>telmisartan-hctz</i>	65	<i>tramadol-acetaminophen</i>	109	TRUSELTIQ (100MG DAILY DOSE).....	72
<i>temazepam</i>	6	<i>trandolapril</i>	57	TRUSELTIQ (125MG DAILY DOSE).....	72
TENIVAC.....	26	<i>tranexamic acid</i>	105	TRUSELTIQ (50MG DAILY DOSE).....	72
<i>tenofovir disoproxil fumarate</i>	86	<i>tranylcypromine sulfate</i>	11	TRUSELTIQ (75MG DAILY DOSE).....	72
TEPMETKO.....	72	TRAVASOL.....	95	TRUXIMA.....	73
<i>terazosin hcl</i>	58	<i>travoprost (bak free)</i>	99	TUKYSA.....	73
<i>terbinafine hcl</i>	83	TRAZIMERA.....	72	TURALIO.....	73
<i>terbutaline sulfate</i>	48	<i>trazodone hcl</i>	11	TWINRIX.....	26
<i>terconazole</i>	96	TRECTOR.....	83	TYBOST.....	86
TERIPARATIDE (RECOMBINANT).....	45	TRELEGY ELLIPTA.....	51	TYMLOS.....	45
<i>testosterone</i>	46	<i>treprostinil</i>	63	TYPHIM VI.....	26
<i>testosterone cypionate</i>	46	TRESIBA.....	33	TYRVAYA.....	96
<i>testosterone enanthate</i>	46	TRESIBA FLEXTOUCH.....	33	<i>unithroid</i>	37
<i>tetrabenazine</i>	5	<i>tretinoin</i>	55, 67	<i>ursodiol</i>	101
<i>tetracycline hcl</i>	80	TREXALL.....	27		
THALOMID.....	67	<i>triamcinolone acetonide</i>	52, 57		

<i>valacyclovir hcl</i>	81	<i>viorele</i>	43	XULTOPHY.....	33
VALCHLOR.....	53	VIRACEPT.....	86	XYREM.....	22
<i>valganciclovir hcl</i>	82	VIREAD.....	86	YF-VAX.....	27
<i>valproate sodium</i>	19	VITRAKVI.....	73	<i>yuvafem</i>	47
<i>valproic acid</i>	19	VIVITROL.....	7	<i>zafemy</i>	43
<i>valsartan</i>	64	VIZIMPRO.....	73	<i>zafirlukast</i>	51
<i>valsartan-hydrochlorothiazide</i>	65	VONJO.....	73	ZARXIO.....	106
VALTOCO 10 MG DOSE.....	19	<i>voriconazole</i>	83	ZEJULA.....	74
VALTOCO 15 MG DOSE.....	19	VOSEVI.....	82	ZELBORAF.....	74
VALTOCO 20 MG DOSE.....	19	VOTRIENT.....	73	ZEMAIRA.....	49
VALTOCO 5 MG DOSE.....	20	VRAYLAR.....	15	<i>zenatane</i>	55
<i>vancomycin hcl</i>	80	VUMERITY.....	5	ZENPEP.....	103
VANCOMYCIN HCL IN NAACL.....	80	<i>vyfemla</i>	43	ZERVIAE.....	98
VANFLYTA.....	73	<i>vylibra</i>	43	<i>zidovudine</i>	86
VAQTA.....	27	VYVANSE.....	21	ZIEXTENZO.....	106
<i>varденаfil hcl</i>	100	VYZULTA.....	99	<i>ziprasidone hcl</i>	15
<i>varenicline tartrate</i>	7	<i>warfarin sodium</i>	106	<i>ziprasidone mesylate</i>	15
<i>varenicline tartrate (starter)</i>	7	WELIREG.....	67	ZIRABEV.....	74
VARIVAX.....	27	<i>wera</i>	43	ZIRGAN.....	98
VASCEPA.....	60	XALKORI.....	73	<i>zoledronic acid</i>	45
<i>velivet</i>	43	XARELTO.....	106	ZOLINZA.....	74
VELPHORO.....	37	XARELTO STARTER PACK.....	106	<i>zolmitriptan</i>	4
VELTASSA.....	38	XATMEP.....	27	<i>zolpidem tartrate</i>	6
VEMLIDY.....	82	XCOPRI.....	20	ZONISADE.....	20
VENCLEXTA.....	73	XCOPRI (250 MG DAILY DOSE)....	20	<i>zonisamide</i>	20
VENCLEXTA STARTING PACK.....	73	XCOPRI (350 MG DAILY DOSE)....	20	<i>zovia 1/35 (28)</i>	43
<i>venlafaxine hcl</i>	11	XELJANZ.....	29	ZTALMY.....	20
<i>venlafaxine hcl er</i>	11	XELJANZ XR.....	29	<i>zumandimine</i>	43
VENTAVIS.....	63	XERMELO.....	101	ZYCLARA PUMP.....	53
VENTOLIN HFA.....	48	XGEVA.....	45	ZYDELIG.....	74
<i>verapamil hcl</i>	66	XHANCE.....	52	ZYKADIA.....	74
<i>verapamil hcl er</i>	66	XIFAXAN.....	101	ZYLET.....	97
VERSACLOZ.....	15	XIGDUO XR.....	36	ZYPITAMAG.....	62
VERZENIO.....	73	XOLAIR.....	49	ZYPREXA RELPREVV.....	15
<i>vestura</i>	43	XOSPATA.....	73		
V-GO 20.....	33	XPOVIO (100 MG ONCE WEEKLY).....	73		
V-GO 30.....	33	XPOVIO (40 MG ONCE WEEKLY). 73			
V-GO 40.....	33	XPOVIO (40 MG TWICE WEEKLY).....	73		
VICTOZA.....	36	XPOVIO (60 MG ONCE WEEKLY). 73			
<i>vienva</i>	43	XPOVIO (60 MG TWICE WEEKLY).....	73		
<i>vigabatrin</i>	20	XPOVIO (80 MG ONCE WEEKLY). 73			
<i>vigadrone</i>	20	XPOVIO (80 MG TWICE WEEKLY).....	74		
VIIBRYD.....	11	XTANDI.....	76		
VIIBRYD STARTER PACK.....	11	<i>xulane</i>	43		
<i>vilazodone hcl</i>	11				
VIMPAT.....	20				
<i>vincristine sulfate</i>	75				
<i>vinorelbine tartrate</i>	75				

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Chinese Mandarin: 我们有免费的口译服务来回答您就我们的健康或药物计划提出的任何问题。如需口译员，只需拨打以下页面上的计划号码致电联系我们。会说中文普通话的人员可以协助您。此为免费服务。

Chinese Cantonese: 我們有免費的口譯服務來回答您就我們的健康或藥物計劃提出的任何問題。如需口譯員，只需撥打以下頁面上的計劃號碼致電聯絡我們。會說粵語的人員可以協助您。此為免費服務。

Tagalog: Meron kaming libreng serbisyo ng interpreter para sagutin anumang tanong na meron ka tungkol sa aming plano ng kalusugan o gamot. Para makakuha ng interpreter, tawagan lang kami sa mga numero ng plano na nasa sumusunod na mga pahina. Matutulongan ka ng sinumang nagsasalita ng Tagalog. Libreng serbisyo ito.

French: Nous disposons de services d'interprétation gratuits pour répondre à toutes les questions que vous pourriez vous poser au sujet de notre régime de soins médicaux ou de notre régime d'assurance-médicaments. Pour bénéficier des services d'un interprète, il suffit de nous appeler aux numéros de régime indiqués dans les pages suivantes. Quelqu'un qui parle français peut vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi cung cấp dịch vụ phiên dịch viên miễn phí để trả lời bất kỳ câu hỏi nào quý vị có về chương trình y tế hoặc thuốc của chúng tôi. Để nhận được dịch vụ phiên dịch, chỉ cần gọi cho chúng tôi theo số điện thoại của chương trình trong các trang sau. Người nào đó nói tiếng Việt có thể giúp quý vị. Đây là dịch vụ miễn phí.

German: Wir bieten Ihnen einen kostenlosen Dolmetscherdienst, um alle Ihre Fragen zu unserem Gesundheits- oder Medikamentenplan zu beantworten. Um einen Dolmetscher zu finden, rufen Sie uns einfach unter den auf den folgenden Seiten angegebenen Plan-Nummern an. Jemand, der Deutsch spricht, kann Ihnen helfen. Dieser Service ist für Sie kostenlos.

Korean: 저희의 건강 또는 약품 플랜에 대한 질문에 답해 드릴 수 있는 무료 통역 서비스를 제공합니다. 통역사에게 연결하려면 다음 페이지에 있는 플랜 번호로 전화하시기 바랍니다. 한국어를 하는 분이 도와드릴 수 있습니다. 이 통화는 무료 서비스입니다.

Russian: Мы предоставляем бесплатные услуги устного перевода, чтобы ответить на любые вопросы, которые могут возникнуть у вас о нашем плане медицинского страхования или страхового покрытия лекарственных препаратов. Чтобы получить устного переводчика, просто позвоните нам по номерам планов, указанным на следующих страницах. Вам поможет тот, кто говорит по-русски. Эта услуга предоставляется бесплатно.

Arabic: نوفر خدمات مترجم فوري للإجابة عن أي أسئلة قد تكون لديك حول خطتنا الصحية أو الدوائية. للاستعانة بمترجم، ما عليك سوى الاتصال بنا على أرقام الخطة في الصفحات التالية. شخص يتحدث العربية يمكنه مساعدتك. هذه الخدمة تقدم مجاناً.

Hindi: हमारे स्वास्थ्य या दवा योजना के बारे में आपके होने वाले किसी भी प्रश्न का उत्तर देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएं उपलब्ध हैं। दुभाषिया प्राप्त करने के लिए, हमें निम्नलिखित पृष्ठों पर दिए गए प्लान नंबरों पर कॉल करें। कोई हिंदी भाषी व्यक्ति आपकी मदद कर सकता है। यह एक निःशुल्क सेवा है।

Italian: Disponiamo di servizi di interpretariato gratuiti per rispondere ad eventuali domande in merito al nostro piano sanitario o farmaceutico. Per ottenere un interprete, chiami i recapiti del piano disponibili nelle pagine successive. Qualcuno che parla italiano Le sarà d'aiuto. Si tratta di un servizio gratuito.

Portuguese: Temos serviços de intérprete gratuitos para responder quaisquer perguntas que você possa ter sobre nossos planos de saúde ou de medicamentos. Para solicitar um intérprete, ligue para nós através dos números do plano nas páginas a seguir. Um funcionário que fala português poderá ajudá-lo. Este serviço é gratuito.

French Creole: Nou gen sèvis entèprèt gratis pou reponn tout kesyon ou ka genyen konsènan plan sante ouwa plan medikaman nou an. Pou jwenn yon entèprèt, annik rele nou nan nimewo plan yo ki sou paj annapre yo. Yon moun ki pale Kreyòl Franse kapab ede ou. Se yon sèvis gratis li ye.

Polish: Oferujemy bezpłatne usługi tłumaczeniowe w przypadku pytań dotyczących naszego planu zdrowotnego i lekowego. Aby skorzystać z tłumacza, prosimy zadzwonić do nas pod numery podane na kolejnych stronach. Pomocą posłużą osoby mówiące po polsku. Usługa jest bezpłatna.

Japanese: 当社の医療プランまたは処方薬プランについての質問にお答えする無料の通訳サービスをご利用いただけます。通訳サービスをご利用になるには、以降のページにおけるプランの番号までお電話ください。日本語を話すスタッフが対応いたします。これは無料のサービスです。

Hawaiian: Aia iā mākou he mau lawelawe māhele 'ōlelo manuahi e pane i nā 'ano nīnau āu no ka mākou papahana mālama olakino a ho'olako lā'au. No ka 'imi i mea māhele 'ōlelo, e kelepona wale mai iā mākou ma nā helu kelepona e waiho nei ma kēia mau 'ao'ao e koe nei. Na kekahi māhele 'ōlelo Hawai'i e kōkua iā 'oe. He lawelawe manuahi kēia.

Ilocano: Addaankami kadagiti libre a serbisio ti panagipatarus tapno masungbatan dagiti aniaman a saludsodmo maipapan iti salun-at wenno plano iti agas. Tapno makaala iti tagaipatarus, tawagannakami laeng kadagiti numero ti plano kadagiti sumaganad a panid. Matulongannaka ti maysa a tao nga agsasao iti Ilocano. Daytoy ket libre a serbisio.

Samoan: E iai a matou auaunaga fa'aliliu upu fua e tali ai so'o se fesili e te ono iai e uiga i la matou fuafuaga fa'alesoifua maloloina po'o vaila'au. Mo le mauaina o se fa'aliliu upu, na'o le vala'au mai i numera o fuafuaga o lo'o i itulau nei. E mafai e se tasi e tautala i le gagana Samoa ona fesoasoani ia te oe. Ose auaunaga e leai se totogi.

電話一通， 我們即在！

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📅 4月1日至9月30日：週一至週五，上午8點至晚上8點



本處方集在 12/01/2023 更新。

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12/01/2023

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