

Wellcare CalViva Health Dual Align, HMO D-SNP

Wellcare Dual Align, HMO D-SNP

2024 Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav
Roos (Tus Qauv Tshuaj)

02



**THOV NYEEM: TSAB NTAWV NO MUAJ COV TXHEEJ XWM HAIS TXOG COV
TSHUAJ UAS PEB DUAV ROOS NYOB RAU LUB PHIAJ XWM NO**

HPMS Tau Pom Zoo Xa Cov Ntaub Ntawv Tus Qauv Tshuaj ID 24154, Phaum Ntawv 12

Tus qauv tshuaj no tau kho thaum 06/01/2024.

Ib Qho Lus Tseem Ceeb Txog Yam koj Them rau Cov Tshuaj Tiv Thaiiv Kab Mob - Ib txhia tshuaj tiv
thaiv xam tias yog tshuaj kho mob. Lwm cov tshuaj tiv thaiv xam tias yog Part D Cov Tshuaj. Peb lub phiaj
xwm saib xyuas feem yuav luag tag cov tshuaj tiv thaiv nyob rau Part D yam koj tsis tau them nyiaj li.

Yog xav paub ntau ntxiv txog ntaub ntawv tsis ntev los no thiab lwm cov lus nug, tiv tauj Wellcare Dual
Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm **1-800-431-9007** los sis Wellcare CalViva Health
Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm **1-833-236-2366**, rau cov neeg siv TTY, **711**,
ncua thaum Lub Kaum Hlis Ntuj Tim 1 thiab Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv
Hnub Monday–Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua Lub Plaub Hlis Ntuj Tim
1 thiab Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday–Friday, thaum
8 teev sawv ntxov txog 8 teev tsaus ntuj, los sis mus saib **wellcare.com/healthnetCA**.



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*In Partnership with CalViva
HEALTH*

Lus Taw Qhia

Tsab ntawv no hu ua *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos* (kuj tseem paub tias yog Daim Ntawv Teev Tshuaj). Nws yuav qhia koj tag nrho tias hom tshuaj uas muaj ntawv yuav twg uas tau kev saib xyuas los ntawm peb lub phiaj xwm. Daim Ntawv Teev Tshuaj tseem qhia koj yog tias nws muaj ib tsab cai tshwj xeeb los sis txwv ib yam tshuaj twg uas saib xyuas los ntawm peb lub phiaj xwm.

Peb qhov txheej xwm tiv tauj, nrog rau hnub uas peb kho tshiab peb Daim Ntawv Teev Tshuaj, yuav phiaj yeeg nyob rau ntawm lub plhaub ntawv phab tom hauv ntej thiab nrob qaum. Cov Ntshiab Lus Tseem Ceeb thiab nws cov lus txhiaj txhais muaj nyob rau tshooj kawg ntawm *Phau Ntawv Qhia Tswv Cuab*.



Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA. ¹

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A. Cov Lus Tsis Kam Lees

Ntawm no yog cov npe tshuaj uas tus tswv cuab tuaj yeem tau nyob rau hauv peb lub phiaj xwm.

- ❖ Wellcare yog ib lub npe lag luam ntawm Medicare rau hauv tuam txhab Centene Corporation, ib lub phiaj xwm HMO uas muaj ntawv cog lus nrog Medicare thiab yog tau kev pom zoo raws li Part D Tus Neeg Txhawb. Peb lub phiaj xwm D-SNP muaj ntawv cog lus nrog tes dej num Medi-Cal. Kev sau npe rau hauv peb cov phiaj xwm yog nce raws li kev rov txuas sij hawm ntaub ntawv cog lus.
- ❖ CalViva Health yog lub Medi-Cal Managed Care Plan (MCP) thiab yog Local Initiative Health Plan rau Medi-Cal kev saib xyuas uas muaj kev tswj hwm nyob rau hauv Khauj Tim Fresno, Kings, thiab Madera. CalViva Health yog lub phiaj xwm kev noj qab haus huv uas muab kev pab cuam puv uas muaj ntaub ntawv cog lus nrog rau Lub Chaw Hauj Lwm Pab Cuam Saib Xyuas Kev Noj Qab Haus Huv (DHCS) los muab Cov Kev Pab Cuam Uas Tau Txais Kev Duav Roos rau Medi-Cal mus rau Medi-Cal kev saib xyuas uas muaj kev tswj hwm cov neeg rau npe rau kev saib xyuas uas raug tswj raws li tus quav Ob-Lub Phiaj Xwm nyob rau hauv txhua tus zauv chaw nyob hauv Khauj Tim Fresno, Kings, thiab Madera. CalViva Health ua ntaub ntawv cog lus nrog rau Health Net Community Solutions, Inc. raws li tus quav teeb tseg los muab thiab npaj Medi-Cal Cov Kev Pab Cuam Uas Tau Txais Kev Duav Roos nyob rau hauv txhua tus zauv chaw nyob hauv Khauj Tim Fresno, Kings, thiab Madera. Health Net Community Solutions, Inc. yog lub tuam txhab ncau ntawm Health Net, LLC thiab Centene Corporation, thiab yog CalViva Health MCP Tus Kav Tswj Uas Muaj Ntaub Ntawv Cog Lus nyob rau hauv txhua tus khauj zip nyob rau hauv Cheeb Tsam Nroog Fresno, Kings, thiab Madera.
- ❖ Koj muaj peev xwm kuaj koj daim phiaj xwm *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos* hauv os lais ntawm **wellcare.com/healthnetCA** los sis tiv tauj Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, ncua thaum Lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav koom hauv Hnub Monday–Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav koom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj.
- ❖ Koj muaj peev xwm thov tau tsab ntawv no ua lwm hom ntaub ntawv dawb, xws li ntaus tus ntawv loj, tus ntawv su, los sis ua suab. Hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav koom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav koom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb.
- ❖ Tsab ntawv no muaj txhais dawb mus ua lus Alav, Meskas, Kaspuscia, Suav, Faxis, Kauslim, Lavxias, Khej, Taskaslov thiab Nyablaj.

Nqe no txuas ntxiv mus rau phab tom ntej.



Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav koom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav koom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA. ³

- ❖ Yog koj xav thov ua lwm hom (luam tus ntawv loj, ua suab, nkag mus rau cov eslevtausniv, lwm hom) los sis lwm hom lus uas koj xav tau hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, ncua thaum Lub Kaum Hlis Ntuj Tim 1 thiab Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav koom hauv Hnub Monday-Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav koom hauv Hnub Monday-Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb.
 - Yog koj xav tau txais cov ntawv luam li qhov thov mus txaas ntxiv tom qab koj tau thov ib daim lawm, peb yuav npaj rau koj txaas mus ib zaug ib xyos kom txog thaum koj tsum koj qhov kev thov.
 - Yog koj muaj lus nug/kev txhawj xeeb los sis xav hloov hom lus koj nyiam thiab/los sis thov ua lwm hom, hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, ncua thaum Lub Kaum Hlis Ntuj Tim 1 thiab Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav koom hauv Hnub Monday-Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav koom hauv Hnub Monday-Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb.

B. Cov Lus Nug Uas Keev Nug (FAQ)

Nrhiav cov lus nug uas tej zaum koj kuj yuav muaj ib yam li lwm tus txog *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos*. Koj muaj peev xwm nyeem tag nrho cov lub nug uas keev neeg (FAQ) lus teb txhawm rau paub ntau ntxiv los sis nrhiav cov lus nug thiab lus teb.

B1. Muaj cov tshuaj uas muaj ntawv yuav twg nyob rau hauv *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos?* (Peb hu *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos* “*Daim Ntawv Teev Tshuaj*” hu luv.)

Cov tshuaj nyob hauv *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos* uas pib kiag nyob phab 16 yog cov tshuaj uas duav roos los ntawm Wellcare CalViva Health Dual Align (HMO D-SNP) thiab Wellcare Dual Align (HMO D-SNP). Cov tshuaj no muaj nyob rau cov khw muag tshuaj ntawm pab pawg koom tes. Ib lub tsev muag tshuaj nyob hauv peb pab pawg koom tes yog peb cog lus nrog lawv los ua hauj lwm nrog peb thiab muab kev saib xyuas koj. Peb txhais tau tias cov khw muag tshuaj no yog “lub khw muag tshuaj hauv pab pawg koom tes.” cov tshuaj muaj ntawv yuav muaj nyob rau hauv *Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos* yog tau txais kev duav roos los ntawm peb lub phiaj xwm. Lwm yam tshuaj, xws li qee yam tshuaj uas yuav tau ntawm lub txee muag (OTC) thiab ib co tshuaj vitamin, tej zaum kuj tau txais kev saib xyuas los ntawm Medi-Cal Rx. Thov mus saib Medi-Cal Rx lub vev xaib (www.medi-calrx.dhcs.ca.gov) txhawm rau paub txheej xwm ntau ntxiv. Koj kuj tuaj yeem hu rau Medi-Cal Rx Lub Chaw Pab Cuam Tus Neeg Siv Khoom ntawm 800-977-2273. Thov nqa koj *Daim Npav Cim Thawj Qhia Txog Tus Neeg Muaj Cai Tau Txiaj Ntsig Hauv Medi-Cal (BIC)* thaum tau txais cov ntawv sau qhia yuav tshuaj los ntawm Medi-Cal Rx.

- Peb lub phiaj xwm saib xyuas tag nrho cov tshuaj uas yog qhov tsim nyog rau kev kho mob nyob rau *Daim Ntawv Teev Tshuaj* yog:
 - koj tus kws kho mob los yog tus kws tshuaj tias koj yuav tau siv cov tshuaj ntawd thiaj zoo los yog rov los noj qab haus huv,
 - peb lub phiaj xwm pom zoo tias cov tshuaj yog yuav tau siv los kho tus mob rau koj, **thiab**
 - koj mus nqa tshuaj ntawm lub khw muag tshuaj hauv pab pawg koom tes uas nyob rau lub phiaj xwm.
- Muaj qee zaum, koj yuav tau ua qee yam ua ntej koj mus nqa tshuaj. Saib raws li cov lus nug B4 txhawm rau paub ntau ntxiv.

Koj tseem muaj peev xwm yuav mus nrhiav tau daim ntawv teev tshuaj hloov kho tshiab uas peb duav roos hauv peb lub vev xaib ntawm wellcare.com/healthnetCA, los sis hu rau Lub Chaw Pab Cuam Tus Tswv Cuab ntawm tus xov tooj sab hauv tus taw ntawv ntawm tsab ntawv no.

B2. Daim Ntaww Teev Tshuaj puas hloov tas li?

Yog, thiab peb lub phiaj xwm yog ua raws li Medicare thiab Medi-Cal cov cai thaum muaj kev hloov. Tej zaum peb yuav ntxiv los sis tshem tawm qee cov tshuaj tawm hauv Daim Ntaww Teev Tshuaj nyob rau ntawm lub xyoo.

Tej zaum peb kuj yuav hloov coov cai txog cov tshuaj. Piv txww, peb muaj peevee xwm:

- Txiaav txim tias yuav tsum los sis tsis tas yuav tsum tau kev tso cai ua ntej tau txais ib yam tshuaj. (Kev tso cai ua ntej yog kev tso cai los ntawm peb lub phiaj xwm ua ntej koj yuav tau txais ib yam tshuaj.)
- Ntxiv los sis hloov ib qhov ntau tsawg ntawm ib hom tshuaj uas koj tau txais (hu ua cov kev txww rau qhov ntau tsawg).
- Ntxiv los sis hloov kev kho mob raws kauj ruam txww kev siv ib hom tshuaj. (Kev kho mob raws kauj ruam txhais tau tias koj yuav tau sim ib hom tshuaj ua ntej peb yuav kam saib xyuas mus rau lwm hom tshuaj.)

Txheej xwm ntau ntxiv txog cov kev cai tshuaj no, saib mus rau nqe lus nug B4.

Yog koj noj ib hom tshuaj uas tau txais kev duav roos thaum **pib** ntawm lub xyoo, feem ntau lawm peb yuav tsis tshem tawm los sis hloov qhov kev saib xyuas ntawm **hom tshuaj ntaww kom tag lub xyoo** tshwj tsis yog tias:

- hom tshuaj tshiab, us pheej yig dua muaj muag hauv kiab khw uas siv tau zoo ib yam li cov tshuaj nyob hauv Daim Ntaww Teev Tshuaj tam sim no, **los sis**
- peb pom tias hom tshuaj ntawd tsis muaj kev nyab xeeb, **los sis**
- hom tshuaj tau raug tshem tawm hauv kiab khw lawm.

Cov lus nug B3 thiab B6 hauv qab no muaj txheej xwm qhia txog tias Daim Ntaww Teev Tshuaj hloov tau li cas.

- Koj tuaj yeem kuaj saib hauv peb lub phiaj xwm Daim Ntaww Teev Tshuaj hloov kho tshiab hauv online ntawm wellcare.com/healthnetCA.
- Koj tuaj yeem hu xov tooj rau Lub Chaw Pab Cuam Tswv Cuab nyob ntawm cov nab npawb teev tseg nyob hauv qab kawg ntawm nplooj ntawv no kom kuaj tau Daim Ntaww Teev Tshuaj tam sim no.

Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA. 5



B3. Yuav muaj dab tsí tshwm sim thaum Daim Ntawv Teev Tshuaj hloov?

Muaj qee yam hloov txog Daim Ntawv Teev Tshuaj yuav tshwm sim **hloov tam siv**. Piv txwv li:

- **Muaj hom tshuaj muaj muag tom tej khw tshwm sim tshiab.** Qee zaum, cov tshuaj muaj muag tom tej khw tshiab tawm los rau hauv kiab khw thiab siv tau zoo ib yam li cov tshuaj muaj npe hom tshuaj (brand) hauv Daim Ntawv Teev Tshuaj tam sim no. Thaum muaj li no, tej zaum peb kuj yuav tshem cov tshuaj uas muaj npe hom tshuaj tawm thiab ntxiv cov tshuaj muaj muag tom tej khw, tiam sis qhov koj yuav tau them nyiaj rau hom tshuaj tshiab ces tseem yog \$0. Thaum peb ntxiv cov tshuaj muaj muag tom tej khw, peb tej zaum kuj tseem yuav txiav txim siab khaws cov tshuaj uas muaj npe hom tshuaj cia tiam sis tsuas yog hloov cai los sis siv muaj cwj ciam xwb.
 - Tej zaum peb yuav tsis qhia koj ua ntej peb yuav hloov qhov no, tiam sis peb yuav xa cov txheej xwm txog qhov kev hloov tshwj xeeb no tias peb hloov thaum twg.
 - Koj los sis koj tus kws kho mob muaj peev xwm nug kom muab qhov kev zam los ntawm qhov kev hloov no. Peb yuav xa ib tsab ceeb toom rau koj qhia cov kauj ruam uas koj yuav ua txhawm rau thov qhov kev zam. Thov mus saib raws li cov lus nug B10-B12 txhawm rau paub ntxiv txog qhov kev zam.
- **Hom tshuaj raug tshem tawm hauv kiab khw lawm.** Yog tias Lub Chaw Tswj Xyuas Khoom Noj thiab Tshuaj (FDA) hais tias cov tshuaj uas koj noj tsis muaj kev nyab xeeb los sis cov chaw tsim tshuaj muab cov tshuaj tawm ntawm lub kaib khw lawm, peb yuav muab nws tawm ntawm Daim Ntawv Teev Tshuaj. Yog tias koj tseem tab tom noj hom tshuaj ntawd, peb yuav qhia koj paub. Thov tham nrog koj tus kws kho mob los sis lwm tus kws tshuaj los pab koj txiav txim yog cov tshuaj muaj qhov sib thooj nyob rau Daim Ntawv Teev Tshuaj uas koj tuaj yeem noj tam tau.

Tej zaum peb kuj tseem yuav hloov dua cov tshuaj cuam tshuam cov tshuaj koj tab tom noj. Zaum no peb yav qhia koj ua ntej txog cov kev hloov mus rau Daim Ntawv Teev Tshuaj zaum no. Cov kev hloov noj tej zaum kuj yuav tshwm sim yog tias:

- FDA muaj tsab ntawv qhia tshiab los sis muaj kev tsab ntawv qhia kev sim tshuaj tshiab txog ib hom tshuaj.
- Peb ntxiv ib hom tshuaj muaj muag tom tej khw tshiab rau hauv kiab khw **tshiab**
 - Hloov ib hom tshuaj muaj npe hom tshuaj tam sim no nyob rau hauv Daim Ntawv Teev Tshuaj **los sis**
 - Hloov txoj cai saib xyuas los sis tus cwj ciam rau cov tshuaj muaj npe hom tshuaj.

Thaum muaj cov kev hloov no, peb yuav:

- Qhia koj yam tsawg 30 hnub ua ntej peb hloov rau hauv Daim Ntawv Teev Tshuaj **los sis**
- Qhia koj paub thiab muab tshuaj ntxiv rau koj li 30-hnub tom qab koj thov txuas koj li tshuaj.

Nov yuav muab sij hawm rau koj tham nrog koj tus kws kho mob los sis tus kws tshuaj. Lawv muaj peev xwm pab koj txiav txim:

- Yog muaj cov tshuaj sib thooj nyob hauv Daim Ntawv Teev Tshuaj koj muaj peev xwm noj hloov tau **los sis**
- Tsis hais yuav thov kom muaj qhov kev zam los ntawm cov kev hloov no. Kawm paub ntxiv txog qhov kev zam, mus saib raws li cov lus nug B10-B12.

B4. Puas muaj kev txwv los sis cwj ciam txog cov tshuaj saib xyuas los sis yuav tsum tau ua ib Yam dab tsi txhawm rau tau txais ib Yam tshuaj twg?

Yog, qee hom tshuaj muaj txoj cai saib xyuas los sis tus cwj ciam uas koj muaj peev xwm siv tau ntau npaum cas. Muaj qee zaum koj los sis koj tus kws kho mob los sis lwm tus kws tshuaj yuav tsum tau ua qee yam ua ntej koj yuav tau txais cov tshuaj. Piv txwv li:

- **Kev tso cai ua ntej:** Muaj qee hom tshuaj, koj los sis koj tus kws kho mob los sis koj tus kws tshuaj yuav tsum tau kev tso cai los ntawm peb lub phiaj xwm ua ntej sau koj daim ntawv yuav tshuaj. Kev tso cai ua ntej txaww daim ntawv kev qhia mus kho mob. Peb lub phiaj xwm tej zaum kuj yuav tsis kam saib xyuas hom tshuaj no yog tsis tau kev tso cai ua ntej.
- **Cov kev txwv rau qhov ntau tsawg:** Tej zaum peb lub phiaj xwm kuj muaj cwj ciam qhov ntau tsawg npaum cas rau hom tshuaj uas koj tau txais.
- **Kev kho mob raws kauj ruam:** Qee zaum peb lub phiaj xwm yuav kom koj ua kev kho mob raws kauj ruam. Qhov no txhais tau tias koj yuav tau sim noj cov tshuaj raws qee theem mus raws koj qhov xwm txheej kev kho mob. Koj yuav tau sim noj ib hom tshuaj ua ntej koj yuav duav roos lwm hom tshuaj rau koj. Yog koj tus kws kho mob xav tias thawj hom tshuaj yuav tsis zoo rau koj, ces peb mam li duav roos mus rau hom thib ob.

Koj muaj peev xwm saib seb koj hom tshuaj puas muaj lwm yam cai ntxiv los sis cwj ciam uas yog mus saib rau lub nas thaum pib nyob phab 16. Koj muaj peev xwm kawm paub ntau ntxiv uas yog mus saib peb lub veve xaib ntawm wellcare.com/healthnetCA. Peb tau tshaj tawm cov ntaub ntawv hauv os-lais uas tau piav txog cov kev txwv txog kev tso cai ua ntej thiab kev kho mob raws kauj ruam. Koj kuj tuaj yeem hais kom peb luam ib tsab xa rau koj.

Koj muaj peev xwm thov kom muaj qhov kev zam cov cwj ciam kev txwv no. Nov yuav muab sij hawm rau koj tham nrog koj tus kws kho mob los sis tus kws tshuaj. Lawv muaj peev xwm pab koj txiav txim yog muaj cov tshuaj uas sib thooj nyob rau Daim Ntawv Teev Tshuaj uas koj muaj peev xwm noj hloov los sis thov qhov kev zam. Thov mus saib raws li cov lus nug B10-B12 txhawm rau paub cov txheej xwm txog cov qhov kev zam.

B5. Kuv yuav paub tau li cas tias yam tshuaj kuv xav tau muaj cwj ciam los sis nws yuav tsum tau ua qee yam ua ntej yuav tau txais yam tshuaj?

Lub kem ntawv hauv Daim Ntawv Teev Tshuaj raws cov Xwm Txheej Kev Kho Mob nyob phab 16 muaj ib kem sau npe tias “Yuav tau ua qee yam, muaj kev txwv, siv muaj cwj ciam.”

Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday-Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday-Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA. 7



B6. Yuav ua li cas yog peb lub phiaj xwm hloov lawv txoj cai txog kev lawv yuav saib xyuas qee hom tshuaj (piv txwv, kev tso cai ua ntej, cov kev txwv rau qhov ntau tsawg, thiab/los sis kev txwv txog kev kho mob raws kauj ruam)?

Muaj qee zaum, peb yuav qhia koj ua ntej yog tias peb ntxiv los sis hloov kev tso cai ua ntej, cov kev txwv rau qhov ntau tsawg, thiab/los sis cwj ciamb kev kho mob raws kauj ruam txog hom tshuaj. Saib mus rau nqi lus nug B3 txhawm rau paub cov txheej xwm ntau ntxiv txog qhov kev ceeb toom ua ntej no thiab cov xwm txheej uas peb tsis muaj peev xwm qhia rau koj ua ntej thaum muaj kev hloov peb txoj kev cai txog tshuaj nyob rau hauv Daim Ntawv Teev Tshuaj.

B7. Kuv yuav nrhiav ib yam tshuaj hauv Daim Ntawv Teev Tshuaj tau li cas?

Nov yog ob txoj kev nrhiav ib hom tshuaj:

- Koj nriav tau raws tus niam ntawv, **los sis**
- Koj nrhiav tau raws xwm txheej kev kho mob.

Nrhiav **raws tus niam ntawv**, saib koj cov tshuaj raws nqe ntawv hauv Daim Ntawv Qhia Ntxiv txog Cov Tshuaj Uas Tau Txais Kev Duav Roos. Koj muaj peev xwm nrhiav tau hom tshuaj yog koj paub tias hom tshuaj lub npe sau li cas. Daim Ntawv Qhia Ntxiv txog Cov Tshuaj Uas Tau Txais Kev Duav Roos yog cov npe tshuaj uas sau raws tus niam ntawv tag nrho cov tshuaj hauv Daim Ntawv Teev Tshuaj. Cov tshuaj uas muaj npe hom tshuaj thiab cov tshuaj uas muaj muag tom tej khw puav leej muaj nyob rau cov npe. OTC cov tshuaj duav roos los ntawm Medi-Cal Rx yuav tsis sau npe nyob rau hauv Daim Ntawv Teev Tshuaj.

Nrhiav **raws hom mob**, nrhiav tshooj uas muaj npe “Daim Ntawv Teev Tshuaj raws Xwm Txheej Kev Kho Mob” nyob phab 16. Cov tshuaj nyob rau tshooj no tau muab tso ua ib pawg raws xwm txheej kev kho mob uas lawv nyiam siv cov tshuaj los kho. Piv txwv li, yog tias koj mob plawv, koj yuav tau nrhiav hom mob xws li, CARDIOVASCULAR, HYPERTENSION / LIPIDS. Cheeb tsam ntawd uas tej zaum koj yuav nrhiav tau cov tshuaj uas los kho tus mob plawv.

B8. Yuav ua li cas yog tias yam tshuaj kuv xav noj tsis muaj nyob rau Daim Ntawv Teev Tshuaj?

Yog koj nrhiav tsis tau koj hom tshuaj nyob rau hauv Daim Ntawv Teev Tshuaj, hu rau Lub Chaw Pab Cuam Tus Tswv Cuab ntawm cov tswv cuab nyob rau lub taw ntawv ntawm tsab ntawv no thiab nug lawv. Yog koj pom tias peb lub phiaj xwm yuav tsis saib xyuas hom tshuaj ntawd, koj muaj peev xwm ua ib yam ntawm cov hauv qab no:

- Nug Lub Chaw Pab Cuam Tus Tswv Cuab txog daim ntawv teev tshuaj zoo ib yam li qhov koj xav noj. Ces muab cov npe rau koj tus kws kho mob los sis lwm tus kws tshuaj saib. Lawv muaj peev xwm sau cov tshuaj nyob rau hauv Daim Ntawv Teev Tshuaj uas thooj li cov koj xav noj. **Los sis**
- Koj muaj peev xwm thov kom peb lub phiaj xwm ua qhov kev zam rau kev saib xyuas koj hom tshuaj. Mus saib raws li cov lus nug B10–B12 kom paub ntau ntxiv hais txog qhov kev zam.

B9. Yuav ua li cas yog tias kuv yog ib tus tswv cuab tshiab thiab nrhiav tsis tau kuv hom tshuaj nyob rau hauv Daim Ntaww Teev Tshuaj los sis muaj teeb meem qhov yuav tau txais kuv cov tshuaj?

Peb pab tau. Tej zaum peb yuav duav roos kev muab khoom ib ntus li 30-hnub rau koj thawj 90 hnub uas koj nyuam qhuav los ua peb tus tswv cuab tshiab hauv peb lub phiaj xwm. Nov yuav muab sij hawm rau koj tham nrog koj tus kws kho mob los sis tus kws tshuaj. Lawv muaj peev xwm pab koj txiav txim yog muaj cov tshuaj uas sib thooj nyob rau Daim Ntaww Teev Tshuaj uas koj muaj peev xwm noj hloov los sis thov qhov kev zam.

Yog koj daim ntaww yuav tshuaj sau tsawg hnub dua, peb yuav tso cai txhab tshuaj ob peb zaug ntev kawg txog 30 hnub.

Peb yuav saib xyuas koj cov tshuaj mus txog 30 hnub yog:

- koj tab tom noj cov tshuaj uas tsis nyob rau hauv peb Daim Ntaww Teev Tshuaj, **los sis**
- peb lub phiaj xwm txoj cai tsis pub koj tau txais cov tshuaj raws li koj tus kws tshuaj txib, **los sis**
- cov tshuaj uas yuav tau kev tso cai ua ntej los ntawm peb lub phiaj xwm, **los sis**
- koj tab tom noj hom tshuaj uas yog ib feem ntawm qhov kev txwv ntawm kev kho mob raws kauj ruam.

Yog tias koj tab tom noj cov tshuaj uas peb tsis muab xam ua Part D cov tshuaj, koj muaj cai ib-zaug, muab tshuaj txaus 72-teev.

Yog koj nyob rau ib lub tsev laus los sis ib lub chaw saib xyuas ncua sij hawm ntev thiab yuav tsum tau siv ib hom tshuaj uas tsis nyob rau Daim Ntaww Teev Tshuaj los sis yog koj tsis tuaj yeem tau cov tshuaj koj xav tau yooj, peb yuav pab tau koj. Yog koj npaj yuav nyob hauv tsev tu neeg mob ntev tshaj 90 hnub, ua neej nyob hauv lub chaw saib xyuas ncua sij hawm ntev, thiab xav tau tshuaj tam siv:

- Peb yuav saib xyuas ib zaug ntev 31-hnub txog cov tshuaj uas koj yuav tau siv (tshwj tsis yog tias koj daim ntaww yuav tshuaj ho tsawg hnub tshaj), tsis hais koj yuav yog ib tus tswv cuab tshiab los qub.
- Nov yog kev ntxiv rau kev muab khoom ib ntus hauv thawj 90 hnub uas koj los ua ib tus tswv cuab tshiab rau hauv peb lub phiaj xwm.

Yog koj theem kev saib xyuas hloov, peb yuav saib xyuas qhov kev muab khoom ib ntus txog koj cov tshuaj. Ib theem kev saib xyuas muaj kev hloov thaum koj twb tawm hauv tsev kho mob lawm. Nws kuj tseem tshwm sim thaum koj tshem mus rau los sis los ntawm lub chaw saib xyuas ncua sij hawm ntev.

- Yog koj nyuam qhuav los tom lub chaw saib xyuas ncua sij hawm ntev los sis tsev kho mob los thiab xav tau kev muab khoom ib ntus, peb yuav pab saib xyuas ib ntus ntev txog 30 hnub. Yog koj tus kws tshuaj sau tsawg hnub dua, peb kuj yuav pub txhab tshuaj txog li 30 hnub.
- Yog koj mus ntawm tsev los sis lub tsev kho mob mus rau lub chaw saib xyuas ncua sij hawm ntev thiab xav tau kev muab khoom ib ntus, peb yuav pab saib xyuas ntev txog 30 hnub. Yog koj tus kws tshuaj sau tsawg hnub dua, peb kuj yuav pub txhab tshuaj txog li 30 hnub.

Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA. ⁹



B10. Kuv puas thov qhov kev zam kev saib xyuas kuv cov thsuaj tau?

Yog. Koj muaj peev xwm nug peb lub phiaj xwm thov qhov kev zam kev saib xyuas yam tshuaj uas tsis nyob rau Daim Ntawv Teev Tshuaj.

Koj kuj tseem thov kom peb hloov txoj cai txog koj cov tshuaj tau.

- Piv txwv, peb lub phiaj xwm tej zaum yuav muaj cwj ciām txog qhov ntau tsawg ntawm cov tshuaj peb saib xyuas. Yog koj cov tshuaj muaj ib qho cwj ciām, koj muaj peev xwm thov peb hloov qhov cwj ciām kom duav roos tau ntau dua ntxiv.
- Ib qho piv txwv ntxiv: Koj muaj peev xwm thov kom peb tshem tawm cov kev txwv txog kev ko mob raws kauj ruam los sis txoj cai thov kev tso cai ua ntej.

B11. Kuv yuav thov qhov kev zam tau li cas?

Txhawm rau thov qhov kev zam, hu rau Lub Chaw Pab Cuam Tus Tswv Cuab. Tus neeg sawv cev Lub Chaw Pab Cuam Tus Tswv Cuab yuav ua hauj lwm nrog koj thiab koj tus kws kho mob txhawm rau pab koj thov qhov kev zam. Koj muaj peev xwm mus nyeem Tshooj 9 ntawm *Phau Ntawv Qhia Tswv Cuab* txhawm rau kawm paub ntau ntxiv txog qhov kev zam.

B12. Yuav siv sij hawm ntev npaum cas thiaj tau qhov kev zam?

Tom qab peb txais tau tsab ntawv qhia nyiaj los ntawm koj tus kws tshuaj kos txhawb koj cov kev thov qhov kev zam, peb yuav muab kev txiav txim siab rau koj tsis dhau 72 teev. Koj, koj tus neeg sawv cev, los sis koj tus kws kho mob (los sis lwm tus kws tshuaj) muaj peev xwm hu xov tooj, sau ntawv los sis fev tuaj rau peb txog koj qhov kev thov. Koj kuj tseem nkag tau mus rau peb qhov txheej txheem kev txiav txim siab txog kev duav roos tau los ntawm peb lub vev xaib. Yog xav paub ntxaws, mus rau Tshooj 2, Nqe A ntawm *Phau Ntawv Qhia Tswv Cuab* thiab nrhiav nqe hu tias “Lub Chaw Pab Cuam Tus Tswv Cuab”.

Yog koj los sis koj tus kws tshuaj xav tias yuav muaj qhov puas tsuaj rau koj lub cev yog yuav tau tos 72 teev los txiav txim, koj muaj peev xwm thov qhov kev zam maj rawm. Nov yog ib qho kev txiav txim siab ceev dua. Yog koj tus kws tshuaj pab koj qhov kev thov, peb yuav txiav txim siab rau koj tsis dhau 24 teev txij thaum tau txais koj tus kws tshuaj nqe lus ntawm kev txhawb nqa.

B13. Cov tshuaj muaj muag tom tej khw yog dab tsi?

Cov tshuaj muaj muag tom tej khw yog cov tshuaj uas tsim tawm los muaj tus kuab tshuaj ib yam li cov tshuaj uas muaj npe hom tshuaj. Feem ntau cov tshuaj no muaj tus nqi pheej yig dua cov tshuaj uas muaj npe hom tshuaj thiab feem ntau yuav tsis muaj npe nrov. Cov tshuaj muaj muag tom tej khw yog tau kev tso cai los ntawm Chaw Hauj Lwm Saib Xyuas Khoom Noj thiab Tshuaj (FDA).

Peb lub phiaj xwm puav leej saib xyuas tag nrho cov tshuaj muaj muag tom tej khw thiab cov tshuaj uas muaj npe hom tshuaj tib si.

B14. Cov tshuaj OTC yog dab tsi?

OTC yog sau los ntawm lo lus “ntawm lub txee muag”. Medi-Cal Rx saib xyuas ib txhia ntawm cov tshuaj OTC yog thaum koj tus kws kho mob sau kom yuav.

Koj muaj peev xwm mus nyeem Medi-Cal Rx daim ntawv teev tshuaj txhawm rau nrhiav cov tshuaj OTC uas saib xyuas.

B15. Peb lub phiaj xwm puas saib xyuas cov khoom OTC uas tsis yog tshuaj?

Medi-Cal Rx saib xyuas qee yam khoom OTC uas tsis yog tshuaj thaum tau sau rau daim ntawv yuav tshuaj los ntawm koj tus kws tshuaj.

Piv txwv cov khoom OTC uas tsis yog tshuaj muaj xws li cov paj rwb cawv thiab cov nyaub nplaum lo nqaij.

Koj muaj peev xwm nyeem Medi-Cal Rx daim ntawv teev tshuaj nrhiav seb dab tsi yog cov khoom OTC uas tsis yog tshuaj es tau txais kev saib xyuas.

B16. Peb lub phiaj xwm puas saib xyuas cov tshuaj khoom siv rau cov mob ntev?

- **Tes Dej Num Xa Tshuaj.** Peb muaj txoj kev pab xa tshuaj rau koj xaj tshuaj ntev txog 100 hnub uas yuav pab xa cov tshuaj uas koj sau ntawv yuav tuaj txog ntua ntawm koj lub tsev. Kev pab 100 hnub muaj qee qhov kev sib pab them li pab ib hlis.
- **Tes Dej Num Pab Hauv Khw Muag Tshuaj 100 Hnub.** Muaj qee lub khw muag tshuaj kuj pab cov tshuaj uas tau txais kev duav roos hauv daim ntawv yuav ntev txog 100 hnub. Kev pab 100 hnub muaj qee qhov kev sib pab them li pab ib hlis.

B17. Cov khw muag tshuaj hauv zos puas kam xa cov tshuaj muaj ntawv yuav tuaj kom txog kiag ntawm kuv tsev?

Cov khw muag tshuaj hauv koj lub zos tej zaum kuj yuav kam xa cov tshuaj muaj ntawv yuav tuaj txog ntawm koj tsev. Koj muaj peev xwm hu rau nej cov khw muag tshuaj seb lawv puas kam pab xa kom txog kiag ntawm koj tsev.

B18. Kev qhov kev sib pab them yog dab tsi?

Peb tus tswv cuab yuav tsis tau sib pab them cov tshuaj muaj ntawv yuav thiab cov tshuaj OTC thiab cov khoom uas tsis yog tshuaj yog tias tus tswv cuab ua raws li lub phiaj xwm cov kev cai. Mus saib raws li cov lus nug B14 thiab B15 txhawm rau paub ntau ntxiv txog cov tshuaj OTC thiab cov khoom uas tsis yog tshuaj.

Theem (Tiers) yog cov pawg tshuaj nyob rau hauv peb Daim Ntawv Teev Tshuaj.

- Theem 1 (Tag nrho Part D Cov Tshuaj Uas Tau Txais Kev Duav Roos) uas yog muaj cov tshuaj muaj npe thiab cov tshuaj muaj muag tom tej khw. Cov theem no yuav tsis tau sib pab them nyiaj li.

Yog koj muaj lus nug, hu rau Lub Chaw Pab Cuam Tus Tswv Cuab ntawm cov nab npawb uas teev muaj nyob hauv qab ntawm phab ntawv no.

Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA.¹¹



C. Hais Me Ntsis Txog Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos

Daim Ntawv Teev Tshuaj Uas Tau Txais Kev Duav Roos yuav qhia cov txheej xwm txog cov tshuaj uas peb lub phiaj xwm duav roos. Yog koj tsis muaj peev xwm nrhiav tau koj hom tshuaj hauv cov npe, nthuav mus rau phab Daim Ntawv Qhia Ntxiv txog Cov Tshuaj Uas Tau Txais Kev Duav Roos uas pib hauv phab INDEX-1. Cov npe raws cov niam ntawv muaj tag nrho cov npe tshuaj uas peb lub phiaj xwm duav roos.

- **NM** txhais tau tias hom tshuaj tsis muaj qhov yuav xa rau koj tau ua hli. Nov yog sau tseg cov kev nqis tes uas yuav tau ua, kev txwv, los sis cwj ciam kev siv koj tus quav tshuaj.
- **PA** yog sau los ntawm lo lus Kev Tso Cai Ua Ntej. Saib rau nqi lus nug B4.
- **PA-NS** sau los ntawm lo lus Kev Tso Cai Ua Ntej txog Kev Pib Tshiab. Nov txhais tau tias yog hom tshuaj no tseem tshiab rau koj, koj yuav tsum tau kev tso cai los ntawm peb ua ntej sau rau hauv koj daim ntawv yuav tshuaj. Yog koj twb tab tom noj cov tshuaj no thaum koj sau npe, koj yuav tsis tas nyob rau qhov cwj ntsuas no los sis thov kev pom zoo ua ntej.
- **B/D** sau los ntawm lo lus tias cov tshuaj uas saib xyuas los ntawm Medicare B los sis D. Cov tshuaj no tej zaum muaj cai tau txais kev them nyiaj raws li Medicare Part B los sis Part D. Koj (los sis koj tus kws kho mob) yuav tsum tau kev tso cai ua ntej los ntawm peb ua ntej seb hom tshuaj no puas saib xyuas raws Medicare Part D ua ntej yuav sau yam tshuaj no rau koj daim ntawv yuav tshuaj. Yog tsis tau kev tso cai ua ntej, peb yuav tsis them nyiaj rau cov tshuaj no.
- **QL** sau los ntawm lo lus Cov Kev Txwv Rau Qhov Ntau Tsawg. Saib rau nqi lus nug B4.
- **LA** sau los ntawm lo lus hom tshuaj uas Tsis Pub Siv Ntau. Cov tshuaj no tsuas muaj nyob qee lub khw muag tshuaj xwb. Yog xav paub ntau ntxiv sab laj rau koj Phau Ntawv Teev Tus Kws Muab Kev Pab Cuam thiab Khw Muag Tshuaj los sis hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, ncua sij hawm Lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday-Sunday, 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday-Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj, los sis mus saib wellcare.com/healthnetCA.
- **ST** sau los ntawm lo lus Kev Kho Mob Raws Kauj Ruam. Saib rau nqi lus nug B4.
- ^ sau txog hom Tshuaj tej zaum muaj txog 30 hnub xwb.

Lus Cim Tseg: Cov tshuaj yuav tau ntawm lub txee muag uas duav roos los ntawm Medi-Cal Rx tsis nyob rau “Part D cov tshuaj.” Cov tshuaj no muaj txoj cai txawv rau qhov kev thov rov txiav txim dua.

- Kev thov rov txiav txim dua yog ib t xo j yam seem kev seem cai thov peb rov soj ntsuam yam peeb txiav txim txog kev saib xyuas thiab kev hloov yog koj xav tias peb ua yuam kev lawm.
- Piv txwv, tej zaum peb txiav txim tias yam tshuaj koj siv tsis tau txais kev saib xyuas los sis yam tshuaj ntawd Medicare los sis Medi-Cal tsis saib xyuas mus tom ntej ntxiv lawm.
- Yog koj los sis koj tus kws kho mob tsis pom zoo peb qhov kev txiav txim, koj muaj peev xwm thov rov txiav txim dua. Yog koj ib txwm tsis muaj lus nug dua, hu rau Lub Chaw Pab Cuam Tus Tswv Cuab ntawm tus xov tooj nyob rau daim taw ntawv hauv qab no.
- Koj kuj tseem mus ndyeem tau Tshooj 9 ntawm Phau Ntawv Qhia Tswv Cuab kom paub tias yuav thov rov txiav txim dua tau li cas.

C1. Daim Ntawv Teev Tshuaj raws Xwm Txheej Kev Kho Mob

Cov tshuaj nyob rau tshooj no tau muab tso ua ib pawg raws xwm txheej kev kho mob uas lawv nyiam siv cov tshuaj los kho. Piv txwv li, yog tias koj mob plawv, koj yuav tau nrhiav hom mob xws li, CARDIOVASCULAR, HYPERTENSION / LIPIDS. Cheeb tsam ntawd uas tej zaum koj yuav nrhiav tau cov tshuaj uas los kho tus mob plawv.

Koj muaj peev xwm nrhiav tau cov txheej xwm tias tus yam ntxwv li cas cov niam ntawv ntawm cov nas no txhais li cas yog mus rau phab 12.

Thawj kem ntawm lub nas yog cov npe tshuaj. Cov tshuaj muaj muag toom tej khw yog sau ua tus niam ntawv me thiab qaij (piv txwv, *simvastatin*) thiab cov tshuaj uas muaj npe hom tshuaj yog sau tus niam ntawv loj (piv txwv, ELIQUIS).

Cov txheej xwm nyob rau hauv “Yuav tsum tau ua ib yam, muaj kev txwv, los sis muaj cwj ciamb siv” kem no qhia koj paub yog tias peb muaj kev cai saib xyuas ib hom tshuaj twg yuav qhia nyob rau kem no.



Yog tias koj muaj lus nug, thov hu rau Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-800-431-9007 los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm 1-833-236-2366, TTY 711, nyob rau ncua thaum lub Kaum Hlis Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav khoom hauv Hnub Monday–Hnub Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Hu dawb xwb. **Yog xav paub ntau ntxiv,** mus saib wellcare.com/healthnetCA.¹³

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COV KEV KHO MOB TXOG TXOJ HLAB ZAIS ZIS

COV KEV KHO MOB TXOG TXOJ HLAB ZAIS ZIS NTAU YAM

bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	\$0 (1)
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	\$0 (1) PA; LA
ELMIRON ORAL CAPSULE 100 MG	\$0 (1) PA
potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)	\$0 (1)

COV TSHUAJ TIV THAIV HLAB HLWB XA XOV / TSHUAJ TIV

THAIV TXO LEEG NQAIJ

darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg	\$0 (1) ST; QL (30 EA per 30 days)
fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg	\$0 (1) QL (30 EA per 30 days)
GEMTESA ORAL TABLET 75 MG	\$0 (1) QL (30 EA per 30 days)
MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON 8 MG/ML	\$0 (1) QL (300 ML per 28 days)
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	\$0 (1) QL (30 EA per 30 days)
oxybutynin chloride oral syrup 5 mg/5 ml	\$0 (1)
oxybutynin chloride oral tablet 5 mg	\$0 (1)
oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg	\$0 (1) QL (60 EA per 30 days)
oxybutynin chloride oral tablet extended release 24hr 5 mg	\$0 (1) QL (30 EA per 30 days)
solifenacin oral tablet 10 mg, 5 mg	\$0 (1) QL (30 EA per 30 days)
tolterodine oral capsule,extended release 24hr 2 mg, 4 mg	\$0 (1) ST; QL (30 EA per 30 days)
tolterodine oral tablet 1 mg, 2 mg	\$0 (1) QL (60 EA per 30 days)
trospium oral tablet 20 mg	\$0 (1) QL (60 EA per 30 days)

KEV KHO MOB UAS SIV KAB MOB QOG NOOB QES(BPH)

MOS

alfuzosin oral tablet extended release 24 hr 10 mg	\$0 (1) QL (30 EA per 30 days)
dutasteride oral capsule 0.5 mg	\$0 (1) QL (30 EA per 30 days)

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<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>finasteride oral tablet 5 mg</i>	\$0 (1)	
<i>silodosin oral capsule 4 mg, 8 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>tamsulosin oral capsule 0.4 mg</i>	\$0 (1)	
COV KHOOM SIV NTAU YAM		
COV KHOOM SIV NTAU YAM		
<i>ASSURE ID INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"</i>	\$0 (1)	
<i>GAUZE PAD TOPICAL BANDAGE 2 X 2 "</i>	\$0 (1)	
<i>INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.3 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1/2 ML 28 GAUGE</i>	\$0 (1)	BD Preferred
<i>OMNIPOD 5 G6 INTRO KIT (GEN 5) SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (1 EA per 365 days)
<i>OMNIPOD 5 G6 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD CLASSIC PDM KIT(GEN 3)</i>	\$0 (1)	PA; QL (1 EA per 365 days)
<i>OMNIPOD CLASSIC PODS (GEN 3) SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (1 EA per 365 days)
<i>OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD GO PODS 10 UNITS/DAY SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD GO PODS 15 UNITS/DAY SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD GO PODS 20 UNITS/DAY SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD GO PODS 25 UNITS/DAY SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)
<i>OMNIPOD GO PODS 30 UNITS/DAY SUBCUTANEOUS CARTRIDGE</i>	\$0 (1)	PA; QL (15 EA per 30 days)

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OMNIPOD GO PODS SUBCUTANEOUS CARTRIDGE	\$0 (1)	PA; QL (15 EA per 30 days)
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	\$0 (1)	BD Preferred
V-GO 30 DEVICE	\$0 (1)	PA; QL (30 EA per 30 days)
V-GO 40 DEVICE	\$0 (1)	PA; QL (30 EA per 30 days)

**COV TSHUAJ KHO NEEG / TSHUAJ CNS, KEV KHO MOB
NTSIG TXOG LEEG XA XOV HAU LUB HLWB / LUB CEV**

COV TSHUAJ KHO MOB PUAS HLWB

ABILITY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG, 400 MG	\$0 (1)	QL (1 EA per 28 days)
ABILITY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 300 MG, 400 MG	\$0 (1)	QL (1 EA per 28 days)
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	\$0 (1)	QL (150 EA per 30 days)
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	\$0 (1)	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>aripiprazole oral solution 1 mg/ml</i>	\$0 (1)	QL (900 ML per 30 days)
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>aripiprazole oral tablet,disintegrating 10 mg, 15 mg</i>	\$0 (1)	QL (60 EA per 30 days)
ARISTADA INITIO INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 675 MG/2.4 ML	\$0 (1)	
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML	\$0 (1)	QL (3.9 ML per 56 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML	\$0 (1)	QL (1.6 ML per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 662 MG/2.4 ML	\$0 (1)	QL (2.4 ML per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 882 MG/3.2 ML	\$0 (1)	QL (3.2 ML per 28 days)
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>armodafinil oral tablet 50 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)

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<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>atomoxetine oral capsule 10 mg, 18 mg, 25 mg, 40 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>atomoxetine oral capsule 100 mg, 60 mg, 80 mg</i>	\$0 (1)	QL (30 EA per 30 days)
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC 45-105 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days)
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	\$0 (1)	QL (30 EA per 30 days)
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	\$0 (1)	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>bupropion hcl oral tablet extended release 24 hr 300 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	\$0 (1)	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG	\$0 (1)	QL (30 EA per 30 days)
CAPLYTA ORAL CAPSULE 42 MG	\$0 (1)	QL (30 EA per 30 days); ^
<i>chlorpromazine injection solution 25 mg/ml</i>	\$0 (1)	
<i>chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml</i>	\$0 (1)	
<i>chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>citalopram oral solution 10 mg/5 ml</i>	\$0 (1)	
<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	\$0 (1)	
<i>clomipramine oral capsule 25 mg, 50 mg, 75 mg</i>	\$0 (1)	PA-NS
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	\$0 (1)	PA-NS; QL (180 EA per 30 days)
<i>clozapine oral tablet 100 mg</i>	\$0 (1)	QL (270 EA per 30 days)
<i>clozapine oral tablet 200 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>clozapine oral tablet 25 mg, 50 mg</i>	\$0 (1)	
<i>clozapine oral tablet,disintegrating 100 mg</i>	\$0 (1)	QL (270 EA per 30 days)
<i>clozapine oral tablet,disintegrating 12.5 mg, 25 mg</i>	\$0 (1)	
<i>clozapine oral tablet,disintegrating 150 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>clozapine oral tablet,disintegrating 200 mg</i>	\$0 (1)	QL (120 EA per 30 days)

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<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	\$0 (1)	
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>dexamphetamine oral tablet 10 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>dexamphetamine oral tablet 2.5 mg, 5 mg</i>	\$0 (1)	PA; QL (120 EA per 30 days)
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>dextroamphetamine-amphetamine oral tablet 20 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>diazepam injection solution 5 mg/ml</i>	\$0 (1)	PA-NS
<i>diazepam injection syringe 5 mg/ml</i>	\$0 (1)	PA-NS
<i>diazepam intensol oral concentrate 5 mg/ml</i>	\$0 (1)	PA-NS; QL (240 ML per 30 days)
<i>diazepam oral concentrate 5 mg/ml</i>	\$0 (1)	PA-NS; QL (240 ML per 30 days)
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml), 5 mg/5 ml (1 mg/ml, 5 ml)</i>	\$0 (1)	PA-NS; QL (1200 ML per 30 days)
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	\$0 (1)	PA-NS; QL (120 EA per 30 days)
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	\$0 (1)	
<i>doxepin oral concentrate 10 mg/ml</i>	\$0 (1)	
<i>doxepin oral tablet 3 mg, 6 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>DRIZALMA SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days)
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 40 mg, 60 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR</i>	\$0 (1)	QL (30 EA per 30 days); ^
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	\$0 (1)	
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	\$0 (1)	

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FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
FANAPT ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)-4MG(2)-6MG(2)	\$0 (1)	PA-NS
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	\$0 (1)	
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	\$0 (1)	QL (30 EA per 30 days)
<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	\$0 (1)	
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	\$0 (1)	
<i>fluphenazine decanoate injection solution 25 mg/ml</i>	\$0 (1)	
<i>fluphenazine hcl injection solution 2.5 mg/ml</i>	\$0 (1)	
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	\$0 (1)	
<i>fluphenazine hcl oral elixir 2.5 mg/5 ml</i>	\$0 (1)	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)	
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 4 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>guanfacine oral tablet extended release 24 hr 3 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 100 mg/ml (1 ml), 50 mg/ml, 50 mg/ml(1ml)</i>	\$0 (1)	
<i>haloperidol lactate injection solution 5 mg/ml</i>	\$0 (1)	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	\$0 (1)	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	\$0 (1)	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	\$0 (1)	
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML	\$0 (1)	QL (3.5 ML per 180 days)
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,560 MG/5 ML	\$0 (1)	QL (5 ML per 180 days)

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INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	\$0 (1)	QL (0.75 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	\$0 (1)	QL (1 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	\$0 (1)	QL (1.5 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	\$0 (1)	QL (0.25 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	\$0 (1)	QL (0.5 ML per 28 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML	\$0 (1)	QL (0.88 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.32 ML	\$0 (1)	QL (1.32 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML	\$0 (1)	QL (1.75 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.63 ML	\$0 (1)	QL (2.63 ML per 90 days)
<i>lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>lisdexamfetamine oral capsule 40 mg, 50 mg, 60 mg, 70 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>lisdexamfetamine oral tablet, chewable 10 mg, 20 mg, 30 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>lisdexamfetamine oral tablet, chewable 40 mg, 50 mg, 60 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	\$0 (1)	
<i>lithium carbonate oral tablet 300 mg</i>	\$0 (1)	
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	\$0 (1)	
<i>lithium citrate oral solution 8 meq/5 ml</i>	\$0 (1)	
<i>lorazepam injection solution 2 mg/ml, 4 mg/ml</i>	\$0 (1)	
<i>lorazepam injection syringe 2 mg/ml</i>	\$0 (1)	
<i>lorazepam intensol oral concentrate 2 mg/ml</i>	\$0 (1)	QL (150 ML per 30 days)

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<i>lorazepam oral concentrate 2 mg/ml</i>	\$0 (1)	QL (150 ML per 30 days)
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	\$0 (1)	QL (150 EA per 30 days)
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	\$0 (1)	
<i>lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg</i>	\$0 (1)	QL (30 EA per 30 days); ^
<i>lurasidone oral tablet 80 mg</i>	\$0 (1)	QL (60 EA per 30 days); ^
<i>MARPLAN ORAL TABLET 10 MG</i>	\$0 (1)	QL (180 EA per 30 days)
<i>methylphenidate hcl oral solution 10 mg/5 ml</i>	\$0 (1)	PA; QL (900 ML per 30 days)
<i>methylphenidate hcl oral solution 5 mg/5 ml</i>	\$0 (1)	PA; QL (1800 ML per 30 days)
<i>methylphenidate hcl oral tablet 10 mg, 5 mg</i>	\$0 (1)	PA; QL (180 EA per 30 days)
<i>methylphenidate hcl oral tablet 20 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet extended release 10 mg, 20 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet, chewable 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)	PA; QL (180 EA per 30 days)
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	\$0 (1)	
<i>mirtazapine oral tablet, disintegrating 15 mg, 30 mg, 45 mg</i>	\$0 (1)	
<i>modafinil oral tablet 100 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>modafinil oral tablet 200 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>molindone oral tablet 10 mg, 25 mg, 5 mg</i>	\$0 (1)	
<i>nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	\$0 (1)	
<i>nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	\$0 (1)	
<i>nortriptyline oral solution 10 mg/5 ml</i>	\$0 (1)	
<i>NUPLAZID ORAL CAPSULE 34 MG</i>	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
<i>NUPLAZID ORAL TABLET 10 MG</i>	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
<i>olanzapine intramuscular recon soln 10 mg</i>	\$0 (1)	QL (3 EA per 1 day)
<i>olanzapine oral tablet 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>olanzapine oral tablet 15 mg, 20 mg, 7.5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>olanzapine oral tablet, disintegrating 10 mg</i>	\$0 (1)	QL (60 EA per 30 days)

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<i>olanzapine oral tablet,disintegrating 15 mg, 20 mg, 5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>paliperidone oral tablet extended release 24hr 6 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>paroxetine hcl oral suspension 10 mg/5 ml</i>	\$0 (1)	QL (900 ML per 30 days)
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 40 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>paroxetine hcl oral tablet 30 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	\$0 (1)	
<i>PERSERIS SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 120 MG, 90 MG</i>	\$0 (1)	QL (1 EA per 30 days)
<i>phenelzine oral tablet 15 mg</i>	\$0 (1)	
<i>pimozide oral tablet 1 mg, 2 mg</i>	\$0 (1)	
<i>protriptyline oral tablet 10 mg, 5 mg</i>	\$0 (1)	
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	\$0 (1)	
<i>QUETIAPINE ORAL TABLET 150 MG</i>	\$0 (1)	
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days)
<i>quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days)
<i>REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</i>	\$0 (1)	QL (30 EA per 30 days); ^
<i>RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML</i>	\$0 (1)	QL (2 EA per 28 days)
<i>risperidone oral solution 1 mg/ml</i>	\$0 (1)	QL (240 ML per 30 days)
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	\$0 (1)	
<i>risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg</i>	\$0 (1)	QL (90 EA per 30 days)

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<i>risperidone oral tablet,disintegrating 1 mg, 2 mg, 3 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>risperidone oral tablet,disintegrating 4 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR</i>	\$0 (1)	QL (30 EA per 30 days)
<i>sertraline oral concentrate 20 mg/ml</i>	\$0 (1)	
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>SODIUM OXYBATE ORAL SOLUTION 500 MG/ML</i>	\$0 (1)	PA; LA; QL (540 ML per 30 days); ^
<i>temazepam oral capsule 15 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>temazepam oral capsule 30 mg, 7.5 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	\$0 (1)	
<i>tranylcypromine oral tablet 10 mg</i>	\$0 (1)	
<i>trazodone oral tablet 100 mg, 150 mg, 50 mg</i>	\$0 (1)	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	\$0 (1)	
<i>trimipramine oral capsule 100 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>trimipramine oral capsule 25 mg, 50 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG</i>	\$0 (1)	QL (30 EA per 30 days)
<i>venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg, 75 mg</i>	\$0 (1)	
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	\$0 (1)	
<i>VERSACLOZ ORAL SUSPENSION 50 MG/ML</i>	\$0 (1)	PA-NS; QL (600 ML per 30 days); ^
<i>vilazodone oral tablet 10 mg, 20 mg, 40 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG</i>	\$0 (1)	QL (30 EA per 30 days); ^
<i>VRAYLAR ORAL CAPSULE,DOSE PACK 1.5 MG (1)- 3 MG (6)</i>	\$0 (1)	
<i>VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>VYVANSE ORAL CAPSULE 40 MG, 50 MG, 60 MG, 70 MG</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>VYVANSE ORAL TABLET,CHEWABLE 10 MG, 20 MG, 30 MG</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>VYVANSE ORAL TABLET,CHEWABLE 40 MG, 50 MG, 60 MG</i>	\$0 (1)	PA; QL (30 EA per 30 days)

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<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)</i>	\$0 (1)	QL (6 EA per 3 days)
<i>zolpidem oral tablet 10 mg, 5 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG</i>	\$0 (1)	PA-NS; ^
<i>ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG</i>	\$0 (1)	PA-NS; QL (2 EA per 28 days)
<i>ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 300 MG</i>	\$0 (1)	PA-NS; QL (2.4 EA per 30 days); ^
<i>ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 405 MG</i>	\$0 (1)	PA-NS; QL (1.2 EA per 30 days); ^

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<i>APTIOM ORAL TABLET 200 MG, 400 MG</i>	\$0 (1)	QL (30 EA per 30 days)
<i>APTIOM ORAL TABLET 600 MG, 800 MG</i>	\$0 (1)	QL (60 EA per 30 days)
<i>BRIVIACT INTRAVENOUS SOLUTION 50 MG/5 ML</i>	\$0 (1)	PA-NS; QL (600 ML per 30 days)
<i>BRIVIACT ORAL SOLUTION 10 MG/ML</i>	\$0 (1)	PA-NS; QL (600 ML per 30 days); ^
<i>BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	\$0 (1)	
<i>carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml</i>	\$0 (1)	
<i>carbamazepine oral tablet 200 mg</i>	\$0 (1)	
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	\$0 (1)	
<i>carbamazepine oral tablet, chewable 100 mg</i>	\$0 (1)	
<i>clobazam oral suspension 2.5 mg/ml</i>	\$0 (1)	PA-NS; QL (480 ML per 30 days)
<i>clobazam oral tablet 10 mg, 20 mg</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days)
<i>clonazepam oral tablet 0.5 mg, 1 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>clonazepam oral tablet 2 mg</i>	\$0 (1)	QL (300 EA per 30 days)

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<i>clonazepam oral tablet,disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>clonazepam oral tablet,disintegrating 2 mg</i>	\$0 (1)	QL (300 EA per 30 days)
<i>DIACOMIT ORAL CAPSULE 250 MG</i>	\$0 (1)	PA-NS; LA; QL (360 EA per 30 days); ^
<i>DIACOMIT ORAL CAPSULE 500 MG</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>DIACOMIT ORAL POWDER IN PACKET 250 MG</i>	\$0 (1)	PA-NS; LA; QL (360 EA per 30 days); ^
<i>DIACOMIT ORAL POWDER IN PACKET 500 MG</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	\$0 (1)	
<i>DILANTIN EXTENDED ORAL CAPSULE 100 MG</i>	\$0 (1)	
<i>DILANTIN INFATABS ORAL TABLET,CHEWABLE 50 MG</i>	\$0 (1)	
<i>DILANTIN ORAL CAPSULE 30 MG</i>	\$0 (1)	
<i>DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML</i>	\$0 (1)	
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	\$0 (1)	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	\$0 (1)	
<i>divalproex oral tablet,delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	\$0 (1)	
<i>EPIDIOLEX ORAL SOLUTION 100 MG/ML</i>	\$0 (1)	PA-NS; LA; QL (600 ML per 30 days)
<i>epitol oral tablet 200 mg</i>	\$0 (1)	
<i>EPRONTIA ORAL SOLUTION 25 MG/ML</i>	\$0 (1)	PA-NS; QL (480 ML per 30 days)
<i>ethosuximide oral capsule 250 mg</i>	\$0 (1)	
<i>ethosuximide oral solution 250 mg/5 ml</i>	\$0 (1)	
<i>felbamate oral suspension 600 mg/5 ml</i>	\$0 (1)	^
<i>felbamate oral tablet 400 mg, 600 mg</i>	\$0 (1)	
<i>FINTEPLA ORAL SOLUTION 2.2 MG/ML</i>	\$0 (1)	PA-NS; LA; QL (360 ML per 30 days); ^
<i>FYCOMPA ORAL SUSPENSION 0.5 MG/ML</i>	\$0 (1)	PA-NS; QL (720 ML per 30 days); ^
<i>FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>FYCOMPA ORAL TABLET 2 MG</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days)

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<i>gabapentin oral capsule 100 mg, 400 mg</i>	\$0 (1)	QL (270 EA per 30 days)
<i>gabapentin oral capsule 300 mg</i>	\$0 (1)	QL (360 EA per 30 days)
<i>gabapentin oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml), 300 mg/6 ml (6 ml)</i>	\$0 (1)	QL (2160 ML per 30 days)
<i>gabapentin oral tablet 600 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>gabapentin oral tablet 800 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 300 MG</i>	\$0 (1)	PA; QL (180 EA per 30 days)
<i>GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 450 MG, 750 MG, 900 MG</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 600 MG</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>lacosamide intravenous solution 200 mg/20 ml</i>	\$0 (1)	QL (1200 ML per 30 days); ^
<i>lacosamide oral solution 10 mg/ml</i>	\$0 (1)	QL (1200 ML per 30 days)
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>lacosamide oral tablet 50 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	\$0 (1)	
<i>lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	\$0 (1)	
<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	\$0 (1)	
<i>lamotrigine oral tablet,disintegrating 100 mg, 200 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>levetiracetam in nacl (iso-os) intravenous piggyback 1,000 mg/100 ml, 1,500 mg/100 ml, 500 mg/100 ml</i>	\$0 (1)	
<i>levetiracetam intravenous solution 500 mg/5 ml</i>	\$0 (1)	
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	\$0 (1)	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	\$0 (1)	
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	\$0 (1)	
<i>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HR 165 MG, 82.5 MG</i>	\$0 (1)	PA; QL (90 EA per 30 days)

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LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HR 330 MG	\$0 (1)	PA; QL (60 EA per 30 days)
<i>methylsuximide oral capsule 300 mg</i>	\$0 (1)	
NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)	\$0 (1)	
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	\$0 (1)	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	\$0 (1)	
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	\$0 (1)	PA-NS
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	\$0 (1)	PA-NS
<i>phenobarbital sodium injection solution 130 mg/ml, 65 mg/ml</i>	\$0 (1)	PA-NS
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	\$0 (1)	
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	\$0 (1)	
<i>phenytoin oral tablet, chewable 50 mg</i>	\$0 (1)	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	\$0 (1)	
<i>phenytoin sodium intravenous solution 50 mg/ml</i>	\$0 (1)	
<i>pregabalin oral capsule 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>pregabalin oral capsule 200 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>pregabalin oral capsule 225 mg, 300 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>pregabalin oral solution 20 mg/ml</i>	\$0 (1)	QL (900 ML per 30 days)
PRIMIDONE ORAL TABLET 125 MG	\$0 (1)	
<i>primidone oral tablet 250 mg, 50 mg</i>	\$0 (1)	
<i>roweepra oral tablet 500 mg</i>	\$0 (1)	
<i>rufinamide oral suspension 40 mg/ml</i>	\$0 (1)	PA-NS; QL (2400 ML per 30 days); ^
<i>rufinamide oral tablet 200 mg</i>	\$0 (1)	PA-NS; QL (480 EA per 30 days)
<i>rufinamide oral tablet 400 mg</i>	\$0 (1)	PA-NS; QL (240 EA per 30 days); ^
SPRITAM ORAL TABLET FOR SUSPENSION 1,000 MG	\$0 (1)	QL (90 EA per 30 days)

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SPRITAM ORAL TABLET FOR SUSPENSION 250 MG	\$0 (1)	QL (360 EA per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 500 MG	\$0 (1)	QL (180 EA per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 750 MG	\$0 (1)	QL (120 EA per 30 days)
SYMPAZAN ORAL FILM 10 MG, 20 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
SYMPAZAN ORAL FILM 5 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days)
<i>tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	\$0 (1)	
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg</i>	\$0 (1)	
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	\$0 (1)	
<i>valproate sodium intravenous solution 500 mg/5 ml (100 mg/ml)</i>	\$0 (1)	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml), 500 mg/10 ml (10 ml)</i>	\$0 (1)	
<i>valproic acid oral capsule 250 mg</i>	\$0 (1)	
VALTOCO NASAL SPRAY, NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	\$0 (1)	
<i>vigabatrin oral powder in packet 500 mg</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>vigabatrin oral tablet 500 mg</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>vigadronate oral powder in packet 500 mg</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>vigadronate oral tablet 500 mg</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>vigpoder oral powder in packet 500 mg</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	\$0 (1)	QL (56 EA per 28 days); ^
XCOPRI ORAL TABLET 100 MG, 25 MG, 50 MG	\$0 (1)	QL (30 EA per 30 days); ^
XCOPRI ORAL TABLET 150 MG, 200 MG	\$0 (1)	QL (60 EA per 30 days); ^
XCOPRI TITRATION PACK ORAL TABLETS, DOSE PACK 12.5 MG (14)- 25 MG (14)	\$0 (1)	QL (28 EA per 28 days)
XCOPRI TITRATION PACK ORAL TABLETS, DOSE PACK 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14)	\$0 (1)	QL (28 EA per 28 days); ^

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ZONISADE ORAL SUSPENSION 100 MG/5 ML	\$0 (1)	PA-NS; QL (900 ML per 30 days)
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	\$0 (1)	
ZTALMY ORAL SUSPENSION 50 MG/ML	\$0 (1)	PA-NS; QL (1100 ML per 30 days); ^
COV TSHUAJ TIV THAIV TUS KAB MOB PARKINSON		
APOKYN SUBCUTANEOUS CARTRIDGE 10 MG/ML	\$0 (1)	PA; LA; QL (90 ML per 30 days); ^
<i>apomorphine subcutaneous cartridge 10 mg/ml</i>	\$0 (1)	PA; QL (90 ML per 30 days); ^
<i>benztropine injection solution 1 mg/ml</i>	\$0 (1)	
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	\$0 (1)	PA
<i>bromocriptine oral capsule 5 mg</i>	\$0 (1)	
<i>bromocriptine oral tablet 2.5 mg</i>	\$0 (1)	
<i>carbidopa oral tablet 25 mg</i>	\$0 (1)	
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	\$0 (1)	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	\$0 (1)	
<i>carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg</i>	\$0 (1)	
<i>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</i>	\$0 (1)	
<i>entacapone oral tablet 200 mg</i>	\$0 (1)	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	\$0 (1)	
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	\$0 (1)	
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg</i>	\$0 (1)	
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	\$0 (1)	

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ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg \$0 (1)

selegiline hcl oral capsule 5 mg \$0 (1)

selegiline hcl oral tablet 5 mg \$0 (1)

trihexyphenidyl oral tablet 2 mg, 5 mg \$0 (1) PA

COV TSHUAJ TXO LEEG / KEV KHO MOB TIV THAIV MOB**SIAB TSIS TUS**

baclofen oral tablet 10 mg, 20 mg \$0 (1)

cyclobenzaprine oral tablet 10 mg, 5 mg \$0 (1) PA

dantrolene oral capsule 100 mg, 25 mg, 50 mg \$0 (1)

pyridostigmine bromide oral tablet 60 mg \$0 (1)

tizanidine oral tablet 2 mg, 4 mg \$0 (1)

COV TSHUAJ TXO QIS MOB NARCOTIC

acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml \$0 (1) QL (2700 ML per 30 days)

acetaminophen-codeine oral tablet 300-15 mg \$0 (1) QL (400 EA per 30 days)

acetaminophen-codeine oral tablet 300-30 mg \$0 (1) QL (360 EA per 30 days)

acetaminophen-codeine oral tablet 300-60 mg \$0 (1) QL (180 EA per 30 days)

buprenorphine hcl sublingual tablet 2 mg, 8 mg \$0 (1) PA; QL (90 EA per 30 days)

endocet oral tablet 10-325 mg \$0 (1) QL (180 EA per 30 days)

endocet oral tablet 2.5-325 mg, 5-325 mg \$0 (1) QL (360 EA per 30 days)

endocet oral tablet 7.5-325 mg \$0 (1) QL (240 EA per 30 days)

fentanyl citrate buccal lozenge on a handle 1,200 mcg, 1,600 mcg, 400 mcg, 600 mcg, 800 mcg \$0 (1) PA; QL (120 EA per 30 days); ^

fentanyl citrate buccal lozenge on a handle 200 mcg \$0 (1) PA; QL (120 EA per 30 days)

fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr \$0 (1) PA; QL (10 EA per 30 days)

hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml \$0 (1) QL (2700 ML per 30 days)

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<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>hydrocodone-acetaminophen oral tablet 5-325 mg</i>	\$0 (1)	QL (240 EA per 30 days)
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>	\$0 (1)	QL (150 EA per 30 days)
<i>hydromorphone oral liquid 1 mg/ml</i>	\$0 (1)	QL (600 ML per 30 days)
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>HYSINGLA ER ORAL TABLET,ORAL ONLY,EXT.REL.24 HR 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG</i>	\$0 (1)	PA; QL (30 EA per 30 days)
<i>methadone intensol oral concentrate 10 mg/ml</i>	\$0 (1)	PA; QL (90 ML per 30 days)
<i>methadone oral concentrate 10 mg/ml</i>	\$0 (1)	PA; QL (90 ML per 30 days)
<i>methadone oral solution 10 mg/5 ml, 5 mg/5 ml</i>	\$0 (1)	PA; QL (450 ML per 30 days)
<i>methadone oral tablet 10 mg, 5 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>morphine (pf) intravenous patient control.analgesia soln 30 mg/30 ml (1 mg/ml)</i>	\$0 (1)	
<i>morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)</i>	\$0 (1)	QL (180 ML per 30 days)
<i>MORPHINE INJECTION SOLUTION 10 MG/ML, 2 MG/ML, 4 MG/ML, 5 MG/ML</i>	\$0 (1)	
<i>MORPHINE INJECTION SYRINGE 2 MG/ML</i>	\$0 (1)	
<i>morphine injection syringe 4 mg/ml</i>	\$0 (1)	
<i>morphine intravenous solution 10 mg/ml, 50 mg/ml</i>	\$0 (1)	
<i>MORPHINE INTRAVENOUS SOLUTION 4 MG/ML, 8 MG/ML</i>	\$0 (1)	
<i>morphine intravenous syringe 10 mg/ml, 2 mg/ml, 4 mg/ml</i>	\$0 (1)	
<i>MORPHINE INTRAVENOUS SYRINGE 8 MG/ML</i>	\$0 (1)	
<i>morphine oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)</i>	\$0 (1)	QL (900 ML per 30 days)
<i>morphine oral tablet 15 mg, 30 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>morphine sulfate 4 mg/ml vial inner, suv</i>	\$0 (1)	
<i>oxycodone oral capsule 5 mg</i>	\$0 (1)	QL (180 EA per 30 days)

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<i>oxycodone oral concentrate 20 mg/ml</i>	\$0 (1)	QL (180 ML per 30 days)
<i>oxycodone oral solution 5 mg/5 ml</i>	\$0 (1)	QL (900 ML per 30 days)
<i>oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet 10-325 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg</i>	\$0 (1)	QL (360 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet 7.5-325 mg</i>	\$0 (1)	QL (240 EA per 30 days)

COV TSHUAJ TXO QIS MOB UAS TSIS MUAJ TSHUAJ**NARCOTIC**

<i>buprenorphine-naloxone sublingual film 12-3 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>buprenorphine-naloxone sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>butorphanol injection solution 1 mg/ml, 2 mg/ml</i>	\$0 (1)	
<i>celecoxib oral capsule 100 mg, 200 mg, 50 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>celecoxib oral capsule 400 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>diclofenac potassium oral tablet 50 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>diclofenac sodium oral tablet extended release 24 hr 100 mg</i>	\$0 (1)	
<i>diclofenac sodium oral tablet, delayed release (dr/ec) 25 mg, 50 mg, 75 mg</i>	\$0 (1)	
<i>diclofenac sodium topical gel 1 %</i>	\$0 (1)	QL (1000 GM per 28 days)
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic 50-200 mg-mcg, 75-200 mg-mcg</i>	\$0 (1)	
<i>diflunisal oral tablet 500 mg</i>	\$0 (1)	
<i>ec-naproxen oral tablet, delayed release (dr/ec) 375 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>ec-naproxen oral tablet, delayed release (dr/ec) 500 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>etodolac oral capsule 200 mg, 300 mg</i>	\$0 (1)	
<i>etodolac oral tablet 400 mg, 500 mg</i>	\$0 (1)	

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<i>etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg</i>	\$0 (1)	
<i>flurbiprofen oral tablet 100 mg</i>	\$0 (1)	
<i>ibu oral tablet 600 mg, 800 mg</i>	\$0 (1)	
<i>ibuprofen oral suspension 100 mg/5 ml</i>	\$0 (1)	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	\$0 (1)	
<i>meloxicam oral tablet 15 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>meloxicam oral tablet 7.5 mg</i>	\$0 (1)	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	\$0 (1)	
<i>nalbuphine injection solution 10 mg/ml, 20 mg/ml</i>	\$0 (1)	
<i>naloxone injection solution 0.4 mg/ml</i>	\$0 (1)	
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	\$0 (1)	
<i>naloxone nasal spray,non-aerosol 4 mg/actuation</i>	\$0 (1)	
<i>naltrexone oral tablet 50 mg</i>	\$0 (1)	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	\$0 (1)	
<i>naproxen oral tablet,delayed release (dr/ec) 375 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>naproxen oral tablet,delayed release (dr/ec) 500 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	\$0 (1)	
<i>oxaprozin oral tablet 600 mg</i>	\$0 (1)	
<i>piroxicam oral capsule 10 mg, 20 mg</i>	\$0 (1)	
<i>sulindac oral tablet 150 mg, 200 mg</i>	\$0 (1)	
<i>tramadol oral tablet 50 mg</i>	\$0 (1)	QL (240 EA per 30 days)
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	\$0 (1)	QL (240 EA per 30 days)
<i>VIVITROL INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 380 MG</i>	\$0 (1)	
KEV KHO MOB HLAB HLWB NTAU YAM		
<i>AUSTEDO ORAL TABLET 12 MG, 9 MG</i>	\$0 (1)	PA; LA; QL (120 EA per 30 days); ^
<i>AUSTEDO ORAL TABLET 6 MG</i>	\$0 (1)	PA; LA; QL (60 EA per 30 days); ^

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AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG	\$0 (1)	PA; QL (120 EA per 30 days); ^
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 24 MG	\$0 (1)	PA; QL (60 EA per 30 days); ^
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 6 MG	\$0 (1)	PA; QL (90 EA per 30 days); ^
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 6 MG (14)-12 MG (14)-24 MG (14)	\$0 (1)	PA; QL (42 EA per 28 days); ^
<i>dalfampridine oral tablet extended release 12 hr 10 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>donepezil oral tablet 10 mg</i>	\$0 (1)	
<i>donepezil oral tablet 5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>donepezil oral tablet,disintegrating 10 mg</i>	\$0 (1)	
<i>donepezil oral tablet,disintegrating 5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>fingolimod oral capsule 0.5 mg</i>	\$0 (1)	PA-NS; QL (28 EA per 28 days); ^
<i>galantamine oral capsule,ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>galantamine oral solution 4 mg/ml</i>	\$0 (1)	
<i>galantamine oral tablet 12 mg, 4 mg, 8 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>glatiramer subcutaneous syringe 20 mg/ml</i>	\$0 (1)	PA-NS; QL (30 ML per 30 days); ^
<i>glatiramer subcutaneous syringe 40 mg/ml</i>	\$0 (1)	PA-NS; QL (12 ML per 28 days); ^
<i>glatopa subcutaneous syringe 20 mg/ml</i>	\$0 (1)	PA-NS; QL (30 ML per 30 days); ^
<i>glatopa subcutaneous syringe 40 mg/ml</i>	\$0 (1)	PA-NS; QL (12 ML per 28 days); ^
<i>memantine oral capsule,sprinkle,er 24hr 14 mg, 21 mg, 28 mg, 7 mg</i>	\$0 (1)	PA
<i>memantine oral solution 2 mg/ml</i>	\$0 (1)	PA
<i>memantine oral tablet 10 mg, 5 mg</i>	\$0 (1)	PA
NAMZARIC ORAL CAP,SPRINKLE,ER 24HR DOSE PACK 7/14/21/28 MG-10 MG	\$0 (1)	
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG	\$0 (1)	
NUEDEXTA ORAL CAPSULE 20-10 MG	\$0 (1)	PA; QL (60 EA per 30 days); ^

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OCREVUS INTRAVENOUS SOLUTION 30 MG/ML	\$0 (1)	PA-NS; QL (20 ML per 135 days); ^
RADICAVA ORS ORAL SUSPENSION 105 MG/5 ML	\$0 (1)	PA; ^
RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION 105 MG/5 ML	\$0 (1)	PA; ^
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour</i>	\$0 (1)	QL (30 EA per 30 days)
TECFIDERA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 120 MG	\$0 (1)	PA-NS; LA; QL (14 EA per 7 days); ^
TECFIDERA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 120 MG (14)- 240 MG (46)	\$0 (1)	PA-NS; LA; ^
TECFIDERA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 240 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
<i>teriflunomide oral tablet 14 mg, 7 mg</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>tetrabenazine oral tablet 12.5 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days); ^
<i>tetrabenazine oral tablet 25 mg</i>	\$0 (1)	PA; QL (120 EA per 30 days); ^
VUMERTY ORAL CAPSULE,DELAYED RELEASE(DR/EC) 231 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^

MOB TAUB HAU CUA / KEV KHO MOB TAUB HAU NTAU QHOV CHAW

AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	\$0 (1)	PA; QL (1 ML per 30 days)
<i>dihydroergotamine injection solution 1 mg/ml</i>	\$0 (1)	^
<i>dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	\$0 (1)	PA; QL (8 ML per 28 days)
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	\$0 (1)	PA; QL (2 ML per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	\$0 (1)	PA; QL (2 ML per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	\$0 (1)	PA; QL (3 ML per 30 days); ^
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	\$0 (1)	PA; QL (40 EA per 28 days)

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<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	\$0 (1)	QL (12 EA per 30 days)
<i>NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG</i>	\$0 (1)	PA; QL (16 EA per 30 days); ^
<i>rizatriptan oral tablet 10 mg, 5 mg</i>	\$0 (1)	QL (18 EA per 30 days)
<i>rizatriptan oral tablet,disintegrating 10 mg, 5 mg</i>	\$0 (1)	QL (18 EA per 30 days)
<i>sumatriptan nasal spray,non-aerosol 20 mg/actuation</i>	\$0 (1)	QL (12 EA per 30 days)
<i>sumatriptan nasal spray,non-aerosol 5 mg/actuation</i>	\$0 (1)	QL (24 EA per 30 days)
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (1)	QL (12 EA per 30 days)
<i>sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml</i>	\$0 (1)	QL (9 ML per 30 days)
<i>sumatriptan succinate subcutaneous cartridge 6 mg/0.5 ml</i>	\$0 (1)	QL (6 ML per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml</i>	\$0 (1)	QL (9 ML per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml</i>	\$0 (1)	QL (6 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	\$0 (1)	QL (6 ML per 30 days)
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	\$0 (1)	QL (12 EA per 30 days)
<i>zolmitriptan oral tablet,disintegrating 2.5 mg, 5 mg</i>	\$0 (1)	QL (12 EA per 30 days)

COV TSHUAJ KHO POB NTSEG, QHOV NTSWG / CAJ PAS**COV KEV NPAJ TSHUAJ KHO POB NTSEG NTAU YAM**

<i>acetic acid otic (ear) solution 2 %</i>	\$0 (1)	
<i>flac otic oil otic (ear) drops 0.01 %</i>	\$0 (1)	
<i>fluocinolone acetonide oil otic (ear) drops 0.01 %</i>	\$0 (1)	
<i>ofloxacin otic (ear) drops 0.3 %</i>	\$0 (1)	

COV TSHUAJ KHO MOB NTAU YAM

<i>azelastine nasal aerosol,spray 137 mcg (0.1 %)</i>	\$0 (1)	QL (60 ML per 30 days)
<i>azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)</i>	\$0 (1)	QL (60 ML per 30 days)
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	\$0 (1)	
<i>ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	\$0 (1)	

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<i>kourzeq dental paste 0.1 %</i>	\$0 (1)
<i>olopatadine nasal spray,non-aerosol 0.6 %</i>	\$0 (1)
<i>periogard mucous membrane mouthwash 0.12 %</i>	\$0 (1)
<i>triamcinolone acetonide dental paste 0.1 %</i>	\$0 (1)

OTIC TSHUAJ TXHAWB ZOG / TSHUAJ TUA KAB MOB

<i>CIPRO HC OTIC (EAR) DROPS,SUSPENSION 0.2-1 %</i>	\$0 (1)
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %</i>	\$0 (1) QL (7.5 ML per 7 days)
<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	\$0 (1)
<i>neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%</i>	\$0 (1)

**COV TSHUAJ QAB LOS, COV TSHUAJ SIV TSIM NTSHAV /
KUAB TSIM HLUAV TAWS XOB HAUVE LUB PLAWV****COV KHOOM NOJ KHOOM HAUS MUAJ THAJ ZOO NTAU
YAM**

<i>CLINIMIX 5%/D15W SULFITE FREE INTRAVENOUS PARENTERAL SOLUTION 5 %</i>	\$0 (1) B/D
<i>CLINIMIX 4.25%/D10W SULF FREE INTRAVENOUS PARENTERAL SOLUTION 4.25 %</i>	\$0 (1) B/D
<i>CLINIMIX 5%-D20W(SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 5 %</i>	\$0 (1) B/D
<i>CLINIMIX 6%-D5W (SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 6-5 %</i>	\$0 (1) B/D
<i>CLINIMIX 8%-D10W(SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 8-10 %</i>	\$0 (1) B/D
<i>CLINIMIX 8%-D14W(SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 8-14 %</i>	\$0 (1) B/D
<i>CLINOLIPID INTRAVENOUS EMULSION 20 %</i>	\$0 (1) B/D
<i>electrolyte-148 intravenous parenteral solution</i>	\$0 (1)
<i>electrolyte-48 in d5w intravenous parenteral solution</i>	\$0 (1)

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<i>electrolyte-a intravenous parenteral solution</i>	\$0 (1)	
<i>intralipid intravenous emulsion 20 %</i>	\$0 (1)	B/D
<i>INTRALIPID INTRAVENOUS EMULSION 30 %</i>	\$0 (1)	B/D
<i>ISOLYTE S PH 7.4 INTRAVENOUS PARENTERAL SOLUTION</i>	\$0 (1)	
<i>ISOLYTE-P IN 5 % DEXTROSE INTRAVENOUS PARENTERAL SOLUTION 5 %</i>	\$0 (1)	
<i>ISOLYTE-S INTRAVENOUS PARENTERAL SOLUTION</i>	\$0 (1)	
<i>NUTRILIPID INTRAVENOUS EMULSION 20 %</i>	\$0 (1)	B/D
<i>PLASMA-LYTE A INTRAVENOUS PARENTERAL SOLUTION</i>	\$0 (1)	
<i>PLENAMINE INTRAVENOUS PARENTERAL SOLUTION 15 %</i>	\$0 (1)	B/D
<i>premasol 10 % intravenous parenteral solution 10 %</i>	\$0 (1)	B/D
<i>PROSOL 20 % INTRAVENOUS PARENTERAL SOLUTION</i>	\$0 (1)	B/D
<i>travasol 10 % intravenous parenteral solution 10 %</i>	\$0 (1)	B/D
<i>TROPHAMINE 10 % INTRAVENOUS PARENTERAL SOLUTION 10 %</i>	\$0 (1)	B/D

COV TSHUAJ QAB LOS / COV TSHUAJ SIV TSIM NTSHAV

<i>fluoride (sodium) oral tablet 1 mg (2.2 mg sod. fluoride)</i>	\$0 (1)	
<i>fluoride (sodium) oral tablet, chewable 1 mg (2.2 mg sod. fluoride)</i>	\$0 (1)	
<i>prenatal vitamin plus low iron oral tablet 27 mg iron- 1 mg</i>	\$0 (1)	

KUAB TSIM HLUAV TAWS XOB HAUV LUB PLAUV

<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	\$0 (1)	QL (360 EA per 30 days)
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>	\$0 (1)	QL (360 EA per 30 days)
<i>klor-con 10 oral tablet extended release 10 meq</i>	\$0 (1)	
<i>klor-con 8 oral tablet extended release 8 meq</i>	\$0 (1)	
<i>klor-con m10 oral tablet,er particles/crystals 10 meq</i>	\$0 (1)	
<i>klor-con m15 oral tablet,er particles/crystals 15 meq</i>	\$0 (1)	
<i>klor-con m20 oral tablet,er particles/crystals 20 meq</i>	\$0 (1)	
<i>klor-con oral packet 20 meq</i>	\$0 (1)	

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<i>lactated ringers intravenous parenteral solution</i>	\$0 (1)
MAGNESIUM SULFATE IN D5W INTRAVENOUS PIGGYBACK 1 GRAM/100 ML	\$0 (1)
<i>magnesium sulfate in water intravenous parenteral solution 20 gram/500 ml (4 %), 40 gram/1,000 ml (4 %)</i>	\$0 (1)
<i>magnesium sulfate in water intravenous piggyback 2 gram/50 ml (4 %), 4 gram/100 ml (4 %), 4 gram/50 ml (8 %)</i>	\$0 (1)
<i>magnesium sulfate injection solution 500 mg/ml (50 %)</i>	\$0 (1)
<i>magnesium sulfate injection syringe 500 mg/ml (50 %)</i>	\$0 (1)
<i>potassium chlorid-d5-0.45%nacl intravenous parenteral solution 10 meq/l, 20 meq/l, 30 meq/l, 40 meq/l</i>	\$0 (1)
<i>potassium chloride in 0.9%nacl intravenous parenteral solution 20 meq/l, 40 meq/l</i>	\$0 (1)
<i>potassium chloride in 5 % dex intravenous parenteral solution 20 meq/l</i>	\$0 (1)
<i>potassium chloride in water intravenous piggyback 10 meq/50 ml, 20 meq/50 ml</i>	\$0 (1)
<i>potassium chloride intravenous solution 2 meq/ml, 2 meq/ml (20 ml)</i>	\$0 (1)
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	\$0 (1)
<i>potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	\$0 (1)
<i>potassium chloride oral packet 20 meq</i>	\$0 (1)
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	\$0 (1)
<i>potassium chloride oral tablet,er particles/crystals 10 meq, 15 meq, 20 meq</i>	\$0 (1)
<i>potassium chloride-0.45 % nacl intravenous parenteral solution 20 meq/l</i>	\$0 (1)
<i>potassium chloride-d5-0.2%nacl intravenous parenteral solution 20 meq/l</i>	\$0 (1)

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<i>potassium chloride-d5-0.9%nacl intravenous parenteral solution 20 meq/l, 40 meq/l</i>	\$0 (1)
<i>sodium chloride 0.45 % intravenous parenteral solution 0.45 %</i>	\$0 (1)
<i>sodium chloride 3 % hypertonic intravenous parenteral solution 3 %</i>	\$0 (1)
<i>sodium chloride 5 % hypertonic intravenous parenteral solution 5 %</i>	\$0 (1)
<i>sodium chloride intravenous solution 2.5 meq/ml, 4 meq/ml</i>	\$0 (1)
TPN ELECTROLYTES INTRAVENOUS SOLUTION 35-20-5 MEQ/20 ML	\$0 (1)

**KEV KAWM TXOG KEEB TIV THAIV KAB MOB HAU V LUB
CEV, COV TSHUAJ TIV THAIV KAB MOB / THEV NAUS LAUS
ZIS TXOG KAB MOB YAM MU AJ SIA**

**COV KOOB TSHUAJ TIV THAIV KAB MOB / COV KEV KUAJ
MOB NTSHIG TXOG QHOV KEV TIV THAIV TAUS KAB MOB
NTAU YAM**

<i>ABRYSVO INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML</i>	\$0 (1)	NM
<i>ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML</i>	\$0 (1)	NM
<i>ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML</i>	\$0 (1)	NM
<i>ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML</i>	\$0 (1)	NM
<i>AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML</i>	\$0 (1)	NM
<i>BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION 50 MG</i>	\$0 (1)	NM
<i>BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML</i>	\$0 (1)	NM
<i>BIVIGAM INTRAVENOUS SOLUTION 10 %</i>	\$0 (1)	PA; NM; LA; ^
<i>BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML</i>	\$0 (1)	NM

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BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	\$0 (1)	NM
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	\$0 (1)	NM
DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP4.5-6 CCID50/0.5 ML	\$0 (1)	NM
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	\$0 (1)	B/D; NM
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	\$0 (1)	B/D; NM
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	\$0 (1)	B/D; NM
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 %, 5 %	\$0 (1)	PA; NM; ^
GAMASTAN INTRAMUSCULAR SOLUTION 15-18 % RANGE	\$0 (1)	NM
GAMMAGARD LIQUID INJECTION SOLUTION 10 %	\$0 (1)	PA; NM; ^
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN 10 GRAM, 5 GRAM	\$0 (1)	PA; NM; ^
GAMMAKED INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	\$0 (1)	PA; NM; ^
GAMMAPLEX (WITH SORBITOL) INTRAVENOUS SOLUTION 5 %	\$0 (1)	PA; NM; LA; ^
GAMMAPLEX INTRAVENOUS SOLUTION 10 %, 10 % (100 ML), 10 % (200 ML)	\$0 (1)	PA; NM; LA; ^
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %)	\$0 (1)	PA; NM; ^
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	\$0 (1)	NM
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	\$0 (1)	NM
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	\$0 (1)	NM
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	\$0 (1)	B/D; NM

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HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	\$0 (1)	NM
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	\$0 (1)	B/D; NM
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	\$0 (1)	NM
IPOP INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	\$0 (1)	NM
IXCHIQ INTRAMUSCULAR RECON SOLN 1,000 TCID50/0.5 ML	\$0 (1)	NM
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	\$0 (1)	NM
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	\$0 (1)	NM
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	\$0 (1)	NM
MENACTRA (PF) INTRAMUSCULAR SOLUTION 4 MCG/0.5 ML	\$0 (1)	NM
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	\$0 (1)	NM
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	\$0 (1)	NM
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION 10-5 MCG/0.5 ML	\$0 (1)	NM
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	\$0 (1)	NM
OCTAGAM INTRAVENOUS SOLUTION 10 %, 5 %	\$0 (1)	PA; NM; ^
PANZYGA INTRAVENOUS SOLUTION 10 %, 10 % (100 ML), 10 % (200 ML), 10 % (25 ML), 10 % (300 ML), 10 % (50 ML)	\$0 (1)	PA; NM; ^
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	\$0 (1)	NM
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	\$0 (1)	NM
PENBRAYA (PF) INTRAMUSCULAR KIT 5-120 MCG/0.5 ML	\$0 (1)	NM

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PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU - 10 MCG/0.5ML	\$0 (1)	NM
PREHEVBARIO (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML	\$0 (1)	B/D; NM
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	\$0 (1)	NM
PRIVIGEN INTRAVENOUS SOLUTION 10 %	\$0 (1)	PA; NM; ^
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	\$0 (1)	NM
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML, 15 LF-48 MCG- 5 LF UNIT/0.5ML (58 UNT/ML)	\$0 (1)	NM
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	\$0 (1)	NM
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	\$0 (1)	B/D; NM
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	\$0 (1)	B/D; NM
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	\$0 (1)	B/D; NM
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	\$0 (1)	NM
ROTARIX ORAL SUSPENSION FOR RECONSTITUTION 10EXP6 CCID50/ML	\$0 (1)	NM
ROTATEQ VACCINE ORAL SOLUTION 2 ML	\$0 (1)	NM
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	\$0 (1)	A third dose may be considered in post-transplant members (PA required).; NM; QL (2 EA per 999 days)
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,000 UNIT/0.5 ML	\$0 (1)	NM
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF UNIT/0.5 ML	\$0 (1)	B/D; NM
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	\$0 (1)	B/D; NM

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TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	\$0 (1)	B/D; NM
TETANUS,DIPHTHERIA TOX PED(PF) INTRAMUSCULAR SUSPENSION 5-25 LF UNIT/0.5 ML	\$0 (1)	B/D; NM
TICOVAC INTRAMUSCULAR SYRINGE 1.2 MCG/0.25 ML, 2.4 MCG/0.5 ML	\$0 (1)	NM
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	\$0 (1)	NM
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT-20 MCG/ML	\$0 (1)	NM
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	\$0 (1)	NM
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	\$0 (1)	NM
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	\$0 (1)	NM
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	\$0 (1)	NM
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	\$0 (1)	NM
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML, 10 EXP4.74 UNIT/0.5 ML(2.5 ML IN 1 VIAL)	\$0 (1)	NM
COV TSHUAJ SIV RAU FAB THEV NAUS LAUS ZIS TXOG KAB MOB YAM MUAJ SIA		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	\$0 (1)	PA-NS; LA; ^
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	\$0 (1)	PA; LA; ^
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	\$0 (1)	PA-NS; LA; ^
BETASERON SUBCUTANEOUS KIT 0.3 MG	\$0 (1)	PA-NS; QL (14 EA per 28 days); ^
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	\$0 (1)	PA; ^
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	\$0 (1)	PA; ^

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PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	\$0 (1)	PA; QL (4 ML per 28 days); ^
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	\$0 (1)	PA; QL (2 ML per 28 days); ^
PROCERIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	\$0 (1)	PA
PROCERIT INJECTION SOLUTION 20,000 UNIT/ML, 40,000 UNIT/ML	\$0 (1)	PA; ^
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	\$0 (1)	PA; ^
ZIEXTENZO SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	\$0 (1)	PA; ^

**KEV KHO KAB MOB TAWV NQAIJ/KEV KHO IB QHOV
CHAW TSHWJ XEEB TWG**

COV KEV KHO MOB TXOG TAWV NQAIJ NTAU YAM

ammonium lactate topical cream 12 %	\$0 (1)	
ammonium lactate topical lotion 12 %	\$0 (1)	
dermacinrx lidocan topical adhesive patch,medicated 5 %	\$0 (1)	PA; QL (90 EA per 30 days)
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	\$0 (1)	PA; QL (4.56 ML per 28 days); ^
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	\$0 (1)	PA; QL (8 ML per 28 days); ^
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	\$0 (1)	PA; QL (1.34 ML per 28 days); ^
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	\$0 (1)	PA; QL (4.56 ML per 28 days); ^
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	\$0 (1)	PA; QL (8 ML per 28 days); ^
fluorouracil topical cream 5 %	\$0 (1)	QL (40 GM per 30 days)
fluorouracil topical solution 2 %, 5 %	\$0 (1)	QL (10 ML per 30 days)
glydo mucous membrane jelly in applicator 2 %	\$0 (1)	PA; QL (60 ML per 30 days)
imiquimod topical cream in packet 5 %	\$0 (1)	QL (24 EA per 30 days)
lidocaine (pf) injection solution 10 mg/ml (1 %), 15 mg/ml (1.5 %), 20 mg/ml (2 %), 40 mg/ml (4 %), 5 mg/ml (0.5 %)	\$0 (1)	B/D

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<i>lidocaine hcl injection solution 10 mg/ml (1 %), 20 mg/ml (2 %), 5 mg/ml (0.5 %)</i>	\$0 (1)	B/D
<i>lidocaine hcl laryngotracheal solution 4 %</i>	\$0 (1)	PA; QL (50 ML per 30 days)
<i>lidocaine hcl mucous membrane jelly 2 %</i>	\$0 (1)	PA; QL (30 ML per 30 days)
<i>lidocaine hcl mucous membrane solution 2 %</i>	\$0 (1)	
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	\$0 (1)	PA; QL (50 ML per 30 days)
<i>lidocaine topical adhesive patch,medicated 5 %</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>lidocaine topical ointment 5 %</i>	\$0 (1)	PA; QL (50 GM per 30 days)
<i>lidocaine viscous mucous membrane solution 2 %</i>	\$0 (1)	
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	\$0 (1)	PA; QL (30 GM per 30 days)
<i>lidocan iii topical adhesive patch,medicated 5 %</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>lidocan iv topical adhesive patch,medicated 5 %</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>lidocan v topical adhesive patch,medicated 5 %</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>PANRETIN TOPICAL GEL 0.1 %</i>	\$0 (1)	PA-NS; QL (60 GM per 30 days); ^
<i>podoftilox topical solution 0.5 %</i>	\$0 (1)	QL (7 ML per 28 days)
<i>REGRANEX TOPICAL GEL 0.01 %</i>	\$0 (1)	QL (15 GM per 30 days); ^
<i>SANTYL TOPICAL OINTMENT 250 UNIT/GRAM</i>	\$0 (1)	QL (180 GM per 30 days)
<i>silver sulfadiazine topical cream 1 %</i>	\$0 (1)	
<i>ssd topical cream 1 %</i>	\$0 (1)	
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	\$0 (1)	QL (100 GM per 30 days)
<i>VALCHLOR TOPICAL GEL 0.016 %</i>	\$0 (1)	PA-NS; LA; QL (60 GM per 30 days); ^
<i>ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP 2.5 %</i>	\$0 (1)	QL (7.5 GM per 28 days); ^

COV TSHUAJ CORTICOSTEROIDS SIV RAU QHOV CHAW**TSHWJ XEEB**

<i>ala-cort topical cream 1 %, 2.5 %</i>	\$0 (1)	
<i>alclometasone topical cream 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>alclometasone topical ointment 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>betamethasone dipropionate topical cream 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>betamethasone dipropionate topical lotion 0.05 %</i>	\$0 (1)	QL (120 ML per 30 days)

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<i>betamethasone dipropionate topical ointment 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>betamethasone valerate topical cream 0.1 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>betamethasone valerate topical lotion 0.1 %</i>	\$0 (1)	QL (120 ML per 30 days)
<i>betamethasone valerate topical ointment 0.1 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>betamethasone, augmented topical cream 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>betamethasone, augmented topical gel 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>betamethasone, augmented topical lotion 0.05 %</i>	\$0 (1)	QL (120 ML per 30 days)
<i>betamethasone, augmented topical ointment 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>clobetasol scalp solution 0.05 %</i>	\$0 (1)	QL (50 ML per 30 days)
<i>clobetasol topical cream 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>clobetasol topical gel 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>clobetasol topical ointment 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>clobetasol-emollient topical cream 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>fluocinolone and shower cap scalp oil 0.01 %</i>	\$0 (1)	QL (118.28 ML per 30 days)
<i>fluocinolone topical cream 0.01 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>fluocinolone topical cream 0.025 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>fluocinolone topical oil 0.01 %</i>	\$0 (1)	QL (118.28 ML per 30 days)
<i>fluocinolone topical ointment 0.025 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>fluocinolone topical solution 0.01 %</i>	\$0 (1)	QL (90 ML per 30 days)
<i>fluocinonide topical cream 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>fluocinonide topical gel 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>fluocinonide topical ointment 0.05 %</i>	\$0 (1)	QL (60 GM per 30 days)
<i>fluocinonide topical solution 0.05 %</i>	\$0 (1)	QL (60 ML per 30 days)
<i>fluocinonide-e topical cream 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>fluocinonide-emollient topical cream 0.05 %</i>	\$0 (1)	QL (120 GM per 30 days)
<i>fluticasone propionate topical cream 0.05 %</i>	\$0 (1)	
<i>halobetasol propionate topical cream 0.05 %</i>	\$0 (1)	QL (50 GM per 30 days)
<i>halobetasol propionate topical ointment 0.05 %</i>	\$0 (1)	QL (50 GM per 30 days)

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<i>hydrocortisone topical cream 1 %, 2.5 %</i>	\$0 (1)
<i>hydrocortisone topical lotion 2.5 %</i>	\$0 (1)
<i>hydrocortisone topical ointment 2.5 %</i>	\$0 (1)
<i>mometasone topical cream 0.1 %</i>	\$0 (1)
<i>mometasone topical ointment 0.1 %</i>	\$0 (1)
<i>mometasone topical solution 0.1 %</i>	\$0 (1)
<i>triamcinolone acetonide topical cream 0.025 %, 0.5 %</i>	\$0 (1)
<i>triamcinolone acetonide topical cream 0.1 %</i>	\$0 (1) QL (454 GM per 30 days)
<i>triamcinolone acetonide topical lotion 0.025 %, 0.1 %</i>	\$0 (1)
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	\$0 (1)

COV TSHUAJ KHO MOB SCABIES / COV TSHUAJ**PEDICULICIDES SIV KHO TUS MOB TSHWJ XEEB**

<i>malathion topical lotion 0.5 %</i>	\$0 (1)	QL (59 ML per 30 days)
<i>permethrin topical cream 5 %</i>	\$0 (1)	QL (60 GM per 30 days)

COV TSHUAJ TIV THAIV KAB MOB BACTERIA KHO RAU**HOM MOB TSHWJ XEEB**

<i>gentamicin topical cream 0.1 %</i>	\$0 (1)	QL (30 GM per 30 days)
<i>gentamicin topical ointment 0.1 %</i>	\$0 (1)	QL (30 GM per 30 days)
<i>mupirocin topical ointment 2 %</i>	\$0 (1)	QL (44 GM per 30 days)
<i>sulfacetamide sodium (acne) topical suspension 10 %</i>	\$0 (1)	QL (118 ML per 30 days)
<i>SULFAMYLYON TOPICAL CREAM 85 MG/G</i>	\$0 (1)	QL (453.6 GM per 30 days)

COV TSHUAJ TIV THAIV KAB POOV NCEB RAU IB QHOV**CHAW TSHWJ XEEB TWG**

<i>ciclopirox topical cream 0.77 %</i>	\$0 (1)	QL (90 GM per 30 days)
<i>ciclopirox topical suspension 0.77 %</i>	\$0 (1)	QL (60 ML per 30 days)
<i>clotrimazole topical cream 1 %</i>	\$0 (1)	QL (45 GM per 28 days)
<i>clotrimazole topical solution 1 %</i>	\$0 (1)	QL (30 ML per 28 days)
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	\$0 (1)	QL (45 GM per 30 days)

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<i>ketoconazole topical cream 2 %</i>	\$0 (1)	QL (60 GM per 28 days)
<i>ketoconazole topical shampoo 2 %</i>	\$0 (1)	QL (120 ML per 28 days)
<i>klayesta topical powder 100,000 unit/gram</i>	\$0 (1)	QL (60 GM per 30 days)
<i>nyamyc topical powder 100,000 unit/gram</i>	\$0 (1)	QL (60 GM per 30 days)
<i>nystatin topical cream 100,000 unit/gram</i>	\$0 (1)	QL (30 GM per 30 days)
<i>nystatin topical ointment 100,000 unit/gram</i>	\$0 (1)	QL (30 GM per 30 days)
<i>nystatin topical powder 100,000 unit/gram</i>	\$0 (1)	QL (60 GM per 30 days)
<i>nystop topical powder 100,000 unit/gram</i>	\$0 (1)	QL (60 GM per 30 days)

HOM TSHUAJ NOJ KHO MOB TAWV NQAIJ / TSHUAJ NOJ**KHO MOB ZAWV PLAB**

<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	\$0 (1)	PA
<i>calcipotriene scalp solution 0.005 %</i>	\$0 (1)	PA; QL (120 ML per 30 days)
<i>calcipotriene topical ointment 0.005 %</i>	\$0 (1)	PA; QL (120 GM per 30 days)
<i>ENSTILAR TOPICAL FOAM 0.005-0.064 %</i>	\$0 (1)	PA; QL (120 GM per 30 days)
<i>selenium sulfide topical lotion 2.5 %</i>	\$0 (1)	
<i>SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML</i>	\$0 (1)	PA; QL (6 ML per 365 days); ^
<i>SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML</i>	\$0 (1)	PA; QL (6 ML per 365 days); ^
<i>STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML</i>	\$0 (1)	PA; QL (0.5 ML per 28 days); ^
<i>STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML</i>	\$0 (1)	PA; QL (0.5 ML per 28 days); ^
<i>STELARA SUBCUTANEOUS SYRINGE 90 MG/ML</i>	\$0 (1)	PA; QL (1 ML per 28 days); ^
<i>TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML</i>	\$0 (1)	PA; QL (3 ML per 28 days); ^
<i>TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML</i>	\$0 (1)	PA; QL (3 ML per 28 days); ^
<i>TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML</i>	\$0 (1)	PA; LA; QL (3 ML per 28 days); ^
<i>TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML</i>	\$0 (1)	PA; LA; QL (3 ML per 28 days); ^
KEV KHO MOB POB KAB NTXAU		
<i>accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	\$0 (1)	

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<i>amnesteem oral capsule 10 mg, 20 mg, 40 mg</i>	\$0 (1)	
<i>azelaic acid topical gel 15 %</i>	\$0 (1)	QL (50 GM per 30 days)
<i>claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	\$0 (1)	
<i>clindamycin phosphate topical gel 1 %</i>	\$0 (1)	QL (75 GM per 30 days)
<i>clindamycin phosphate topical gel, once daily 1 %</i>	\$0 (1)	QL (75 GM per 30 days)
<i>clindamycin phosphate topical lotion 1 %</i>	\$0 (1)	QL (60 ML per 30 days)
<i>clindamycin phosphate topical solution 1 %</i>	\$0 (1)	QL (60 ML per 30 days)
<i>ery pads topical swab 2 %</i>	\$0 (1)	QL (60 EA per 30 days)
<i>erythromycin with ethanol topical solution 2 %</i>	\$0 (1)	QL (60 ML per 30 days)
<i>FINACEA TOPICAL FOAM 15 %</i>	\$0 (1)	QL (50 GM per 30 days)
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	\$0 (1)	
<i>metronidazole topical cream 0.75 %</i>	\$0 (1)	QL (45 GM per 30 days)
<i>metronidazole topical gel 0.75 %</i>	\$0 (1)	QL (45 GM per 30 days)
<i>metronidazole topical lotion 0.75 %</i>	\$0 (1)	QL (59 ML per 30 days)
<i>myorisan oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	\$0 (1)	
<i>NORITATE TOPICAL CREAM 1 %</i>	\$0 (1)	QL (60 GM per 30 days); ^
<i>tazarotene topical cream 0.1 %</i>	\$0 (1)	PA; QL (60 GM per 30 days)
<i>tazarotene topical gel 0.05 %, 0.1 %</i>	\$0 (1)	PA
<i>TAZORAC TOPICAL CREAM 0.05 %</i>	\$0 (1)	PA; QL (60 GM per 30 days)
<i>tretinoin topical cream 0.025 %, 0.05 %, 0.1 %</i>	\$0 (1)	PA; QL (45 GM per 30 days)
<i>tretinoin topical gel 0.01 %, 0.025 %</i>	\$0 (1)	PA; QL (45 GM per 30 days)
<i>zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	\$0 (1)	

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THIAB THAUM YUG ME NYUAM / KEV KHO TXOG COV

TEEB MEEM NTAWM POJ NIAM CEV

COV TSHUAJ NOJ KOM TXHOB MUAJ ME NYUAM / COV

TSHUAJ MUAJ FEEM CUAM TSHUAM LI NTAWD

<i>altavera (28) oral tablet 0.15-0.03 mg</i>	\$0 (1)
<i>alyacen 1/35 (28) oral tablet 1-35 mg-mcg</i>	\$0 (1)

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<i>alyacen</i> 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	\$0 (1)
<i>apri</i> oral tablet 0.15-0.03 mg	\$0 (1)
<i>aranelle</i> (28) oral tablet 0.5/1/0.5-35 mg-mcg	\$0 (1)
<i>aubra eq</i> oral tablet 0.1-20 mg-mcg	\$0 (1)
<i>aurovela fe</i> 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	\$0 (1)
<i>aurovela fe</i> 1-20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	\$0 (1)
<i>aviane</i> oral tablet 0.1-20 mg-mcg	\$0 (1)
<i>azurette</i> (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	\$0 (1)
<i>blisovi fe</i> 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	\$0 (1)
<i>blisovi fe</i> 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	\$0 (1)
<i>camrese</i> oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	\$0 (1)
<i>cryselle</i> (28) oral tablet 0.3-30 mg-mcg	\$0 (1)
<i>cyred eq</i> oral tablet 0.15-0.03 mg	\$0 (1)
<i>dasetta</i> 1/35 (28) oral tablet 1-35 mg-mcg	\$0 (1)
<i>dasetta</i> 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	\$0 (1)
<i>daysee</i> oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	\$0 (1)
<i>desog-e.estradiol/e.estradiol</i> oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	\$0 (1)
<i>desogestrel-ethinyl estradiol</i> oral tablet 0.15-0.03 mg	\$0 (1)
<i>drospirenone-ethinyl estradiol</i> oral tablet 3-0.02 mg, 3-0.03 mg	\$0 (1)
<i>elinest</i> oral tablet 0.3-30 mg-mcg	\$0 (1)
<i>emoquette</i> oral tablet 0.15-0.03 mg	\$0 (1)
<i>enpresse</i> oral tablet 50-30 (6)/75-40 (5)/125-30(10)	\$0 (1)
<i>enskyce</i> oral tablet 0.15-0.03 mg	\$0 (1)

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<i>estarrylla</i> oral tablet 0.25-35 mg-mcg	\$0 (1)
<i>ethynodiol diac-eth estradiol</i> oral tablet 1-35 mg-mcg, 1-50 mg-mcg	\$0 (1)
<i>falmina</i> (28) oral tablet 0.1-20 mg-mcg	\$0 (1)
<i>introvale</i> oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	\$0 (1)
<i>isibloom</i> oral tablet 0.15-0.03 mg	\$0 (1)
<i>jasmiel</i> (28) oral tablet 3-0.02 mg	\$0 (1)
<i>jolessa</i> oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	\$0 (1)
<i>juleber</i> oral tablet 0.15-0.03 mg	\$0 (1)
<i>junel fe</i> 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	\$0 (1)
<i>junel fe</i> 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	\$0 (1)
<i>kariva</i> (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	\$0 (1)
<i>kelnor</i> 1/35 (28) oral tablet 1-35 mg-mcg	\$0 (1)
<i>kelnor</i> 1-50 (28) oral tablet 1-50 mg-mcg	\$0 (1)
<i>kurvelo</i> (28) oral tablet 0.15-0.03 mg	\$0 (1)
<i>Inorgest/e.estradiol-e.estrad</i> oral tablets, dose pack, 3 month 0.1 mg-20 mcg (84)/10 mcg (7), 0.15 mg-20 mcg/0.15 mg-25 mcg, 0.15 mg-30 mcg (84)/10 mcg (7)	\$0 (1)
<i>larin</i> 1.5/30 (21) oral tablet 1.5-30 mg-mcg	\$0 (1)
<i>larin</i> 1/20 (21) oral tablet 1-20 mg-mcg	\$0 (1)
<i>larin 24 fe</i> oral tablet 1 mg-20 mcg (24)/75 mg (4)	\$0 (1)
<i>larin fe</i> 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	\$0 (1)
<i>larin fe</i> 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	\$0 (1)
<i>lessina</i> oral tablet 0.1-20 mg-mcg	\$0 (1)
<i>levonest</i> (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	\$0 (1)
<i>levonorgestrel-ethinyl estrad</i> oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg	\$0 (1)

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levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	\$0 (1)
levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)	\$0 (1)
levora-28 oral tablet 0.15-0.03 mg	\$0 (1)
loryna (28) oral tablet 3-0.02 mg	\$0 (1)
low-ogestrel (28) oral tablet 0.3-30 mg-mcg	\$0 (1)
lutera (28) oral tablet 0.1-20 mg-mcg	\$0 (1)
marlissa (28) oral tablet 0.15-0.03 mg	\$0 (1)
microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	\$0 (1)
microgestin 1/20 (21) oral tablet 1-20 mg-mcg	\$0 (1)
microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	\$0 (1)
microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	\$0 (1)
mili oral tablet 0.25-35 mg-mcg	\$0 (1)
mono-linyah oral tablet 0.25-35 mg-mcg	\$0 (1)
nikki (28) oral tablet 3-0.02 mg	\$0 (1)
norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	\$0 (1)
norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)	\$0 (1)
norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg	\$0 (1)
nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg	\$0 (1)
nortrel 1/35 (21) oral tablet 1-35 mg-mcg (21)	\$0 (1)
nortrel 1/35 (28) oral tablet 1-35 mg-mcg	\$0 (1)
nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	\$0 (1)
philith oral tablet 0.4-35 mg-mcg	\$0 (1)

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pimtrea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	\$0 (1)
pirmella oral tablet 1-35 mg-mcg	\$0 (1)
portia 28 oral tablet 0.15-0.03 mg	\$0 (1)
reclipsen (28) oral tablet 0.15-0.03 mg	\$0 (1)
setlakin oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	\$0 (1)
sprintec (28) oral tablet 0.25-35 mg-mcg	\$0 (1)
sronyx oral tablet 0.1-20 mg-mcg	\$0 (1)
syeda oral tablet 3-0.03 mg	\$0 (1)
tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	\$0 (1)
tarina fe 1-20 eq (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	\$0 (1)
tilia fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	\$0 (1)
tri-estarrylla oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	\$0 (1)
tri-legest fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	\$0 (1)
tri-linyah oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	\$0 (1)
tri-lo-estarrylla oral tablet 0.18/0.215/0.25 mg-25 mcg	\$0 (1)
tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg	\$0 (1)
tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg	\$0 (1)
tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg	\$0 (1)
tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	\$0 (1)
trivora (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	\$0 (1)
turqoz (28) oral tablet 0.3-30 mg-mcg	\$0 (1)
velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg	\$0 (1)
vestura (28) oral tablet 3-0.02 mg	\$0 (1)
vienva oral tablet 0.1-20 mg-mcg	\$0 (1)
violele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	\$0 (1)
wera (28) oral tablet 0.5-35 mg-mcg	\$0 (1)

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zovia 1-35 (28) oral tablet 1-35 mg-mcg	\$0 (1)
zumandimine (28) oral tablet 3-0.03 mg	\$0 (1)

**KEV KHO POJ NIAM THAUM LUB CEV XEEB TUB THIAB
THAUM YUG ME NYUAM/KEV KHO TXOG COV TEEB MEEM
NTAWM POJ NIAM LUB CEV NTAU YAM**

clindamycin phosphate vaginal cream 2 %	\$0 (1)
eluryng vaginal ring 0.12-0.015 mg/24 hr	\$0 (1)
etonogestrel-ethynodiol vaginal ring 0.12-0.015 mg/24 hr	\$0 (1)
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	\$0 (1)
NEXPLANON SUBDERMAL IMPLANT 68 MG	\$0 (1)
terconazole vaginal cream 0.4 %, 0.8 %	\$0 (1)
terconazole vaginal suppository 80 mg	\$0 (1)
tranexamic acid oral tablet 650 mg	\$0 (1)
xulane transdermal patch weekly 150-35 mcg/24 hr	\$0 (1)
zafemy transdermal patch weekly 150-35 mcg/24 hr	\$0 (1)

ROJ NTSHA POJ NIAM / COV KUAB TSHUAJ TXHAWB ZOG

amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg	\$0 (1)
camila oral tablet 0.35 mg	\$0 (1)
deblitane oral tablet 0.35 mg	\$0 (1)
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	\$0 (1)
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	\$0 (1)
dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	\$0 (1)
errin oral tablet 0.35 mg	\$0 (1)
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	\$0 (1)
estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	\$0 (1)

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estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr

\$0 (1)

estradiol vaginal cream 0.01 % (0.1 mg/gram)

\$0 (1)

estradiol vaginal tablet 10 mcg

\$0 (1)

estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml

\$0 (1)

estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg

\$0 (1)

fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg

\$0 (1)

heather oral tablet 0.35 mg

\$0 (1)

IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG

\$0 (1)

IMVEXXY STARTER PACK VAGINAL INSERT, DOSE PACK 10 MCG, 4 MCG

\$0 (1)

incassia oral tablet 0.35 mg

\$0 (1)

jinteli oral tablet 1-5 mg-mcg

\$0 (1)

lyleq oral tablet 0.35 mg

\$0 (1)

lyllana transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr

\$0 (1)

lyza oral tablet 0.35 mg

\$0 (1)

medroxyprogesterone intramuscular suspension 150 mg/ml

\$0 (1)

medroxyprogesterone intramuscular syringe 150 mg/ml

\$0 (1)

medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg

\$0 (1)

mimvey oral tablet 1-0.5 mg

\$0 (1)

nora-be oral tablet 0.35 mg

\$0 (1)

norethindrone (contraceptive) oral tablet 0.35 mg

\$0 (1)

norethindrone acetate oral tablet 5 mg

\$0 (1)

norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg

\$0 (1)

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<i>norlyda oral tablet 0.35 mg</i>	\$0 (1)
<i>PREMARIN VAGINAL CREAM 0.625 MG/GRAM</i>	\$0 (1)
<i>progesterone intramuscular oil 50 mg/ml</i>	\$0 (1)
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	\$0 (1)
<i>sharobel oral tablet 0.35 mg</i>	\$0 (1)
<i>yuvafem vaginal tablet 10 mcg</i>	\$0 (1)

KEV KHO QHOV MUAG**COV KEV KHO MOB TXOG QHOV MUAG NTAU YAM**

<i>atropine ophthalmic (eye) drops 1 %</i>	\$0 (1)
<i>ATROPINE SULFATE (PF) OPHTHALMIC (EYE) DROPPERETTE 1 %</i>	\$0 (1)
<i>azelastine ophthalmic (eye) drops 0.05 %</i>	\$0 (1)
<i>cromolyn ophthalmic (eye) drops 4 %</i>	\$0 (1)
<i>CYSTADROPS OPHTHALMIC (EYE) DROPS 0.37 %</i>	\$0 (1) PA; LA; ^
<i>CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %</i>	\$0 (1) PA; LA; ^
<i>olopatadine ophthalmic (eye) drops 0.1 %</i>	\$0 (1)
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	\$0 (1)
<i>RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %</i>	\$0 (1) QL (5.5 ML per 30 days)
<i>RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 %</i>	\$0 (1) QL (60 EA per 30 days)
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	\$0 (1)
<i>sulfacetamide sodium ophthalmic (eye) ointment 10 %</i>	\$0 (1)
<i>sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	\$0 (1)

<i>TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL 0.03 MG/SPRAY</i>	\$0 (1)
<i>XDEMVY OPHTHALMIC (EYE) DROPS 0.25 %</i>	\$0 (1) PA; QL (10 ML per 42 days); ^
<i>ZERVIATE OPHTHALMIC (EYE) DROPPERETTE 0.24 %</i>	\$0 (1)

COV TSHUAJ NOJ SIV RAU TUS MOB NTSIAB MUAG

<i>acetazolamide oral capsule, extended release 500 mg</i>	\$0 (1)
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<i>acetazolamide oral tablet 125 mg, 250 mg</i>	\$0 (1)
<i>methazolamide oral tablet 25 mg, 50 mg</i>	\$0 (1)

COV TSHUAJ TIV THAIV KAB MOB VAIS LAV

<i>trifluridine ophthalmic (eye) drops 1 %</i>	\$0 (1)
<i>ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %</i>	\$0 (1)

COV TSHUAJ TIV THAIV KOM TXHOB MOB O UAS TSIS**MUAJ TSHUAJ TXHAWB ZOG**

<i>bromfenac ophthalmic (eye) drops 0.09 %</i>	\$0 (1)
<i>BROMSITE OPHTHALMIC (EYE) DROPS 0.075 %</i>	\$0 (1)
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	\$0 (1)
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	\$0 (1)
<i>ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3 %</i>	\$0 (1)
<i>ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %</i>	\$0 (1)
<i>PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %</i>	\$0 (1)

COV TSHUAJ TSUAG KOM TXHOB TXHAWS NTSWG

<i>ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %</i>	\$0 (1)
<i>apraclonidine ophthalmic (eye) drops 0.5 %</i>	\$0 (1)
<i>brimonidine ophthalmic (eye) drops 0.15 %, 0.2 %</i>	\$0 (1)

COV TSHUAJ TUA KAB MOB

<i>ak-poly-bac ophthalmic (eye) ointment 500-10,000 unit/gram</i>	\$0 (1)
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	\$0 (1)
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	\$0 (1)
<i>BESIVANCE OPHTHALMIC (EYE) DROPS,SUSPENSION 0.6 %</i>	\$0 (1)
<i>CILOXAN OPHTHALMIC (EYE) OINTMENT 0.3 %</i>	\$0 (1)
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	\$0 (1)
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	\$0 (1)
<i>gatifloxacin ophthalmic (eye) drops 0.5 %</i>	\$0 (1)

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<i>gentak ophthalmic (eye) ointment 0.3 % (3 mg/gram)</i>	\$0 (1)
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	\$0 (1)
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	\$0 (1)
<i>moxifloxacin ophthalmic (eye) drops, viscous 0.5 %</i>	\$0 (1)
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	\$0 (1)
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	\$0 (1)
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml</i>	\$0 (1)
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	\$0 (1)
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	\$0 (1)
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	\$0 (1)

COV TSHUAJ TXHAWB ZOG

<i>ALREX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.2 %</i>	\$0 (1)
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	\$0 (1)
<i>difluprednate ophthalmic (eye) drops 0.05 %</i>	\$0 (1)
<i>FLAREX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %</i>	\$0 (1)
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i>	\$0 (1)
<i>LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %</i>	\$0 (1)
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	\$0 (1)
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	\$0 (1)

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<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	\$0 (1)
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	\$0 (1)

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<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	\$0 (1)
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	\$0 (1)
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	\$0 (1)
TOBRADEX ST OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3-0.05 %	\$0 (1)
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	\$0 (1)
ZYLET OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3-0.5 %	\$0 (1)
LWM COV TSHUAJ KHO KAB MOB QHOV MUAG DIG	
<i>brinzolamide ophthalmic (eye) drops,suspension 1 %</i>	\$0 (1)
COMBIGAN OPHTHALMIC (EYE) DROPS 0.2-0.5 %	\$0 (1)
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	\$0 (1)
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	\$0 (1)
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	\$0 (1)
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	\$0 (1)
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	\$0 (1)
ROCKLATAN OPHTHALMIC (EYE) DROPS 0.02-0.005 %	\$0 (1)
<i>travoprost ophthalmic (eye) drops 0.004 %</i>	\$0 (1)
TSHUAJ BETA-BLOCKERS	
<i>betaxolol ophthalmic (eye) drops 0.5 %</i>	\$0 (1)
<i>carteolol ophthalmic (eye) drops 1 %</i>	\$0 (1)
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	\$0 (1)
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	\$0 (1)
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	\$0 (1)

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KEV KUAJ XYUAS MOB / COV SHUAJ SIV NTAU YAM***COV TSHUAJ KHO MOB NTAU YAM***

<i>acamprosate oral tablet, delayed release (dr/ec) 333 mg</i>	\$0 (1)	
<i>acetic acid irrigation solution 0.25 %</i>	\$0 (1)	
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	\$0 (1)	
ARALAST NP INTRAVENOUS RECON SOLN 1,000 MG, 500 MG	\$0 (1)	PA; LA; ^
<i>carglumic acid oral tablet, dispersible 200 mg</i>	\$0 (1)	PA; LA; ^
<i>cevimeline oral capsule 30 mg</i>	\$0 (1)	
CHEMET ORAL CAPSULE 100 MG	\$0 (1)	
CLINIMIX 4.25%/D5W SULFIT FREE INTRAVENOUS PARENTERAL SOLUTION 4.25 %	\$0 (1)	B/D
<i>d10 %-0.45 % sodium chloride intravenous parenteral solution</i>	\$0 (1)	
<i>d2.5 %-0.45 % sodium chloride intravenous parenteral solution</i>	\$0 (1)	
<i>d5 % and 0.9 % sodium chloride intravenous parenteral solution</i>	\$0 (1)	
<i>d5 %-0.45 % sodium chloride intravenous parenteral solution</i>	\$0 (1)	
<i>deferasirox oral granules in packet 180 mg, 360 mg, 90 mg</i>	\$0 (1)	PA; ^
<i>deferasirox oral tablet 180 mg, 360 mg</i>	\$0 (1)	PA; ^
<i>deferasirox oral tablet 90 mg</i>	\$0 (1)	PA
<i>deferasirox oral tablet, dispersible 125 mg</i>	\$0 (1)	PA
<i>deferasirox oral tablet, dispersible 250 mg, 500 mg</i>	\$0 (1)	PA; ^
<i>dextrose 10 % and 0.2 % nacl intravenous parenteral solution</i>	\$0 (1)	
<i>dextrose 10 % in water (d10w) intravenous parenteral solution 10 %</i>	\$0 (1)	

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<i>dextrose 5 % in water (d5w) intravenous parenteral solution</i>	\$0 (1)	
<i>dextrose 5 % in water (d5w) intravenous piggyback 5 %</i>	\$0 (1)	
<i>dextrose 5 %-lactated ringers intravenous parenteral solution</i>	\$0 (1)	
<i>dextrose 5%-0.2 % sod chloride intravenous parenteral solution</i>	\$0 (1)	
<i>dextrose 5%-0.3 % sod.chloride intravenous parenteral solution</i>	\$0 (1)	
<i>dextrose 50 % in water (d50w) intravenous parenteral solution</i>	\$0 (1)	B/D
<i>dextrose 50 % in water (d50w) intravenous syringe</i>	\$0 (1)	B/D
<i>dextrose 70 % in water (d70w) intravenous parenteral solution</i>	\$0 (1)	B/D
<i>disulfiram oral tablet 250 mg, 500 mg</i>	\$0 (1)	
<i>droxidopa oral capsule 100 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>droxidopa oral capsule 200 mg, 300 mg</i>	\$0 (1)	PA; QL (180 EA per 30 days)
<i>ENDARI ORAL POWDER IN PACKET 5 GRAM</i>	\$0 (1)	PA; LA; ^
<i>INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML</i>	\$0 (1)	PA; LA; ^
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	\$0 (1)	B/D
<i>levocarnitine oral solution 100 mg/ml</i>	\$0 (1)	
<i>levocarnitine oral tablet 330 mg</i>	\$0 (1)	B/D
<i>LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM</i>	\$0 (1)	
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)	
<i>nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg</i>	\$0 (1)	PA; ^
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	\$0 (1)	
<i>PROLASTIN-C INTRAVENOUS RECON SOLN 1,000 MG</i>	\$0 (1)	PA; LA; ^
<i>PROLASTIN-C INTRAVENOUS SOLUTION 1,000 MG (+/-)/20 ML</i>	\$0 (1)	PA; LA; ^
<i>riluzole oral tablet 50 mg</i>	\$0 (1)	

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<i>risedronate oral tablet 30 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>sevelamer carbonate oral powder in packet 0.8 gram</i>	\$0 (1)	QL (540 EA per 30 days)
<i>sevelamer carbonate oral powder in packet 2.4 gram</i>	\$0 (1)	QL (180 EA per 30 days)
<i>sevelamer carbonate oral tablet 800 mg</i>	\$0 (1)	QL (540 EA per 30 days)
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	\$0 (1)	
<i>sodium chloride 0.9 % intravenous piggyback</i>	\$0 (1)	
<i>sodium chloride irrigation solution 0.9 %</i>	\$0 (1)	
<i>sodium phenylbutyrate oral powder 0.94 gram/gram</i>	\$0 (1)	PA; ^
<i>sodium phenylbutyrate oral tablet 500 mg</i>	\$0 (1)	PA; ^
<i>sodium polystyrene sulfonate oral powder</i>	\$0 (1)	
<i>sps (with sorbitol) oral suspension 15-20 gram/60 ml</i>	\$0 (1)	
<i>sps (with sorbitol) rectal enema 30-40 gram/120 ml</i>	\$0 (1)	
<i>trientine oral capsule 250 mg</i>	\$0 (1)	PA; ^
<i>VELPHORO ORAL TABLET,CHEWABLE 500 MG</i>	\$0 (1)	QL (180 EA per 30 days)
<i>VELTASSA ORAL POWDER IN PACKET 16.8 GRAM, 25.2 GRAM, 8.4 GRAM</i>	\$0 (1)	
<i>water for irrigation, sterile irrigation solution</i>	\$0 (1)	
<i>ZEMAIRA INTRAVENOUS RECON SOLN 1,000 MG, 4,000 MG, 5,000 MG</i>	\$0 (1)	PA; LA; ^
<i>zoledronic acid-mannitol-water intravenous piggyback 5 mg/100 ml</i>	\$0 (1)	B/D

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<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	\$0 (1)
<i>NICOTROL INHALATION CARTRIDGE 10 MG</i>	\$0 (1)
<i>NICOTROL NS NASAL SPRAY,NON-AEROSOL 10 MG/ML</i>	\$0 (1)
<i>varenicline oral tablet 0.5 mg, 1 mg</i>	\$0 (1) QL (56 EA per 28 days)
<i>varenicline oral tablets,dose pack 0.5 mg (11)- 1 mg (42)</i>	\$0 (1)

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<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	\$0 (1)	B/D
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	\$0 (1)	QL (12 GM per 30 days)
<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation</i>	\$0 (1)	8.5 gm inhaler; QL (17 GM per 30 days)
<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation (nda020503)</i>	\$0 (1)	6.7 gm inhaler; QL (13.4 GM per 30 days)
ALBUTEROL SULFATE INHALATION HFA AEROSOL INHALER 90 MCG/ACTUATION (NDA020983)	\$0 (1)	18 gm inhaler; QL (36 GM per 30 days)
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml</i>	\$0 (1)	B/D
<i>albuterol sulfate inhalation solution for nebulization 5 mg/ml</i>	\$0 (1)	
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	\$0 (1)	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	\$0 (1)	
<i>alyq oral tablet 20 mg</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	\$0 (1)	QL (60 EA per 30 days)
<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	\$0 (1)	B/D; QL (120 ML per 30 days)
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	\$0 (1)	QL (30 EA per 30 days)

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ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	\$0 (1)	QL (25.8 GM per 30 days)
BERINERT INTRAVENOUS KIT 500 UNIT (10 ML)	\$0 (1)	PA; LA; QL (24 EA per 30 days); ^
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER 9-4.8 MCG	\$0 (1)	QL (10.7 GM per 30 days)
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE, 50-25 MCG/DOSE	\$0 (1)	QL (60 EA per 30 days)
<i>breyna inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i>	\$0 (1)	QL (30.9 GM per 30 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	\$0 (1)	Retail Inhalation Canister (10.7g inhaler containing 120 inhalations); QL (10.7 GM per 30 days)
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml</i>	\$0 (1)	B/D
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	\$0 (1)	QL (8 GM per 30 days)
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	\$0 (1)	B/D
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	\$0 (1)	PA; LA; QL (1 ML per 28 days); ^
FASENRA SUBCUTANEOUS SYRINGE 30 MG/ML	\$0 (1)	PA; LA; QL (1 ML per 28 days); ^
<i>flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)</i>	\$0 (1)	QL (75 ML per 30 days)
<i>fluticasone propionate nasal spray,suspension 50 mcg/actuation</i>	\$0 (1)	QL (16 GM per 30 days)
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	\$0 (1)	QL (60 EA per 30 days)
<i>formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml</i>	\$0 (1)	B/D; QL (120 ML per 30 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT	\$0 (1)	PA; LA; QL (30 EA per 30 days); ^
HAEGARDA SUBCUTANEOUS RECON SOLN 3,000 UNIT	\$0 (1)	PA; LA; QL (20 EA per 30 days); ^
<i>icatibant subcutaneous syringe 30 mg/3 ml</i>	\$0 (1)	PA; QL (27 ML per 30 days); ^

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INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	\$0 (1)	QL (30 EA per 30 days)
<i>ipratropium bromide inhalation solution 0.02 %</i>	\$0 (1)	B/D
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	\$0 (1)	B/D
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 5.8 MG	\$0 (1)	PA; QL (56 EA per 28 days); ^
KALYDECO ORAL GRANULES IN PACKET 25 MG, 50 MG, 75 MG	\$0 (1)	PA; LA; QL (56 EA per 28 days); ^
KALYDECO ORAL TABLET 150 MG	\$0 (1)	PA; LA; QL (56 EA per 28 days); ^
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	\$0 (1)	B/D
LEVALBUTEROL TARTRATE INHALATION HFA AEROSOL INHALER 45 MCG/ACTUATION	\$0 (1)	QL (30 GM per 30 days)
<i>mometasone nasal spray,non-aerosol 50 mcg/actuation</i>	\$0 (1)	QL (34 GM per 30 days)
<i>montelukast oral granules in packet 4 mg</i>	\$0 (1)	
<i>montelukast oral tablet 10 mg</i>	\$0 (1)	
<i>montelukast oral tablet,chewable 4 mg, 5 mg</i>	\$0 (1)	
OFEV ORAL CAPSULE 100 MG, 150 MG	\$0 (1)	PA; LA; QL (60 EA per 30 days); ^
OPSUMIT ORAL TABLET 10 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG, 75-94 MG	\$0 (1)	PA; LA; QL (56 EA per 28 days); ^
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	\$0 (1)	PA; LA; QL (112 EA per 28 days); ^
<i>pirfenidone oral capsule 267 mg</i>	\$0 (1)	PA; QL (270 EA per 30 days); ^
<i>pirfenidone oral tablet 267 mg</i>	\$0 (1)	PA; QL (270 EA per 30 days); ^
PIRFENIDONE ORAL TABLET 534 MG	\$0 (1)	PA; QL (90 EA per 30 days); ^
<i>pirfenidone oral tablet 801 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days); ^
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION	\$0 (1)	QL (2 EA per 30 days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 90 MCG/ACTUATION	\$0 (1)	QL (3 EA per 30 days)

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PULMOZYME INHALATION SOLUTION 1 MG/ML	\$0 (1)	B/D; ^
<i>roflumilast oral tablet 250 mcg, 500 mcg</i>	\$0 (1)	
<i>sazair subcutaneous syringe 30 mg/3 ml</i>	\$0 (1)	PA; LA; QL (27 ML per 30 days); ^
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	\$0 (1)	QL (60 EA per 30 days)
<i>sildenafil (pulm. hypertension) oral tablet 20 mg</i>	\$0 (1)	generic for Revatio; PA-NS; QL (90 EA per 30 days)
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	\$0 (1)	PA; LA; QL (56 EA per 28 days); ^
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	\$0 (1)	generic for Adcirca; PA-NS; QL (60 EA per 30 days); ^
TADLIQ ORAL SUSPENSION 20 MG/5 ML (4 MG/ML)	\$0 (1)	PA-NS; QL (300 ML per 30 days); ^
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	\$0 (1)	
THEO-24 ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	\$0 (1)	
<i>theophylline oral elixir 80 mg/15 ml</i>	\$0 (1)	
<i>theophylline oral solution 80 mg/15 ml</i>	\$0 (1)	
<i>theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg</i>	\$0 (1)	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	\$0 (1)	
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	\$0 (1)	QL (60 EA per 30 days)
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	\$0 (1)	PA; QL (56 EA per 28 days); ^
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	\$0 (1)	PA; LA; QL (84 EA per 28 days); ^
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	\$0 (1)	B/D; LA; ^
VENTOLIN HFA INHALATION HFA AEROSOL INHALER 90 MCG/ACTUATION	\$0 (1)	QL (36 GM per 30 days)

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XHANCE NASAL AEROSOL BREATH ACTIVATED 93 MCG/ACTUATION	\$0 (1)	PA; QL (32 ML per 30 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML, 300 MG/2 ML	\$0 (1)	PA; LA; QL (8 ML per 28 days); ^
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	\$0 (1)	PA; LA; QL (1 ML per 28 days); ^
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	\$0 (1)	PA; LA; QL (8 EA per 28 days); ^
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML	\$0 (1)	PA; LA; QL (8 ML per 28 days); ^
XOLAIR SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	\$0 (1)	PA; LA; QL (1 ML per 28 days); ^
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	\$0 (1)	

TSHUAJ ZOO KHAUB THUAS / COV TSHUAJ TIV THAIV MOB**TXHAUM FAB**

<i>adrenalin injection solution 1 mg/ml (1 ml)</i>	\$0 (1)	
<i>cetirizine oral solution 1 mg/ml</i>	\$0 (1)	
<i>cyproheptadine oral tablet 4 mg</i>	\$0 (1)	PA
<i>desloratadine oral tablet 5 mg</i>	\$0 (1)	
<i>diphenhydramine hcl injection solution 50 mg/ml</i>	\$0 (1)	
<i>diphenhydramine hcl injection syringe 50 mg/ml</i>	\$0 (1)	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	\$0 (1)	
EPINEPHRINE INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	\$0 (1)	
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	\$0 (1)	PA
<i>hydroxyzine pamoate oral capsule 25 mg, 50 mg</i>	\$0 (1)	PA
<i>levocetirizine oral solution 2.5 mg/5 ml</i>	\$0 (1)	
<i>levocetirizine oral tablet 5 mg</i>	\$0 (1)	
<i>promethazine injection solution 25 mg/ml, 50 mg/ml</i>	\$0 (1)	PA
<i>promethazine oral syrup 6.25 mg/5 ml</i>	\$0 (1)	PA
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	\$0 (1)	PA

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NTAU YAM

<i>alosetron oral tablet 0.5 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days)
<i>alosetron oral tablet 1 mg</i>	\$0 (1)	PA; QL (60 EA per 30 days); ^
<i>aprepitant oral capsule 125 mg, 40 mg, 80 mg</i>	\$0 (1)	B/D
<i>aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)</i>	\$0 (1)	B/D
<i>balsalazide oral capsule 750 mg</i>	\$0 (1)	
<i>betaine oral powder 1 gram/scoop</i>	\$0 (1)	LA; ^
<i>budesonide oral capsule,delayed,extend.release 3 mg</i>	\$0 (1)	PA; QL (90 EA per 30 days)
<i>budesonide oral tablet,delayed and ext.release 9 mg</i>	\$0 (1)	PA; QL (30 EA per 30 days); ^
<i>compro rectal suppository 25 mg</i>	\$0 (1)	
<i>constulose oral solution 10 gram/15 ml</i>	\$0 (1)	
<i>CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT</i>	\$0 (1)	
<i>cromolyn oral concentrate 100 mg/5 ml</i>	\$0 (1)	
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)	B/D; QL (60 EA per 30 days)
<i>enulose oral solution 10 gram/15 ml</i>	\$0 (1)	
<i>GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG</i>	\$0 (1)	PA; LA; ^
<i>GATTEX ONE-VIAL SUBCUTANEOUS KIT 5 MG</i>	\$0 (1)	PA; LA; ^
<i>gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram</i>	\$0 (1)	
<i>gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram</i>	\$0 (1)	
<i>generlac oral solution 10 gram/15 ml</i>	\$0 (1)	
<i>GOLYTELY ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM</i>	\$0 (1)	
<i>granisetron (pf) intravenous solution 1 mg/ml (1 ml)</i>	\$0 (1)	
<i>granisetron hcl intravenous solution 1 mg/ml, 1 mg/ml (1 ml)</i>	\$0 (1)	

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<i>granisetron hcl oral tablet 1 mg</i>	\$0 (1)	B/D
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	\$0 (1)	
<i>hydrocortisone topical cream with perineal applicator 1 %, 2.5 %</i>	\$0 (1)	
<i>lactulose oral solution 10 gram/15 ml, 10 gram/15 ml (15 ml), 20 gram/30 ml</i>	\$0 (1)	
<i>LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG</i>	\$0 (1)	QL (30 EA per 30 days)
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	\$0 (1)	
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>mesalamine oral capsule,extended release 24hr 0.375 gram</i>	\$0 (1)	QL (120 EA per 30 days)
<i>mesalamine oral tablet,delayed release (dr/ec) 1.2 gram, 800 mg</i>	\$0 (1)	
<i>mesalamine rectal enema 4 gram/60 ml</i>	\$0 (1)	
<i>mesalamine rectal suppository 1,000 mg</i>	\$0 (1)	
<i>mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml</i>	\$0 (1)	
<i>metoclopramide hcl injection solution 5 mg/ml</i>	\$0 (1)	
<i>metoclopramide hcl injection syringe 5 mg/ml</i>	\$0 (1)	
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	\$0 (1)	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	\$0 (1)	
<i>MOVANTIK ORAL TABLET 12.5 MG, 25 MG</i>	\$0 (1)	QL (30 EA per 30 days)
<i>OCALIVA ORAL TABLET 10 MG, 5 MG</i>	\$0 (1)	PA; LA; QL (30 EA per 30 days); ^
<i>ondansetron hcl (pf) injection solution 4 mg/2 ml</i>	\$0 (1)	
<i>ondansetron hcl (pf) injection syringe 4 mg/2 ml</i>	\$0 (1)	
<i>ondansetron hcl intravenous solution 2 mg/ml</i>	\$0 (1)	
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	\$0 (1)	
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	\$0 (1)	
<i>ondansetron oral tablet,disintegrating 4 mg, 8 mg</i>	\$0 (1)	

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peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram	\$0 (1)	
peg-electrolyte soln oral recon soln 420 gram	\$0 (1)	
PLENVU ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM	\$0 (1)	
prochlorperazine edisylate injection solution 10 mg/2 ml (5 mg/ml)	\$0 (1)	
prochlorperazine maleate oral tablet 10 mg, 5 mg	\$0 (1)	
prochlorperazine rectal suppository 25 mg	\$0 (1)	
procto-med hc topical cream with perineal applicator 2.5 %	\$0 (1)	
proctosol hc topical cream with perineal applicator 2.5 %	\$0 (1)	
protozone-hc topical cream with perineal applicator 2.5 %	\$0 (1)	
RECTIV RECTAL OINTMENT 0.4 % (W/W)	\$0 (1)	QL (30 GM per 30 days)
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6 ML	\$0 (1)	PA; ^
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/0.6 ML, 8 MG/0.4 ML	\$0 (1)	PA; ^
REMICADE INTRAVENOUS RECON SOLN 100 MG	\$0 (1)	PA; ^
scopolamine base transdermal patch 3 day 1 mg over 3 days	\$0 (1)	PA; QL (10 EA per 30 days)
SKYRIZI INTRAVENOUS SOLUTION 60 MG/ML	\$0 (1)	PA; QL (30 ML per 135 days); ^
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML)	\$0 (1)	PA; QL (1.2 ML per 56 days); ^
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 360 MG/2.4 ML (150 MG/ML)	\$0 (1)	PA; QL (2.4 ML per 56 days); ^
sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram, 17.5-3.13-1.6 gram 2 pack (480ml)	\$0 (1)	
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	\$0 (1)	PA; ^
sulfasalazine oral tablet 500 mg	\$0 (1)	
sulfasalazine oral tablet,delayed release (dr/ec) 500 mg	\$0 (1)	

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SUPREP BOWEL PREP KIT ORAL RECON SOLN 17.5-3.13-1.6 GRAM	\$0 (1)
TRULANCE ORAL TABLET 3 MG	\$0 (1)
<i>ursodiol oral capsule 300 mg</i>	\$0 (1)
<i>ursodiol oral tablet 250 mg, 500 mg</i>	\$0 (1)
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	\$0 (1)
KEV KHO MOB NCAUJ PLAB	
CARAFATE ORAL SUSPENSION 100 MG/ML	\$0 (1)
<i>dexlansoprazole oral capsule,biphasic delayed release 30 mg, 60 mg</i>	\$0 (1)
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg</i>	\$0 (1)
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>famotidine (pf) intravenous solution 20 mg/2 ml</i>	\$0 (1)
<i>famotidine (pf)-nacl (iso-os) intravenous piggyback 20 mg/50 ml</i>	\$0 (1)
<i>famotidine intravenous solution 10 mg/ml</i>	\$0 (1)
<i>famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)</i>	\$0 (1) QL (300 ML per 30 days)
<i>famotidine oral tablet 20 mg</i>	\$0 (1) QL (120 EA per 30 days)
<i>famotidine oral tablet 40 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	\$0 (1)
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>lansoprazole oral tablet,disintegrat, delay rel 15 mg, 30 mg</i>	\$0 (1)
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	\$0 (1)
<i>nizatidine oral capsule 150 mg, 300 mg</i>	\$0 (1)

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omeprazole oral capsule, delayed release (dr/ec) 10 mg, 20 mg

\$0 (1)

omeprazole oral capsule, delayed release (dr/ec) 40 mg

\$0 (1) QL (60 EA per 30 days)

pantoprazole intravenous recon soln 40 mg

\$0 (1)

pantoprazole oral tablet, delayed release (dr/ec) 20 mg

\$0 (1)

pantoprazole oral tablet, delayed release (dr/ec) 40 mg

\$0 (1) QL (60 EA per 30 days)

rabeprazole oral tablet, delayed release (dr/ec) 20 mg

\$0 (1)

sucralfate oral suspension 100 mg/ml

\$0 (1)

sucralfate oral tablet 1 gram

\$0 (1)

TSHUAJ TIV THAIV RAWS PLAB / TSHUAJ TIV THAIV KOM**SIAB TXHOB YWJ FAJ YWJ FWJ**

dicyclomine oral capsule 10 mg

\$0 (1)

dicyclomine oral solution 10 mg/5 ml

\$0 (1)

dicyclomine oral tablet 20 mg

\$0 (1)

diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml

\$0 (1)

diphenoxylate-atropine oral tablet 2.5-0.025 mg

\$0 (1)

glycopyrrolate oral tablet 1 mg, 2 mg

\$0 (1)

loperamide oral capsule 2 mg

\$0 (1)

MOB LEEG NQAIJ THIAB POB TXHA / KEV KHO MOB LAUG**KEV KHO MOB KO TAW VWM**

allopurinol oral tablet 100 mg, 300 mg

\$0 (1)

colchicine oral tablet 0.6 mg

\$0 (1) QL (120 EA per 30 days)

febuxostat oral tablet 40 mg, 80 mg

\$0 (1)

MITIGARE ORAL CAPSULE 0.6 MG

\$0 (1) QL (60 EA per 30 days)

probenecid oral tablet 500 mg

\$0 (1)

probenecid-colchicine oral tablet 500-0.5 mg

\$0 (1)

KEV KHO MOB POB TXHA PO

alendronate oral solution 70 mg/75 ml

\$0 (1) QL (300 ML per 28 days)

alendronate oral tablet 10 mg

\$0 (1) QL (30 EA per 30 days)

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<i>alendronate oral tablet 35 mg, 70 mg</i>	\$0 (1)	QL (4 EA per 28 days)
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (600MCG/2.4ML)	\$0 (1)	PA; ^
FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT, 70 MG- 5,600 UNIT	\$0 (1)	ST; QL (4 EA per 28 days)
<i>ibandronate intravenous solution 3 mg/3 ml</i>	\$0 (1)	QL (3 ML per 68 days)
<i>ibandronate intravenous syringe 3 mg/3 ml</i>	\$0 (1)	QL (3 ML per 68 days)
<i>ibandronate oral tablet 150 mg</i>	\$0 (1)	QL (1 EA per 30 days)
PROLIA SUBCUTANEOUS SYRINGE 60 MG/ML	\$0 (1)	QL (1 ML per 180 days)
<i>raloxifene oral tablet 60 mg</i>	\$0 (1)	
<i>risedronate oral tablet 150 mg</i>	\$0 (1)	QL (1 EA per 30 days)
<i>risedronate oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)</i>	\$0 (1)	QL (4 EA per 28 days)
<i>risedronate oral tablet 5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>risedronate oral tablet,delayed release (dr/ec) 35 mg</i>	\$0 (1)	QL (4 EA per 28 days)
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	\$0 (1)	Only Teriparatide NDC 47781065289 is covered; PA; QL (2.48 ML per 28 days); ^
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	\$0 (1)	PA; ^
LWM HOM MOB LAUG		
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	\$0 (1)	PA; QL (3.6 ML per 28 days); ^
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	\$0 (1)	PA; QL (3.6 ML per 28 days); ^
BENLYSTA INTRAVENOUS RECON SOLN 120 MG, 400 MG	\$0 (1)	PA; LA; ^
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	\$0 (1)	PA; LA; QL (8 ML per 28 days); ^
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	\$0 (1)	PA; LA; QL (8 ML per 28 days); ^
CYLTEZO(CF) PEN CROHN'S-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (6 EA per 180 days); ^

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CYLTEZO(CF) PEN PSORIASIS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (4 EA per 180 days); ^
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	\$0 (1)	PA; ^
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (4 EA per 28 days); ^
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML	\$0 (1)	PA; QL (2 EA per 28 days); ^
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (4 EA per 28 days); ^
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	\$0 (1)	PA; QL (8 ML per 28 days); ^
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	\$0 (1)	PA; QL (8 ML per 28 days); ^
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	\$0 (1)	PA; QL (8 ML per 28 days); ^
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	\$0 (1)	PA; QL (8 ML per 28 days); ^
HUMIRA PEN PSOR-UVEITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; ^
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; QL (6 EA per 28 days); ^
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; QL (6 EA per 28 days); ^
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML, 80 MG/0.8 ML-40 MG/0.4 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; ^
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; ^
HUMIRA(CF) PEN PEDIATRIC UC SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; ^
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; ^
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; QL (6 EA per 28 days); ^

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HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; QL (4 EA per 28 days); ^
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; QL (2 EA per 28 days); ^
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	\$0 (1)	Only Humira NDCs starting 00074 are covered; PA; QL (6 EA per 28 days); ^
IDACIO(CF) PEN CROHN-UC STARTR SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (6 EA per 180 days); ^
IDACIO(CF) PEN PSORIASIS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (4 EA per 28 days); ^
IDACIO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (4 EA per 180 days); ^
IDACIO(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	\$0 (1)	PA; QL (4 EA per 28 days); ^
<i>leflunomide oral tablet 10 mg, 20 mg</i>	\$0 (1)	QL (30 EA per 30 days)
OTEZLA ORAL TABLET 30 MG	\$0 (1)	PA; QL (60 EA per 30 days); ^
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	\$0 (1)	PA; QL (55 EA per 180 days); ^
<i>penicillamine oral tablet 250 mg</i>	\$0 (1)	^
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG	\$0 (1)	PA; QL (30 EA per 30 days); ^
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 45 MG	\$0 (1)	PA; QL (84 EA per 180 days); ^
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	\$0 (1)	PA; QL (60 EA per 30 days)
SAVELLA ORAL TABLETS,DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	\$0 (1)	PA
XELJANZ ORAL SOLUTION 1 MG/ML	\$0 (1)	PA; QL (480 ML per 24 days); ^
XELJANZ ORAL TABLET 10 MG, 5 MG	\$0 (1)	PA; QL (60 EA per 30 days); ^
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	\$0 (1)	PA; QL (30 EA per 30 days); ^

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COV ROJ NTSHA HAUV LUB QOG THYROID

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 \$0 (1)

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 \$0 (1)

levothyroxine 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 \$0 (1)

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 \$0 (1)

liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg \$0 (1)

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 \$0 (1)

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 \$0 (1)

COV ROJ NTSHA NTAU YAM

ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5 ML \$0 (1) PA; ^

cabergoline oral tablet 0.5 mg \$0 (1)

calcitonin (salmon) nasal spray,non-aerosol 200
unit/actuation \$0 (1)

calcitriol intravenous solution 1 mcg/ml \$0 (1) B/D

calcitriol oral capsule 0.25 mcg, 0.5 mcg \$0 (1) B/D

calcitriol oral solution 1 mcg/ml \$0 (1) B/D

CERDELGA ORAL CAPSULE 84 MG \$0 (1) PA; LA; ^

CEREZYME INTRAVENOUS RECON SOLN 400 UNIT \$0 (1) PA; ^

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<i>cinacalcet oral tablet 30 mg, 60 mg</i>	\$0 (1)	B/D; QL (60 EA per 30 days)
<i>cinacalcet oral tablet 90 mg</i>	\$0 (1)	B/D; QL (120 EA per 30 days)
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	\$0 (1)	
<i>desmopressin injection solution 4 mcg/ml</i>	\$0 (1)	^
<i>desmopressin nasal spray with pump 10 mcg/spray (0.1 ml)</i>	\$0 (1)	
<i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i>	\$0 (1)	
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	\$0 (1)	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	\$0 (1)	B/D
<i>FABRAZYME INTRAVENOUS RECON SOLN 35 MG, 5 MG</i>	\$0 (1)	PA; ^
<i>KORLYM ORAL TABLET 300 MG</i>	\$0 (1)	PA; LA; ^
<i>LUMIZYME INTRAVENOUS RECON SOLN 50 MG</i>	\$0 (1)	PA; ^
<i>mifepristone oral tablet 300 mg</i>	\$0 (1)	PA; ^
<i>NAGLAZYME INTRAVENOUS SOLUTION 5 MG/5 ML</i>	\$0 (1)	PA; ^
<i>pamidronate intravenous solution 30 mg/10 ml (3 mg/ml), 60 mg/10 ml (6 mg/ml), 90 mg/10 ml (9 mg/ml)</i>	\$0 (1)	B/D
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	\$0 (1)	B/D
<i>RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR 30 MICG</i>	\$0 (1)	^
<i>sapropterin oral powder in packet 100 mg, 500 mg</i>	\$0 (1)	PA; ^
<i>sapropterin oral tablet,soluble 100 mg</i>	\$0 (1)	PA; ^
<i>SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG</i>	\$0 (1)	PA; LA
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)</i>	\$0 (1)	
<i>testosterone enanthate intramuscular oil 200 mg/ml</i>	\$0 (1)	
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i>	\$0 (1)	PA; QL (300 GM per 30 days)
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	\$0 (1)	PA; QL (300 GM per 30 days)

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<i>testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)</i>	\$0 (1)	PA; QL (150 GM per 30 days)
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram)</i>	\$0 (1)	PA; QL (300 GM per 30 days)
<i>tolvaptan oral tablet 15 mg, 30 mg</i>	\$0 (1)	PA; ^
<i>zoledronic acid intravenous solution 4 mg/5 ml</i>	\$0 (1)	B/D
<i>zoledronic acid-mannitol-water intravenous piggyback 4 mg/100 ml</i>	\$0 (1)	B/D
COV TSHUAJ KHO MOB TIV THAIV QOG THYROID		
<i>methimazole oral tablet 10 mg, 5 mg</i>	\$0 (1)	
<i>propylthiouracil oral tablet 50 mg</i>	\$0 (1)	
KEV KHO MOB NTSHAV QAB ZIB		
<i>acarbose oral tablet 100 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>acarbose oral tablet 25 mg</i>	\$0 (1)	QL (360 EA per 30 days)
<i>acarbose oral tablet 50 mg</i>	\$0 (1)	QL (180 EA per 30 days)
<i>alcohol pads topical pads, medicated</i>	\$0 (1)	
<i>BASAGLAR KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)</i>	\$0 (1)	
<i>BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85 ML</i>	\$0 (1)	PA; QL (3.4 ML per 28 days)
<i>diazoxide oral suspension 50 mg/ml</i>	\$0 (1)	
<i>FARXIGA ORAL TABLET 10 MG, 5 MG</i>	\$0 (1)	QL (30 EA per 30 days)
<i>FIASP FLEXTOUCH U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)</i>	\$0 (1)	
<i>FIASP PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (3 ML)</i>	\$0 (1)	
<i>FIASP U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML</i>	\$0 (1)	
<i>glimepiride oral tablet 1 mg, 2 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>glimepiride oral tablet 4 mg</i>	\$0 (1)	QL (60 EA per 30 days)

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glipizide oral tablet 10 mg	\$0 (1)	QL (120 EA per 30 days)
glipizide oral tablet 5 mg	\$0 (1)	QL (240 EA per 30 days)
glipizide oral tablet extended release 24hr 10 mg	\$0 (1)	QL (60 EA per 30 days)
glipizide oral tablet extended release 24hr 2.5 mg, 5 mg	\$0 (1)	QL (90 EA per 30 days)
glipizide-metformin oral tablet 2.5-250 mg	\$0 (1)	QL (240 EA per 30 days)
glipizide-metformin oral tablet 2.5-500 mg, 5-500 mg	\$0 (1)	QL (120 EA per 30 days)
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	\$0 (1)	QL (30 EA per 30 days)
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	\$0 (1)	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	\$0 (1)	
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	\$0 (1)	
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	\$0 (1)	
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	\$0 (1)	
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	\$0 (1)	B/D; ^
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	\$0 (1)	^
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	\$0 (1)	QL (60 EA per 30 days)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100- 1,000 MG	\$0 (1)	QL (30 EA per 30 days)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 50- 1,000 MG, 50-500 MG	\$0 (1)	QL (60 EA per 30 days)
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	\$0 (1)	QL (30 EA per 30 days)
JARDIANCE ORAL TABLET 10 MG, 25 MG	\$0 (1)	QL (30 EA per 30 days)
JENTADUETO ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 2.5- 850 MG	\$0 (1)	QL (60 EA per 30 days)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5- 1,000 MG	\$0 (1)	QL (60 EA per 30 days)

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JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG	\$0 (1)	QL (30 EA per 30 days)
<i>metformin oral tablet 1,000 mg</i>	\$0 (1)	QL (75 EA per 30 days)
<i>metformin oral tablet 500 mg</i>	\$0 (1)	QL (150 EA per 30 days)
<i>metformin oral tablet 850 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>metformin oral tablet extended release 24 hr 500 mg</i>	\$0 (1)	Generic for Glucophage XR; QL (120 EA per 30 days)
<i>metformin oral tablet extended release 24 hr 750 mg</i>	\$0 (1)	Generic for Glucophage XR; QL (60 EA per 30 days)
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	\$0 (1)	PA; QL (2 ML per 28 days)
<i>nateglinide oral tablet 120 mg, 60 mg</i>	\$0 (1)	QL (90 EA per 30 days)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	\$0 (1)	(brand RELION not covered)
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	\$0 (1)	(brand RELION not covered)
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	\$0 (1)	(brand RELION not covered)
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	\$0 (1)	(brand RELION not covered)
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	\$0 (1)	(brand RELION not covered)
NOVOLIN R REGULAR U100 INSULIN INJECTION SOLUTION 100 UNIT/ML	\$0 (1)	(brand RELION not covered)
NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	\$0 (1)	(brand RELION not covered)
NOVOLOG MIX 70-30 U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	\$0 (1)	(brand RELION not covered)
NOVOLOG MIX 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	\$0 (1)	(brand RELION not covered)

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NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	\$0 (1)	(brand RELION not covered)
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	\$0 (1)	(brand RELION not covered)
OZEMPIK SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	\$0 (1)	PA; QL (3 ML per 28 days)
OZEMPIK SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG(2 MG/1.5 ML)	\$0 (1)	PA; QL (1.8 ML per 30 days)
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	\$0 (1)	QL (90 EA per 30 days)
<i>repaglinide oral tablet 0.5 mg, 1 mg</i>	\$0 (1)	QL (120 EA per 30 days)
<i>repaglinide oral tablet 2 mg</i>	\$0 (1)	QL (240 EA per 30 days)
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	\$0 (1)	PA; QL (30 EA per 30 days)
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	\$0 (1)	QL (15 ML per 25 days)
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG	\$0 (1)	QL (60 EA per 30 days)
SYNJARDY ORAL TABLET 5-500 MG	\$0 (1)	QL (120 EA per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	\$0 (1)	QL (30 EA per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	\$0 (1)	QL (60 EA per 30 days)
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	\$0 (1)	
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	\$0 (1)	
TRADJENTA ORAL TABLET 5 MG	\$0 (1)	QL (30 EA per 30 days)
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	\$0 (1)	

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TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	\$0 (1)	
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	\$0 (1)	
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5- 1,000 MG, 25-5-1,000 MG	\$0 (1)	QL (30 EA per 30 days)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-2.5- 1,000 MG, 5-2.5-1,000 MG	\$0 (1)	QL (60 EA per 30 days)
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	\$0 (1)	PA; QL (2 ML per 28 days)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG	\$0 (1)	QL (30 EA per 30 days)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG, 5-500 MG	\$0 (1)	QL (60 EA per 30 days)
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN 100 UNIT-3.6 MG /ML (3 ML)	\$0 (1)	QL (15 ML per 30 days)
ROJ NTSHAV NYOB HAUVE LUB RAUM		
dexamethasone intensol oral drops 1 mg/ml	\$0 (1)	
dexamethasone oral elixir 0.5 mg/5 ml	\$0 (1)	
dexamethasone oral solution 0.5 mg/5 ml	\$0 (1)	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	\$0 (1)	
dexamethasone sodium phos (pf) injection solution 10 mg/ml	\$0 (1)	
dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml	\$0 (1)	
dexamethasone sodium phosphate injection syringe 4 mg/ml	\$0 (1)	
fludrocortisone oral tablet 0.1 mg	\$0 (1)	
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	\$0 (1)	

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<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	\$0 (1)
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	\$0 (1) B/D
<i>methylprednisolone oral tablets,dose pack 4 mg</i>	\$0 (1)
<i>methylprednisolone sodium succ injection recon soln 125 mg, 40 mg</i>	\$0 (1)
<i>methylprednisolone sodium succ intravenous recon soln 1,000 mg, 500 mg</i>	\$0 (1)
<i>prednisolone oral solution 15 mg/5 ml</i>	\$0 (1)
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 15 mg/5 ml (5 ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	\$0 (1)
<i>prednisone intensol oral concentrate 5 mg/ml</i>	\$0 (1)
<i>prednisone oral solution 5 mg/5 ml</i>	\$0 (1)
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	\$0 (1)
<i>prednisone oral tablets,dose pack 10 mg, 10 mg (48 pack), 5 mg, 5 mg (48 pack)</i>	\$0 (1)
SOLU-CORTEF ACT-O-VIAL (PF) INJECTION RECON SOLN 1,000 MG/8 ML, 100 MG/2 ML, 250 MG/2 ML, 500 MG/4 ML	\$0 (1)
TIV THAIV - KEV SIB KIS KAB MOB	
COV TSHUAJ CEPHALOSPORINS	
<i>cefaclor oral capsule 250 mg, 500 mg</i>	\$0 (1)
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	\$0 (1)
<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	\$0 (1)
<i>cefadroxil oral capsule 500 mg</i>	\$0 (1)
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	\$0 (1)

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<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml</i>	\$0 (1)
CEFAZOLIN IN DEXTROSE (ISO-OS) INTRAVENOUS PIGGYBACK 2 GRAM/100 ML	\$0 (1)
<i>cefazolin injection recon soln 1 gram, 10 gram, 100 gram, 300 g, 500 mg</i>	\$0 (1)
<i>cefazolin intravenous recon soln 1 gram</i>	\$0 (1)
<i>cefdinir oral capsule 300 mg</i>	\$0 (1)
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	\$0 (1)
CEFEPIME IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 2 GRAM/50 ML	\$0 (1)
<i>cefepime in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	\$0 (1)
<i>cefepime injection recon soln 1 gram, 2 gram</i>	\$0 (1)
<i>cefixime oral capsule 400 mg</i>	\$0 (1)
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	\$0 (1)
<i>cefoxitin in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	\$0 (1)
<i>cefoxitin intravenous recon soln 1 gram, 10 gram, 2 gram</i>	\$0 (1)
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	\$0 (1)
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	\$0 (1)
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	\$0 (1)
<i>cefprozil oral tablet 250 mg, 500 mg</i>	\$0 (1)
<i>ceftazidime injection recon soln 1 gram, 2 gram, 6 gram</i>	\$0 (1)
<i>ceftriaxone in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	\$0 (1)

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<i>ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg</i>	\$0 (1)
CEFTRIAXONE INJECTION RECON SOLN 100 GRAM	\$0 (1)
<i>ceftriaxone intravenous recon soln 1 gram, 2 gram</i>	\$0 (1)
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	\$0 (1)
<i>cefuroxime sodium injection recon soln 750 mg</i>	\$0 (1)
<i>cefuroxime sodium intravenous recon soln 1.5 gram</i>	\$0 (1)
<i>cephalexin oral capsule 250 mg, 500 mg</i>	\$0 (1)
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	\$0 (1)
<i>tazicef injection recon soln 1 gram, 2 gram, 6 gram</i>	\$0 (1)
<i>tazicef intravenous recon soln 1 gram, 2 gram</i>	\$0 (1)
TEFLARO INTRAVENOUS RECON SOLN 400 MG, 600 MG	\$0 (1) ^

COV TSHUAJ KHO LUB ZAIS ZIS

<i>methenamine hippurate oral tablet 1 gram</i>	\$0 (1)
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	\$0 (1)
<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg</i>	\$0 (1)
<i>trimethoprim oral tablet 100 mg</i>	\$0 (1)

COV TSHUAJ QUINOLONES

CIPRO ORAL SUSPENSION,MICROCAPSULE RECON 500 MG/5 ML	\$0 (1)
<i>ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg</i>	\$0 (1)
<i>ciprofloxacin in 5 % dextrose intravenous piggyback 200 mg/100 ml, 400 mg/200 ml</i>	\$0 (1)
<i>ciprofloxacin oral suspension,microcapsule recon 500 mg/5 ml</i>	\$0 (1)
<i>levofloxacin in d5w intravenous piggyback 250 mg/50 ml, 500 mg/100 ml, 750 mg/150 ml</i>	\$0 (1)
<i>levofloxacin intravenous solution 25 mg/ml</i>	\$0 (1)

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<i>levofloxacin oral solution 250 mg/10 ml</i>	\$0 (1)
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	\$0 (1)
<i>moxifloxacin oral tablet 400 mg</i>	\$0 (1)
MOXIFLOXACIN-SOD.ACE,SUL-WATER INTRAVENOUS PIGGYBACK 400 MG/250 ML	\$0 (1)
<i>moxifloxacin-sod.chloride(iso) intravenous piggyback 400 mg/250 ml</i>	\$0 (1)

COV TSHUAJ TIV THAIV KAB MOB VAIS LAV

<i>abacavir oral solution 20 mg/ml</i>	\$0 (1)
<i>abacavir oral tablet 300 mg</i>	\$0 (1)
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	\$0 (1)
<i>acyclovir oral capsule 200 mg</i>	\$0 (1)
<i>acyclovir oral suspension 200 mg/5 ml</i>	\$0 (1)
<i>acyclovir oral tablet 400 mg, 800 mg</i>	\$0 (1)
<i>acyclovir sodium intravenous solution 50 mg/ml</i>	\$0 (1) B/D
<i>adefovir oral tablet 10 mg</i>	\$0 (1)
<i>amantadine hcl oral capsule 100 mg</i>	\$0 (1)
<i>amantadine hcl oral solution 50 mg/5 ml</i>	\$0 (1)
<i>amantadine hcl oral tablet 100 mg</i>	\$0 (1)
APTIVUS ORAL CAPSULE 250 MG	\$0 (1) ^
<i>atazanavir oral capsule 150 mg, 200 mg, 300 mg</i>	\$0 (1)
BARACLUDE ORAL SOLUTION 0.05 MG/ML	\$0 (1) ^
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	\$0 (1) ^
CIMDUO ORAL TABLET 300-300 MG	\$0 (1) ^
COMPLERA ORAL TABLET 200-25-300 MG	\$0 (1) ^
<i>darunavir oral tablet 600 mg</i>	\$0 (1) QL (60 EA per 30 days); ^
<i>darunavir oral tablet 800 mg</i>	\$0 (1) QL (30 EA per 30 days); ^
DELSTRIGO ORAL TABLET 100-300-300 MG	\$0 (1) ^
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	\$0 (1) QL (30 EA per 30 days); ^

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DOVATO ORAL TABLET 50-300 MG	\$0 (1)	^
EDURANT ORAL TABLET 25 MG	\$0 (1)	^
<i>efavirenz oral capsule 200 mg, 50 mg</i>	\$0 (1)	
<i>efavirenz oral tablet 600 mg</i>	\$0 (1)	
<i>efavirenz-emtricitabin-tenofovir oral tablet 600-200-300 mg</i>	\$0 (1)	^
<i>efavirenz-lamivu-tenofovir disop oral tablet 400-300-300 mg, 600-300-300 mg</i>	\$0 (1)	^
<i>emtricitabine oral capsule 200 mg</i>	\$0 (1)	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133- 200 mg, 167-250 mg</i>	\$0 (1)	QL (30 EA per 30 days); ^
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	\$0 (1)	QL (30 EA per 30 days)
EMTRIVA ORAL SOLUTION 10 MG/ML	\$0 (1)	
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	\$0 (1)	
EPCLUSA ORAL PELLETS IN PACKET 150-37.5 MG	\$0 (1)	PA; QL (28 EA per 28 days); ^
EPCLUSA ORAL PELLETS IN PACKET 200-50 MG	\$0 (1)	PA; QL (56 EA per 28 days); ^
EPCLUSA ORAL TABLET 200-50 MG	\$0 (1)	PA; QL (56 EA per 28 days); ^
EPCLUSA ORAL TABLET 400-100 MG	\$0 (1)	PA; QL (28 EA per 28 days); ^
EPIVIR HBV ORAL SOLUTION 25 MG/5 ML (5 MG/ML)	\$0 (1)	
<i>etravirine oral tablet 100 mg, 200 mg</i>	\$0 (1)	^
EVOTAZ ORAL TABLET 300-150 MG	\$0 (1)	^
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	\$0 (1)	
<i>fosamprenavir oral tablet 700 mg</i>	\$0 (1)	
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	\$0 (1)	^
<i>ganciclovir sodium intravenous recon soln 500 mg</i>	\$0 (1)	
GENVOYA ORAL TABLET 150-150-200-10 MG	\$0 (1)	^
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG	\$0 (1)	PA; QL (28 EA per 28 days); ^
HARVONI ORAL PELLETS IN PACKET 45-200 MG	\$0 (1)	PA; QL (56 EA per 28 days); ^
HARVONI ORAL TABLET 45-200 MG	\$0 (1)	PA; QL (60 EA per 30 days); ^
HARVONI ORAL TABLET 90-400 MG	\$0 (1)	PA; QL (28 EA per 28 days); ^

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INTELENCE ORAL TABLET 25 MG	\$0 (1)	
ISENTRESS HD ORAL TABLET 600 MG	\$0 (1)	^
ISENTRESS ORAL POWDER IN PACKET 100 MG	\$0 (1)	^
ISENTRESS ORAL TABLET 400 MG	\$0 (1)	^
ISENTRESS ORAL TABLET,CHEWABLE 100 MG	\$0 (1)	^
ISENTRESS ORAL TABLET,CHEWABLE 25 MG	\$0 (1)	
JULUCA ORAL TABLET 50-25 MG	\$0 (1)	^
LAGEVRIO (EUA) ORAL CAPSULE 200 MG	\$0 (1)	QL (40 EA per 180 days)
<i>lamivudine oral solution 10 mg/ml</i>	\$0 (1)	
<i>lamivudine oral tablet 100 mg, 150 mg, 300 mg</i>	\$0 (1)	
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	\$0 (1)	
LEXIVA ORAL SUSPENSION 50 MG/ML	\$0 (1)	
<i>lopinavir-ritonavir oral solution 400-100 mg/5 ml</i>	\$0 (1)	
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	\$0 (1)	
<i>maraviroc oral tablet 150 mg, 300 mg</i>	\$0 (1)	^
<i>nevirapine oral suspension 50 mg/5 ml</i>	\$0 (1)	
<i>nevirapine oral tablet 200 mg</i>	\$0 (1)	
<i>nevirapine oral tablet extended release 24 hr 100 mg, 400 mg</i>	\$0 (1)	
NORVIR ORAL POWDER IN PACKET 100 MG	\$0 (1)	
ODEFSEY ORAL TABLET 200-25-25 MG	\$0 (1)	^
<i>oseltamivir oral capsule 30 mg</i>	\$0 (1)	QL (168 EA per 365 days)
<i>oseltamivir oral capsule 45 mg, 75 mg</i>	\$0 (1)	QL (84 EA per 365 days)
<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	\$0 (1)	QL (1080 ML per 365 days)
PAXLOVID ORAL TABLETS,DOSE PACK 150-100 MG	\$0 (1)	\$0 Cost Sharing; QL (20 EA per 180 days)
PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	\$0 (1)	\$0 Cost Sharing; QL (30 EA per 180 days)
PIFELTRO ORAL TABLET 100 MG	\$0 (1)	^

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PREVYMIS ORAL TABLET 240 MG, 480 MG	\$0 (1)	PA; QL (30 EA per 30 days); ^
PREZCOBIX ORAL TABLET 800-150 MG-MG	\$0 (1)	^
PREZISTA ORAL SUSPENSION 100 MG/ML	\$0 (1)	QL (400 ML per 30 days); ^
PREZISTA ORAL TABLET 150 MG	\$0 (1)	QL (240 EA per 30 days); ^
PREZISTA ORAL TABLET 600 MG	\$0 (1)	QL (60 EA per 30 days); ^
PREZISTA ORAL TABLET 75 MG	\$0 (1)	QL (480 EA per 30 days)
PREZISTA ORAL TABLET 800 MG	\$0 (1)	QL (30 EA per 30 days); ^
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	\$0 (1)	QL (120 EA per 365 days)
REYATAZ ORAL POWDER IN PACKET 50 MG	\$0 (1)	^
<i>ribavirin oral capsule 200 mg</i>	\$0 (1)	
<i>ribavirin oral tablet 200 mg</i>	\$0 (1)	
<i>rimantadine oral tablet 100 mg</i>	\$0 (1)	
<i>ritonavir oral tablet 100 mg</i>	\$0 (1)	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	\$0 (1)	^
SELZENTRY ORAL SOLUTION 20 MG/ML	\$0 (1)	^
SELZENTRY ORAL TABLET 25 MG	\$0 (1)	
SELZENTRY ORAL TABLET 75 MG	\$0 (1)	^
STRIBILD ORAL TABLET 150-150-200-300 MG	\$0 (1)	^
SUNLENCA ORAL TABLET 300 MG, 300 MG (4-TABLET PACK)	\$0 (1)	^
SYMTUZA ORAL TABLET 800-150-200-10 MG	\$0 (1)	
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	\$0 (1)	
TIVICAY ORAL TABLET 10 MG	\$0 (1)	
TIVICAY ORAL TABLET 25 MG, 50 MG	\$0 (1)	^
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	\$0 (1)	^
TRIUMEQ ORAL TABLET 600-50-300 MG	\$0 (1)	^
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	\$0 (1)	^
TRIZIVIR ORAL TABLET 300-150-300 MG	\$0 (1)	^

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TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33 ML (150 MG/ML)	\$0 (1)	^
TYBOST ORAL TABLET 150 MG	\$0 (1)	
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	\$0 (1)	
<i>valganciclovir oral recon soln 50 mg/ml</i>	\$0 (1)	^
<i>valganciclovir oral tablet 450 mg</i>	\$0 (1)	
VEMLIDY ORAL TABLET 25 MG	\$0 (1)	^
VIRACEPT ORAL TABLET 250 MG, 625 MG	\$0 (1)	^
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	\$0 (1)	^
VIREAD ORAL TABLET 150 MG, 250 MG	\$0 (1)	^
VIREAD ORAL TABLET 200 MG	\$0 (1)	
VOSEVI ORAL TABLET 400-100-100 MG	\$0 (1)	PA; QL (28 EA per 28 days); ^
<i>zidovudine oral capsule 100 mg</i>	\$0 (1)	
<i>zidovudine oral syrup 10 mg/ml</i>	\$0 (1)	
<i>zidovudine oral tablet 300 mg</i>	\$0 (1)	

COV TSHUAJ TIV THAIV KAB POOV NCEB

ABELCET INTRAVENOUS SUSPENSION 5 MG/ML	\$0 (1)	B/D
<i>amphotericin b injection recon soln 50 mg</i>	\$0 (1)	B/D
<i>caspofungin intravenous recon soln 50 mg, 70 mg</i>	\$0 (1)	
<i>clotrimazole mucous membrane troche 10 mg</i>	\$0 (1)	QL (150 EA per 30 days)
CRESEMDA ORAL CAPSULE 186 MG, 74.5 MG	\$0 (1)	PA; ^
<i>fluconazole in nacl (iso-osm) intravenous piggyback 200 mg/100 ml, 400 mg/200 ml</i>	\$0 (1)	
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	\$0 (1)	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	\$0 (1)	
<i>flucytosine oral capsule 250 mg, 500 mg</i>	\$0 (1)	PA; ^
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	\$0 (1)	
<i>griseofulvin microsize oral tablet 500 mg</i>	\$0 (1)	

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<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>	\$0 (1)	
<i>itraconazole oral capsule 100 mg</i>	\$0 (1)	PA
<i>ketoconazole oral tablet 200 mg</i>	\$0 (1)	PA
<i>micafungin intravenous recon soln 100 mg, 50 mg</i>	\$0 (1)	^
<i>NOXAFIL ORAL SUSPENSION 200 MG/5 ML (40 MG/ML)</i>	\$0 (1)	PA; QL (630 ML per 30 days); ^
<i>nystatin oral suspension 100,000 unit/ml</i>	\$0 (1)	
<i>nystatin oral tablet 500,000 unit</i>	\$0 (1)	
<i>posaconazole oral suspension 200 mg/5 ml (40 mg/ml)</i>	\$0 (1)	PA; QL (630 EA per 30 days); ^
<i>posaconazole oral tablet, delayed release (dr/ec) 100 mg</i>	\$0 (1)	PA; QL (96 EA per 30 days); ^
<i>terbinafine hcl oral tablet 250 mg</i>	\$0 (1)	
<i>voriconazole intravenous recon soln 200 mg</i>	\$0 (1)	PA; ^
<i>voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)</i>	\$0 (1)	PA; ^
<i>voriconazole oral tablet 200 mg</i>	\$0 (1)	PA; QL (120 EA per 30 days)
<i>voriconazole oral tablet 50 mg</i>	\$0 (1)	PA; QL (480 EA per 30 days)

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<i>albendazole oral tablet 200 mg</i>	\$0 (1)	^
<i>amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml</i>	\$0 (1)	
<i>ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML</i>	\$0 (1)	PA; LA; ^
<i>atovaquone oral suspension 750 mg/5 ml</i>	\$0 (1)	
<i>atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg</i>	\$0 (1)	
<i>aztreonam injection recon soln 1 gram, 2 gram</i>	\$0 (1)	
<i>CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML</i>	\$0 (1)	PA; LA; QL (84 ML per 56 days); ^
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	\$0 (1)	
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	\$0 (1)	
<i>CLINDAMYCIN IN 0.9 % SOD CHLOR INTRAVENOUS PIGGYBACK 300 MG/50 ML, 600 MG/50 ML, 900 MG/50 ML</i>	\$0 (1)	

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<i>clindamycin in 5 % dextrose intravenous piggyback 300 mg/50 ml, 600 mg/50 ml, 900 mg/50 ml</i>	\$0 (1)
<i>clindamycin phosphate injection solution 150 mg/ml</i>	\$0 (1)
<i>COARTEM ORAL TABLET 20-120 MG</i>	\$0 (1)
<i>colistin (colistimethate na) injection recon soln 150 mg</i>	\$0 (1) QL (30 EA per 10 days)
<i>dapsone oral tablet 100 mg, 25 mg</i>	\$0 (1)
<i>daptomycin intravenous recon soln 500 mg</i>	\$0 (1) ^
<i>EMVERM ORAL TABLET,CHEWABLE 100 MG</i>	\$0 (1) QL (12 EA per 365 days); ^
<i>ertapenem injection recon soln 1 gram</i>	\$0 (1)
<i>ethambutol oral tablet 100 mg, 400 mg</i>	\$0 (1)
<i>gentamicin in nacl (iso-osm) intravenous piggyback 100 mg/100 ml, 60 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml</i>	\$0 (1)
<i>gentamicin injection solution 40 mg/ml</i>	\$0 (1)
<i>gentamicin sulfate (ped) (pf) injection solution 20 mg/2 ml</i>	\$0 (1)
<i>hydroxychloroquine oral tablet 200 mg</i>	\$0 (1)
<i>imipenem-cilastatin intravenous recon soln 250 mg, 500 mg</i>	\$0 (1)
<i>isoniazid oral solution 50 mg/5 ml</i>	\$0 (1)
<i>isoniazid oral tablet 100 mg, 300 mg</i>	\$0 (1)
<i>ivermectin oral tablet 3 mg</i>	\$0 (1) PA; QL (20 EA per 30 days)
<i>linezolid 600 mg/300 ml-0.9% nacl single-use</i>	\$0 (1)
<i>linezolid in dextrose 5% intravenous piggyback 600 mg/300 ml</i>	\$0 (1)
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	\$0 (1) QL (1800 ML per 30 days); ^
<i>linezolid oral tablet 600 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>LINEZOLID-0.9% SODIUM CHLORIDE INTRAVENOUS PARENTERAL SOLUTION 600 MG/300 ML</i>	\$0 (1)
<i>mefloquine oral tablet 250 mg</i>	\$0 (1)
<i>meropenem intravenous recon soln 1 gram, 500 mg</i>	\$0 (1)

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MEROPENEM-0.9% SODIUM CHLORIDE INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 500 MG/50 ML	\$0 (1)
<i>metro i.v. intravenous piggyback 500 mg/100 ml</i>	\$0 (1)
<i>metronidazole in nacl (iso-os) intravenous piggyback 500 mg/100 ml</i>	\$0 (1)
<i>metronidazole oral tablet 250 mg, 500 mg</i>	\$0 (1)
<i>neomycin oral tablet 500 mg</i>	\$0 (1)
<i>nitazoxanide oral tablet 500 mg</i>	\$0 (1) QL (6 EA per 30 days); ^
<i>paromomycin oral capsule 250 mg</i>	\$0 (1)
<i>pentamidine inhalation recon soln 300 mg</i>	\$0 (1) B/D; QL (1 EA per 28 days)
<i>pentamidine injection recon soln 300 mg</i>	\$0 (1)
<i>praziquantel oral tablet 600 mg</i>	\$0 (1)
PRIFTIN ORAL TABLET 150 MG	\$0 (1)
PRIMAQUINE ORAL TABLET 26.3 MG	\$0 (1)
<i>pyrazinamide oral tablet 500 mg</i>	\$0 (1)
<i>quinine sulfate oral capsule 324 mg</i>	\$0 (1) PA
<i>rifabutin oral capsule 150 mg</i>	\$0 (1)
<i>rifampin intravenous recon soln 600 mg</i>	\$0 (1)
<i>rifampin oral capsule 150 mg, 300 mg</i>	\$0 (1)
SIRTURO ORAL TABLET 100 MG, 20 MG	\$0 (1) PA; LA; ^
STREPTOMYCIN INTRAMUSCULAR RECON SOLN 1 GRAM	\$0 (1)
SYNERCID INTRAVENOUS RECON SOLN 500 MG	\$0 (1) ^
<i>tigecycline intravenous recon soln 50 mg</i>	\$0 (1) ^
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	\$0 (1) PA; QL (280 ML per 28 days); ^
<i>tobramycin sulfate injection recon soln 1.2 gram</i>	\$0 (1)
<i>tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml</i>	\$0 (1)
TRECATOR ORAL TABLET 250 MG	\$0 (1)
<i>vancomycin hcl 1.25 gram vial outer, suv</i>	\$0 (1)

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vancomycin hcl 1.5 gram vial outer, suv	\$0 (1)
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS	
PIGGYBACK 1 GRAM/200 ML, 500 MG/100 ML, 750 MG/150 ML	\$0 (1)
VANCOMYCIN INJECTION RECON SOLN 100 GRAM	
vancomycin intravenous recon soln 1,000 mg, 10 gram, 5 gram, 500 mg, 750 mg	\$0 (1)
VANCOMYCIN INTRAVENOUS RECON SOLN 1.25 GRAM, 1.5 GRAM	
vancomycin oral capsule 125 mg	\$0 (1) QL (80 EA per 180 days)
vancomycin oral capsule 250 mg	\$0 (1) QL (160 EA per 180 days)
XIFAXAN ORAL TABLET 550 MG	\$0 (1) PA; QL (90 EA per 30 days); ^
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azithromycin intravenous recon soln 500 mg	\$0 (1)
azithromycin oral packet 1 gram	\$0 (1)
azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml	\$0 (1)
azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg	\$0 (1)
clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	\$0 (1)
clarithromycin oral tablet 250 mg, 500 mg	\$0 (1)
clarithromycin oral tablet extended release 24 hr 500 mg	\$0 (1)
DIFICID ORAL TABLET 200 MG	\$0 (1) QL (20 EA per 10 days); ^
e.e.s. 400 oral tablet 400 mg	\$0 (1)
ery-tab oral tablet,delayed release (dr/ec) 250 mg, 333 mg	\$0 (1)
erythrocin (as stearate) oral tablet 250 mg	\$0 (1)
ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	\$0 (1)
erythromycin ethylsuccinate oral tablet 400 mg	\$0 (1)

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<i>erythromycin oral capsule, delayed release (dr/ec) 250 mg</i>	\$0 (1)
<i>erythromycin oral tablet 250 mg, 500 mg</i>	\$0 (1)
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg, 333 mg, 500 mg</i>	\$0 (1)

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<i>doxy-100 intravenous recon soln 100 mg</i>	\$0 (1)
<i>doxycycline hyclate intravenous recon soln 100 mg</i>	\$0 (1)
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	\$0 (1)
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	\$0 (1)
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	\$0 (1)
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg</i>	\$0 (1)
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	\$0 (1)
<i>tetracycline oral capsule 250 mg, 500 mg</i>	\$0 (1) PA

SULFA / COV TSHUAJ UAS MUAJ FEEM CUAM TSHUAM

<i>sulfadiazine oral tablet 500 mg</i>	\$0 (1)
<i>sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5 ml</i>	\$0 (1)
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml</i>	\$0 (1)
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	\$0 (1)

TSHUAJ PENICILLINS

<i>amoxicillin oral capsule 250 mg, 500 mg</i>	\$0 (1)
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	\$0 (1)
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	\$0 (1)
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	\$0 (1)
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	\$0 (1)

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amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	\$0 (1)
amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg	\$0 (1)
amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg	\$0 (1)
ampicillin oral capsule 500 mg	\$0 (1)
ampicillin sodium injection recon soln 1 gram, 10 gram, 125 mg, 2 gram, 250 mg, 500 mg	\$0 (1)
ampicillin sodium intravenous recon soln 1 gram, 2 gram	\$0 (1)
ampicillin-sulbactam injection recon soln 1.5 gram, 15 gram, 3 gram	\$0 (1)
ampicillin-sulbactam intravenous recon soln 1.5 gram, 3 gram	\$0 (1)
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	\$0 (1)
dicloxacillin oral capsule 250 mg, 500 mg	\$0 (1)
nafcillin in dextrose iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml	\$0 (1)
nafcillin injection recon soln 1 gram, 2 gram	\$0 (1)
nafcillin injection recon soln 10 gram	\$0 (1) ^
oxacillin injection recon soln 1 gram, 10 gram, 2 gram	\$0 (1)
PENICILLIN G POT IN DEXTROSE INTRAVENOUS PIGGYBACK 2 MILLION UNIT/50 ML, 3 MILLION UNIT/50 ML	\$0 (1)
penicillin g potassium injection recon soln 20 million unit, 5 million unit	\$0 (1)
penicillin g procaine intramuscular syringe 1.2 million unit/2 ml	\$0 (1)
penicillin g sodium injection recon soln 5 million unit	\$0 (1)
penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml	\$0 (1)

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<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	\$0 (1)
<i>pfiberpen-g injection recon soln 20 million unit, 5 million unit</i>	\$0 (1)
PIPERACILLIN-TAZOBACTAM INTRAVENOUS RECON SOLN 13.5 GRAM	\$0 (1)
<i>piperacillin-tazobactam intravenous recon soln 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram</i>	\$0 (1)
<i>piperacil-tazobact 13.5 gm vl inner, muv, p/f 13.5 gram</i>	\$0 (1)
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<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	\$0 (1)
MESNEX ORAL TABLET 400 MG	\$0 (1) ^
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	\$0 (1) PA-NS; ^

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<i>abiraterone oral tablet 250 mg</i>	\$0 (1) PA-NS; QL (120 EA per 30 days)
<i>abiraterone oral tablet 500 mg</i>	\$0 (1) PA-NS; QL (60 EA per 30 days)
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	\$0 (1) PA-NS; LA; QL (60 EA per 30 days); ^
ALECensa ORAL CAPSULE 150 MG	\$0 (1) PA-NS; LA; QL (240 EA per 30 days); ^
ALUNBRIG ORAL TABLET 180 MG, 90 MG	\$0 (1) PA-NS; LA; QL (30 EA per 30 days); ^
ALUNBRIG ORAL TABLET 30 MG	\$0 (1) PA-NS; LA; QL (60 EA per 30 days); ^
ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)- 180 MG (23)	\$0 (1) PA-NS; LA; QL (30 EA per 180 days); ^
<i>anastrozole oral tablet 1 mg</i>	\$0 (1)
AUGTYRO ORAL CAPSULE 40 MG	\$0 (1) PA-NS; QL (240 EA per 30 days); ^
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	\$0 (1) PA-NS; LA; QL (30 EA per 30 days); ^

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<i>azacitidine injection recon soln 100 mg</i>	\$0 (1)	B/D; ^
<i>azathioprine oral tablet 50 mg</i>	\$0 (1)	B/D
<i>BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG</i>	\$0 (1)	PA-NS; LA; ^
<i>BENDEKA INTRAVENOUS SOLUTION 25 MG/ML</i>	\$0 (1)	B/D; ^
<i>bexarotene oral capsule 75 mg</i>	\$0 (1)	PA-NS; ^
<i>bexarotene topical gel 1 %</i>	\$0 (1)	PA-NS; QL (60 GM per 30 days); ^
<i>bicalutamide oral tablet 50 mg</i>	\$0 (1)	
<i>BORTEZOMIB INJECTION RECON SOLN 1 MG, 2.5 MG</i>	\$0 (1)	PA-NS; ^
<i>bortezomib injection recon soln 3.5 mg</i>	\$0 (1)	PA-NS; ^
<i>BOSULIF ORAL CAPSULE 100 MG</i>	\$0 (1)	PA-NS; QL (90 EA per 30 days); ^
<i>BOSULIF ORAL CAPSULE 50 MG</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>BOSULIF ORAL TABLET 100 MG</i>	\$0 (1)	PA-NS; QL (90 EA per 30 days); ^
<i>BOSULIF ORAL TABLET 400 MG, 500 MG</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>BRAFTOVI ORAL CAPSULE 75 MG</i>	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>BRUKINSA ORAL CAPSULE 80 MG</i>	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
<i>CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG</i>	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
<i>CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG</i>	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
<i>CALQUENCE ORAL CAPSULE 100 MG</i>	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
<i>CAPRELSA ORAL TABLET 100 MG</i>	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
<i>CAPRELSA ORAL TABLET 300 MG</i>	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
<i>carboplatin intravenous solution 10 mg/ml</i>	\$0 (1)	B/D
<i>cisplatin intravenous solution 1 mg/ml</i>	\$0 (1)	B/D
<i>COLUMVI INTRAVENOUS SOLUTION 1 MG/ML</i>	\$0 (1)	B/D; ^
<i>COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)</i>	\$0 (1)	PA-NS; LA; QL (56 EA per 28 days); ^
<i>COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)</i>	\$0 (1)	PA-NS; LA; QL (112 EA per 28 days); ^
<i>COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)</i>	\$0 (1)	PA-NS; LA; QL (84 EA per 28 days); ^
<i>COPIKTRA ORAL CAPSULE 15 MG, 25 MG</i>	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^

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COTELIC ORAL TABLET 20 MG	\$0 (1)	PA-NS; LA; QL (63 EA per 28 days); ^
cyclophosphamide intravenous recon soln 1 gram, 2 gram, 500 mg	\$0 (1)	B/D; ^
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 200 MG/ML	\$0 (1)	B/D; ^
cyclophosphamide oral capsule 25 mg, 50 mg	\$0 (1)	B/D
CYCLOPHOSPHAMIDE ORAL TABLET 25 MG, 50 MG	\$0 (1)	B/D
cyclosporine intravenous solution 250 mg/5 ml	\$0 (1)	
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	\$0 (1)	B/D
cyclosporine modified oral solution 100 mg/ml	\$0 (1)	B/D
cyclosporine oral capsule 100 mg, 25 mg	\$0 (1)	B/D
cytarabine injection solution 20 mg/ml	\$0 (1)	
DAURISMO ORAL TABLET 100 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
DAURISMO ORAL TABLET 25 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
docetaxel intravenous solution 160 mg/16 ml (10 mg/ml), 160 mg/8 ml (20 mg/ml), 20 mg/2 ml (10 mg/ml), 20 mg/ml (1 ml), 80 mg/4 ml (20 mg/ml), 80 mg/8 ml (10 mg/ml)	\$0 (1)	B/D; ^
doxorubicin intravenous solution 10 mg/5 ml, 2 mg/ml, 20 mg/10 ml, 50 mg/25 ml	\$0 (1)	B/D
doxorubicin, peg-liposomal intravenous suspension 2 mg/ml	\$0 (1)	B/D; ^
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	\$0 (1)	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	\$0 (1)	PA-NS
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	\$0 (1)	PA-NS
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	\$0 (1)	PA-NS
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	\$0 (1)	PA-NS
ELLENCE INTRAVENOUS SOLUTION 200 MG/100 ML, 50 MG/25 ML	\$0 (1)	B/D
ELREXFIO SUBCUTANEOUS SOLUTION 40 MG/ML	\$0 (1)	PA-NS; ^
EMCYT ORAL CAPSULE 140 MG	\$0 (1)	

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ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HR 0.75 MG, 1 MG, 4 MG	\$0 (1)	B/D
EPKINLY SUBCUTANEOUS SOLUTION 4 MG/0.8 ML, 48 MG/0.8 ML	\$0 (1)	B/D; ^
ERIVEDGE ORAL CAPSULE 150 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
ERLEADA ORAL TABLET 240 MG	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
ERLEADA ORAL TABLET 60 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
<i>erlotinib oral tablet 100 mg, 150 mg</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>erlotinib oral tablet 25 mg</i>	\$0 (1)	PA-NS; QL (90 EA per 30 days); ^
<i>etoposide intravenous solution 20 mg/ml</i>	\$0 (1)	B/D
EULEXIN ORAL CAPSULE 125 MG	\$0 (1)	^
<i>everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>everolimus (antineoplastic) oral tablet for suspension 2 mg</i>	\$0 (1)	PA-NS; QL (150 EA per 30 days); ^
<i>everolimus (antineoplastic) oral tablet for suspension 3 mg</i>	\$0 (1)	PA-NS; QL (90 EA per 30 days); ^
<i>everolimus (antineoplastic) oral tablet for suspension 5 mg</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
<i>everolimus (immunosuppressive) oral tablet 0.25 mg</i>	\$0 (1)	B/D
<i>everolimus (immunosuppressive) oral tablet 0.5 mg, 0.75 mg, 1 mg</i>	\$0 (1)	B/D; ^
<i>exemestane oral tablet 25 mg</i>	\$0 (1)	
EXKIVITY ORAL CAPSULE 40 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	\$0 (1)	PA-NS; ^
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	\$0 (1)	PA-NS
<i>fluorouracil intravenous solution 1 gram/20 ml, 2.5 gram/50 ml, 5 gram/100 ml, 500 mg/10 ml</i>	\$0 (1)	
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	\$0 (1)	PA-NS; LA; QL (21 EA per 28 days); ^
FRUZAQLA ORAL CAPSULE 1 MG	\$0 (1)	PA-NS; QL (84 EA per 28 days); ^
FRUZAQLA ORAL CAPSULE 5 MG	\$0 (1)	PA-NS; QL (21 EA per 28 days); ^

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<i>fulvestrant intramuscular syringe 250 mg/5 ml</i>	\$0 (1)	B/D; ^
GAVRETO ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
<i>gefitinib oral tablet 250 mg</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
<i>gemcitabine intravenous recon soln 1 gram, 2 gram, 200 mg</i>	\$0 (1)	B/D
<i>gemcitabine intravenous solution 1 gram/26.3 ml (38 mg/ml), 2 gram/52.6 ml (38 mg/ml), 200 mg/5.26 ml (38 mg/ml)</i>	\$0 (1)	B/D
GEMCITABINE INTRAVENOUS SOLUTION 100 MG/ML	\$0 (1)	B/D
<i>gengraf oral capsule 100 mg, 25 mg</i>	\$0 (1)	B/D
<i>gengraf oral solution 100 mg/ml</i>	\$0 (1)	B/D
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
GLEOSTINE ORAL CAPSULE 10 MG, 40 MG	\$0 (1)	
GLEOSTINE ORAL CAPSULE 100 MG	\$0 (1)	^
<i>hydroxyurea oral capsule 500 mg</i>	\$0 (1)	
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	\$0 (1)	PA-NS; LA; QL (21 EA per 28 days); ^
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	\$0 (1)	PA-NS; LA; QL (21 EA per 28 days); ^
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
IDHIFA ORAL TABLET 100 MG, 50 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
<i>imatinib oral tablet 100 mg</i>	\$0 (1)	PA-NS; QL (180 EA per 30 days); ^
<i>imatinib oral tablet 400 mg</i>	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
IMBRUVICA ORAL CAPSULE 140 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
IMBRUVICA ORAL CAPSULE 70 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
IMBRUVICA ORAL SUSPENSION 70 MG/ML	\$0 (1)	PA-NS; LA; QL (216 ML per 27 days); ^
IMBRUVICA ORAL TABLET 420 MG, 560 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
INLYTA ORAL TABLET 1 MG	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
INLYTA ORAL TABLET 5 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
INQOVI ORAL TABLET 35-100 MG	\$0 (1)	PA-NS; LA; QL (5 EA per 28 days); ^
INREBIC ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^

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<i>irinotecan intravenous solution 100 mg/5 ml, 300 mg/15 ml, 40 mg/2 ml, 500 mg/25 ml</i>	\$0 (1)	B/D
IWILFIN ORAL TABLET 192 MG	\$0 (1)	PA-NS; LA; QL (240 EA per 30 days); ^
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
JAYPIRCA ORAL TABLET 100 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
JAYPIRCA ORAL TABLET 50 MG	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
KADCYLA INTRAVENOUS RECON SOLN 100 MG, 160 MG	\$0 (1)	B/D; ^
KEYTRUDA INTRAVENOUS SOLUTION 25 MG/ML	\$0 (1)	PA-NS; ^
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG	\$0 (1)	PA-NS; QL (49 EA per 28 days); ^
KISQALI FEMARA CO-PACK ORAL TABLET 400 MG/DAY(200 MG X 2)-2.5 MG	\$0 (1)	PA-NS; QL (70 EA per 28 days); ^
KISQALI FEMARA CO-PACK ORAL TABLET 600 MG/DAY(200 MG X 3)-2.5 MG	\$0 (1)	PA-NS; QL (91 EA per 28 days); ^
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	\$0 (1)	PA-NS; QL (21 EA per 28 days); ^
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	\$0 (1)	PA-NS; QL (42 EA per 28 days); ^
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	\$0 (1)	PA-NS; QL (63 EA per 28 days); ^
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	\$0 (1)	PA; ^
KRAZATI ORAL TABLET 200 MG	\$0 (1)	PA-NS; QL (180 EA per 30 days); ^
<i>lapatinib oral tablet 250 mg</i>	\$0 (1)	PA-NS; QL (180 EA per 30 days); ^
<i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg</i>	\$0 (1)	PA-NS; LA; QL (28 EA per 28 days); ^
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
<i>letrozole oral tablet 2.5 mg</i>	\$0 (1)	
LEUKERAN ORAL TABLET 2 MG	\$0 (1)	

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<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	\$0 (1)	PA-NS
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	\$0 (1)	PA-NS; LA; ^
LORBRENA ORAL TABLET 100 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
LORBRENA ORAL TABLET 25 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
LUMAKRAS ORAL TABLET 120 MG	\$0 (1)	PA-NS; LA; ^
LUMAKRAS ORAL TABLET 320 MG	\$0 (1)	PA-NS; ^
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	\$0 (1)	PA-NS; ^
LYNPARZA ORAL TABLET 100 MG, 150 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
LYSODREN ORAL TABLET 500 MG	\$0 (1)	^
LYTGOBI ORAL TABLET 4 MG, 4 MG (4X 4 MG TB), 4 MG (5X 4 MG TB)	\$0 (1)	PA-NS; ^
MATULANE ORAL CAPSULE 50 MG	\$0 (1)	LA; ^
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml)</i>	\$0 (1)	
<i>megestrol oral suspension 625 mg/5 ml (125 mg/ml)</i>	\$0 (1)	PA
<i>megestrol oral tablet 20 mg, 40 mg</i>	\$0 (1)	
MEKINIST ORAL RECON SOLN 0.05 MG/ML	\$0 (1)	PA-NS; QL (1200 ML per 30 days); ^
MEKINIST ORAL TABLET 0.5 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
MEKINIST ORAL TABLET 2 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
MEKTOVI ORAL TABLET 15 MG	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
<i>mercaptopurine oral tablet 50 mg</i>	\$0 (1)	
<i>methotrexate sodium (pf) injection recon soln 1 gram</i>	\$0 (1)	B/D
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	\$0 (1)	B/D
<i>methotrexate sodium injection solution 25 mg/ml</i>	\$0 (1)	B/D
<i>methotrexate sodium oral tablet 2.5 mg</i>	\$0 (1)	
MONJUVI INTRAVENOUS RECON SOLN 200 MG	\$0 (1)	PA-NS; ^
<i>mycophenolate mofetil oral capsule 250 mg</i>	\$0 (1)	B/D

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<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	\$0 (1)	B/D; ^
<i>mycophenolate mofetil oral tablet 500 mg</i>	\$0 (1)	B/D
<i>mycophenolate sodium oral tablet, delayed release (dr/ec) 180 mg, 360 mg</i>	\$0 (1)	B/D
<i>mycophenolic acid dr 180 mg tb</i>	\$0 (1)	mycophenolate sodium = mycophenolic acid; B/D
<i>mycophenolic acid dr 360 mg tb</i>	\$0 (1)	mycophenolate sodium = mycophenolic acid; B/D
NERLYNX ORAL TABLET 40 MG	\$0 (1)	PA-NS; LA; ^
<i>nilutamide oral tablet 150 mg</i>	\$0 (1)	^
<i>NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG</i>	\$0 (1)	PA-NS; QL (3 EA per 28 days); ^
<i>NUBEQA ORAL TABLET 300 MG</i>	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
<i>NULOJIX INTRAVENOUS RECON SOLN 250 MG</i>	\$0 (1)	^
<i>octreotide acetate injection solution 1,000 mcg/ml, 500 mcg/ml</i>	\$0 (1)	PA; ^
<i>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</i>	\$0 (1)	PA
<i>octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)</i>	\$0 (1)	PA
ODOMZO ORAL CAPSULE 200 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
ONUREG ORAL TABLET 200 MG, 300 MG	\$0 (1)	PA-NS; LA; QL (14 EA per 28 days)
ORGOVYX ORAL TABLET 120 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 28 days); ^
ORSERDU ORAL TABLET 345 MG	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
ORSERDU ORAL TABLET 86 MG	\$0 (1)	PA-NS; QL (90 EA per 30 days); ^
<i>oxaliplatin intravenous recon soln 100 mg, 50 mg</i>	\$0 (1)	B/D; ^
<i>oxaliplatin intravenous solution 100 mg/20 ml, 200 mg/40 ml, 50 mg/10 ml (5 mg/ml)</i>	\$0 (1)	B/D
<i>paclitaxel intravenous concentrate 6 mg/ml</i>	\$0 (1)	B/D

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PACLITAXEL PROTEIN-BOUND INTRAVENOUS SUSPENSION FOR RECONSTITUTION 100 MG	\$0 (1)	B/D; ^
<i>paraplatin intravenous solution 10 mg/ml</i>	\$0 (1)	B/D
<i>pazopanib oral tablet 200 mg</i>	\$0 (1)	PA-NS; QL (120 EA per 30 days); ^
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	\$0 (1)	PA-NS; LA; ^
<i>pemetrexed disodium 750 mg vl</i>	\$0 (1)	B/D; ^
<i>pemetrexed disodium intravenous recon soln 1,000 mg, 500 mg</i>	\$0 (1)	B/D; ^
<i>pemetrexed disodium intravenous recon soln 100 mg</i>	\$0 (1)	B/D
PEMETREXED DISODIUM INTRAVENOUS RECON SOLN 750 MG	\$0 (1)	B/D; ^
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1), 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	\$0 (1)	PA-NS; ^
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	\$0 (1)	PA-NS; LA; QL (21 EA per 28 days); ^
PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG	\$0 (1)	B/D
PURIXAN ORAL SUSPENSION 20 MG/ML	\$0 (1)	^
QINLOCK ORAL TABLET 50 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
RETEVMO ORAL CAPSULE 40 MG	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
RETEVMO ORAL CAPSULE 80 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
REZLIDHIA ORAL CAPSULE 150 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
REZUROCK ORAL TABLET 200 MG	\$0 (1)	PA; LA; QL (30 EA per 30 days); ^
ROZLYTREK ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; LA; QL (150 EA per 30 days); ^
ROZLYTREK ORAL CAPSULE 200 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
ROZLYTREK ORAL PELLETS IN PACKET 50 MG	\$0 (1)	PA-NS; QL (336 EA per 28 days); ^
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
RYDAPT ORAL CAPSULE 25 MG	\$0 (1)	PA-NS; QL (224 EA per 28 days); ^
SANDIMMUNE ORAL SOLUTION 100 MG/ML	\$0 (1)	B/D
SCEMBLIX ORAL TABLET 20 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^

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SCEMBLIX ORAL TABLET 40 MG	\$0 (1)	PA-NS; QL (300 EA per 30 days); ^
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	\$0 (1)	PA; LA; ^
<i>sirolimus oral solution 1 mg/ml</i>	\$0 (1)	B/D; ^
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	\$0 (1)	B/D
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	\$0 (1)	
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	\$0 (1)	PA-NS; ^
<i>sorafenib oral tablet 200 mg</i>	\$0 (1)	PA-NS; QL (120 EA per 30 days); ^
SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 80 MG	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
SPRYCEL ORAL TABLET 20 MG, 70 MG	\$0 (1)	PA-NS; QL (60 EA per 30 days); ^
STIVARGA ORAL TABLET 40 MG	\$0 (1)	PA-NS; LA; QL (84 EA per 28 days); ^
<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
TABLOID ORAL TABLET 40 MG	\$0 (1)	
TABRECTA ORAL TABLET 150 MG, 200 MG	\$0 (1)	PA-NS; ^
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	\$0 (1)	B/D
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	\$0 (1)	PA-NS; QL (840 EA per 28 days); ^
TAGRISSO ORAL TABLET 40 MG, 80 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
TALVEY SUBCUTANEOUS SOLUTION 2 MG/ML, 40 MG/ML	\$0 (1)	PA-NS; ^
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	\$0 (1)	PA-NS; QL (30 EA per 30 days); ^
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	\$0 (1)	
TASIGNA ORAL CAPSULE 150 MG, 200 MG	\$0 (1)	PA-NS; QL (112 EA per 28 days); ^
TASIGNA ORAL CAPSULE 50 MG	\$0 (1)	PA-NS; QL (120 EA per 30 days); ^
TAZVERIK ORAL TABLET 200 MG	\$0 (1)	PA-NS; LA; ^

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TECENTRIQ INTRAVENOUS SOLUTION 1,200 MG/20 ML (60 MG/ML), 840 MG/14 ML (60 MG/ML)	\$0 (1)	PA-NS; ^
TEPMETKO ORAL TABLET 225 MG	\$0 (1)	PA-NS; LA; ^
THALOMID ORAL CAPSULE 100 MG, 50 MG	\$0 (1)	PA-NS; LA; QL (28 EA per 28 days); ^
THALOMID ORAL CAPSULE 150 MG, 200 MG	\$0 (1)	PA-NS; LA; QL (56 EA per 28 days); ^
TIBSOVO ORAL TABLET 250 MG	\$0 (1)	PA-NS; LA; ^
<i>toremifene oral tablet 60 mg</i>	\$0 (1)	
TRAZIMERA INTRAVENOUS RECON SOLN 150 MG, 420 MG	\$0 (1)	PA-NS; ^
<i>tretinooin (antineoplastic) oral capsule 10 mg</i>	\$0 (1)	^
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	\$0 (1)	
TRUQAP ORAL TABLET 160 MG, 200 MG	\$0 (1)	PA-NS; QL (64 EA per 28 days); ^
TRUXIMA INTRAVENOUS SOLUTION 10 MG/ML	\$0 (1)	PA-NS; ^
TUKYSA ORAL TABLET 150 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
TUKYSA ORAL TABLET 50 MG	\$0 (1)	PA-NS; LA; QL (300 EA per 30 days); ^
TURALIO ORAL CAPSULE 125 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	\$0 (1)	PA-NS; QL (56 EA per 28 days); ^
VENCLEXTA ORAL TABLET 10 MG, 50 MG	\$0 (1)	PA-NS; LA; QL (112 EA per 28 days)
VENCLEXTA ORAL TABLET 100 MG	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	\$0 (1)	PA-NS; LA; QL (42 EA per 28 days); ^
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
<i>vincristine intravenous solution 1 mg/ml, 2 mg/2 ml</i>	\$0 (1)	
<i>vinorelbine intravenous solution 10 mg/ml, 50 mg/5 ml</i>	\$0 (1)	B/D
VITRAKVI ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
VITRAKVI ORAL CAPSULE 25 MG	\$0 (1)	PA-NS; LA; QL (180 EA per 30 days); ^
VITRAKVI ORAL SOLUTION 20 MG/ML	\$0 (1)	PA-NS; LA; QL (300 ML per 30 days); ^
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
VONJO ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
VOTRIENT ORAL TABLET 200 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^

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WELIREG ORAL TABLET 40 MG	\$0 (1)	PA-NS; LA; ^
XALKORI ORAL CAPSULE 200 MG, 250 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
XALKORI ORAL PELLET 150 MG	\$0 (1)	PA-NS; QL (180 EA per 30 days); ^
XALKORI ORAL PELLET 20 MG, 50 MG	\$0 (1)	PA-NS; QL (120 EA per 30 days); ^
XATMEP ORAL SOLUTION 2.5 MG/ML	\$0 (1)	
XERMELO ORAL TABLET 250 MG	\$0 (1)	PA; LA; QL (84 EA per 28 days); ^
XOSPATA ORAL TABLET 40 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
XPOVIO ORAL TABLET 100 MG/WEEK (20 MG X 5), 100 MG/WEEK (50 MG X 2), 40MG TWICE WEEK (40 MG X 2), 40MG TWICE WEEK (80 MG/WEEK), 80 MG/WEEK (20 MG X 4), 80 MG/WEEK (40 MG X 2)	\$0 (1)	PA-NS; LA; QL (8 EA per 28 days); ^
XPOVIO ORAL TABLET 40 MG/WEEK (20 MG X 2), 40 MG/WEEK (40 MG X 1), 60 MG/WEEK (20 MG X 3), 60 MG/WEEK (60 MG X 1)	\$0 (1)	PA-NS; LA; QL (4 EA per 28 days); ^
XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK)	\$0 (1)	PA-NS; LA; QL (24 EA per 28 days); ^
XPOVIO ORAL TABLET 80MG TWICE WEEK (160 MG/WEEK)	\$0 (1)	PA-NS; LA; QL (32 EA per 28 days); ^
XTANDI ORAL CAPSULE 40 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
XTANDI ORAL TABLET 40 MG	\$0 (1)	PA-NS; LA; QL (120 EA per 30 days); ^
XTANDI ORAL TABLET 80 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
ZEJULA ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
ZEJULA ORAL TABLET 100 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^
ZEJULA ORAL TABLET 200 MG, 300 MG	\$0 (1)	PA-NS; LA; QL (30 EA per 30 days); ^
ZELBORAF ORAL TABLET 240 MG	\$0 (1)	PA-NS; LA; QL (240 EA per 30 days); ^
ZIRABEV INTRAVENOUS SOLUTION 25 MG/ML	\$0 (1)	PA-NS; ^
ZOLINZA ORAL CAPSULE 100 MG	\$0 (1)	PA-NS; QL (120 EA per 30 days); ^
ZYDELIG ORAL TABLET 100 MG, 150 MG	\$0 (1)	PA-NS; LA; QL (60 EA per 30 days); ^
ZYKADIA ORAL TABLET 150 MG	\$0 (1)	PA-NS; LA; QL (90 EA per 30 days); ^

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MUAJ ROJ**

**COV TSHUAJ KHO HLAB NTSHA HAUV LUB PLAWV NTAU
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CORLANOR ORAL SOLUTION 5 MG/5 ML	\$0 (1)	QL (450 ML per 30 days)
CORLANOR ORAL TABLET 5 MG, 7.5 MG	\$0 (1)	QL (60 EA per 30 days)
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	\$0 (1)	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	\$0 (1)	QL (30 EA per 30 days)
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	\$0 (1)	QL (60 EA per 30 days)
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	\$0 (1)	
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	\$0 (1)	QL (30 EA per 30 days)
VYNDAQEL ORAL CAPSULE 20 MG	\$0 (1)	PA

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<i>amiodarone intravenous solution 50 mg/ml</i>	\$0 (1)
<i>amiodarone intravenous syringe 150 mg/3 ml</i>	\$0 (1)
<i>amiodarone oral tablet 100 mg, 200 mg, 400 mg</i>	\$0 (1)
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	\$0 (1)
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	\$0 (1)
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	\$0 (1)
MULTAQ ORAL TABLET 400 MG	\$0 (1)
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	\$0 (1)
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	\$0 (1)
<i>propafenone oral capsule,extended release 12 hr 225 mg, 325 mg, 425 mg</i>	\$0 (1)
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	\$0 (1)
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	\$0 (1)
<i>sorine oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	\$0 (1)

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sotalol af oral tablet 120 mg, 160 mg, 80 mg	\$0 (1)	
sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg	\$0 (1)	
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ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HR 20 MG, 40 MG, 60 MG	\$0 (1)	ST; QL (30 EA per 30 days); ^
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	\$0 (1)	QL (30 EA per 30 days)
atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	\$0 (1)	QL (30 EA per 30 days)
cholestyramine (with sugar) oral powder 4 gram	\$0 (1)	
cholestyramine (with sugar) oral powder in packet 4 gram	\$0 (1)	
cholestyramine light oral powder 4 gram	\$0 (1)	
cholestyramine light oral powder in packet 4 gram	\$0 (1)	
cholestyramine-aspartame oral powder in packet 4 gram	\$0 (1)	
colesevelam oral powder in packet 3.75 gram	\$0 (1)	
colesevelam oral tablet 625 mg	\$0 (1)	
colestipol oral granules 5 gram	\$0 (1)	
colestipol oral packet 5 gram	\$0 (1)	
colestipol oral tablet 1 gram	\$0 (1)	
EZALLOR SPRINKLE ORAL CAPSULE, SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG	\$0 (1)	ST; QL (30 EA per 30 days)
ezetimibe oral tablet 10 mg	\$0 (1)	
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10- 40 mg, 10-80 mg	\$0 (1)	QL (30 EA per 30 days)
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	\$0 (1)	
fenofibrate nanocrystallized oral tablet 145 mg, 48 mg	\$0 (1)	
fenofibrate oral tablet 160 mg, 54 mg	\$0 (1)	
fenofibric acid (choline) oral capsule, delayed release(dr/ec) 135 mg, 45 mg	\$0 (1)	
fluvastatin oral capsule 20 mg, 40 mg	\$0 (1)	QL (60 EA per 30 days)

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<i>fluvastatin oral tablet extended release 24 hr 80 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>gemfibrozil oral tablet 600 mg</i>	\$0 (1)	
<i>LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG</i>	\$0 (1)	QL (30 EA per 30 days)
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML, 75 MG/ML</i>	\$0 (1)	PA
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>prevalite oral powder 4 gram</i>	\$0 (1)	
<i>prevalite oral powder in packet 4 gram</i>	\$0 (1)	
<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>VASCEPA ORAL CAPSULE 0.5 GRAM, 1 GRAM</i>	\$0 (1)	
<i>ZYPITAMAG ORAL TABLET 2 MG, 4 MG</i>	\$0 (1)	ST; QL (30 EA per 30 days)

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<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	\$0 (1)	
<i>BRILINTA ORAL TABLET 60 MG, 90 MG</i>	\$0 (1)	
<i>cilostazol oral tablet 100 mg, 50 mg</i>	\$0 (1)	
<i>clopidogrel oral tablet 75 mg</i>	\$0 (1)	
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	\$0 (1)	PA
<i>DOPTELET (10 TAB PACK) ORAL TABLET 20 MG</i>	\$0 (1)	PA; LA; ^
<i>DOPTELET (15 TAB PACK) ORAL TABLET 20 MG</i>	\$0 (1)	PA; LA; ^
<i>DOPTELET (30 TAB PACK) ORAL TABLET 20 MG</i>	\$0 (1)	PA; LA; ^
<i>ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)</i>	\$0 (1)	QL (74 EA per 30 days)
<i>ELIQUIS ORAL TABLET 2.5 MG</i>	\$0 (1)	QL (60 EA per 30 days)
<i>ELIQUIS ORAL TABLET 5 MG</i>	\$0 (1)	QL (74 EA per 30 days)

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<i>enoxaparin subcutaneous solution 300 mg/3 ml</i>	\$0 (1)	
<i>enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml</i>	\$0 (1)	
<i>fondaparinux subcutaneous syringe 10 mg/0.8 ml, 5 mg/0.4 ml, 7.5 mg/0.6 ml</i>	\$0 (1)	^
<i>fondaparinux subcutaneous syringe 2.5 mg/0.5 ml</i>	\$0 (1)	
<i>heparin (porcine) in 5 % dex intravenous parenteral solution 20,000 unit/500 ml (40 unit/ml), 25,000 unit/250 ml(100 unit/ml), 25,000 unit/500 ml (50 unit/ml)</i>	\$0 (1)	
<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>	\$0 (1)	B/D
<i>HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML</i>	\$0 (1)	
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	\$0 (1)	
<i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	\$0 (1)	
<i>pentoxifylline oral tablet extended release 400 mg</i>	\$0 (1)	
<i>prasugrel oral tablet 10 mg, 5 mg</i>	\$0 (1)	
<i>PROMACTA ORAL POWDER IN PACKET 12.5 MG</i>	\$0 (1)	PA; LA; QL (360 EA per 30 days); ^
<i>PROMACTA ORAL POWDER IN PACKET 25 MG</i>	\$0 (1)	PA; LA; QL (180 EA per 30 days); ^
<i>PROMACTA ORAL TABLET 12.5 MG, 25 MG</i>	\$0 (1)	PA; LA; QL (30 EA per 30 days); ^
<i>PROMACTA ORAL TABLET 50 MG, 75 MG</i>	\$0 (1)	PA; LA; QL (60 EA per 30 days); ^
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	\$0 (1)	
<i>XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)</i>	\$0 (1)	QL (51 EA per 30 days)
<i>XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML</i>	\$0 (1)	QL (620 ML per 30 days)
<i>XARELTO ORAL TABLET 10 MG, 20 MG</i>	\$0 (1)	QL (30 EA per 30 days)

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XARELTO ORAL TABLET 15 MG, 2.5 MG	\$0 (1)	QL (60 EA per 30 days)
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acebutolol oral capsule 200 mg, 400 mg	\$0 (1)	
aliskiren oral tablet 150 mg, 300 mg	\$0 (1)	
amiloride oral tablet 5 mg	\$0 (1)	
amiloride-hydrochlorothiazide oral tablet 5-50 mg	\$0 (1)	
amlodipine oral tablet 10 mg, 2.5 mg, 5 mg	\$0 (1)	
amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	\$0 (1)	QL (30 EA per 30 days)
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5- 20 mg, 5-40 mg	\$0 (1)	QL (30 EA per 30 days)
amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5- 160 mg, 5-320 mg	\$0 (1)	QL (30 EA per 30 days)
amlodipine-valsartan-hcthiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	\$0 (1)	
atenolol oral tablet 100 mg, 25 mg, 50 mg	\$0 (1)	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	\$0 (1)	
benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	\$0 (1)	
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20- 12.5 mg, 20-25 mg, 5-6.25 mg	\$0 (1)	
bisoprolol fumarate oral tablet 10 mg, 5 mg	\$0 (1)	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5- 6.25 mg, 5-6.25 mg	\$0 (1)	
bumetanide injection solution 0.25 mg/ml	\$0 (1)	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	\$0 (1)	
candesartan oral tablet 16 mg, 4 mg, 8 mg	\$0 (1)	QL (60 EA per 30 days)
candesartan oral tablet 32 mg	\$0 (1)	QL (30 EA per 30 days)
candesartan-hydrochlorothiazid oral tablet 16-12.5 mg	\$0 (1)	QL (60 EA per 30 days)
candesartan-hydrochlorothiazid oral tablet 32-12.5 mg, 32- 25 mg	\$0 (1)	QL (30 EA per 30 days)

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<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	\$0 (1)
<i>cartia xt oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	\$0 (1)
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	\$0 (1)
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	\$0 (1)
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	\$0 (1)
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	\$0 (1)
<i>diltiazem hcl intravenous solution 5 mg/ml</i>	\$0 (1)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	\$0 (1)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	\$0 (1)
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	\$0 (1)
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	\$0 (1)
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	\$0 (1)
<i>diltiazem hcl oral tablet extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	\$0 (1)
<i>dilt-xr oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	\$0 (1)
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	\$0 (1)
<i>EDARBI ORAL TABLET 40 MG, 80 MG</i>	\$0 (1) QL (30 EA per 30 days)
<i>EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG</i>	\$0 (1) QL (30 EA per 30 days)
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	\$0 (1)
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	\$0 (1)
<i>elplerenone oral tablet 25 mg, 50 mg</i>	\$0 (1)

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<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	\$0 (1)
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20- 12.5 mg</i>	\$0 (1)
<i>furosemide injection solution 10 mg/ml</i>	\$0 (1)
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	\$0 (1)
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	\$0 (1)
<i>guanfacine oral tablet 1 mg, 2 mg</i>	\$0 (1) PA
<i>hydralazine injection solution 20 mg/ml</i>	\$0 (1)
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	\$0 (1)
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	\$0 (1)
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	\$0 (1)
<i>KERENDIA ORAL TABLET 10 MG, 20 MG</i>	\$0 (1) QL (30 EA per 30 days)
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	\$0 (1)
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	\$0 (1)
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20- 12.5 mg, 20-25 mg</i>	\$0 (1)
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100- 25 mg, 50-12.5 mg</i>	\$0 (1)
<i>matzim la oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	\$0 (1)
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)

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<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	\$0 (1)
<i>metoprolol tartrate intravenous solution 5 mg/5 ml</i>	\$0 (1)
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>metyrosine oral capsule 250 mg</i>	\$0 (1) PA; ^
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	\$0 (1)
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	\$0 (1)
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	\$0 (1)
<i>nebivolol oral tablet 10 mg, 2.5 mg, 5 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>nebivolol oral tablet 20 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>nicardipine oral capsule 20 mg, 30 mg</i>	\$0 (1)
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	\$0 (1)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	\$0 (1)
<i>nimodipine oral capsule 30 mg</i>	\$0 (1)
<i>nisoldipine oral tablet extended release 24 hr 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	\$0 (1)
<i>NYMALIZE ORAL SOLUTION 60 MG/10 ML</i>	\$0 (1) ^
<i>NYMALIZE ORAL SYRINGE 30 MG/5 ML, 60 MG/10 ML</i>	\$0 (1) ^
<i>olmesartan oral tablet 20 mg, 40 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>olmesartan oral tablet 5 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>olmesartan-amlodipin-hcthiazid 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</i>	\$0 (1) QL (30 EA per 30 days)
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	\$0 (1)
<i>pindolol oral tablet 10 mg, 5 mg</i>	\$0 (1)
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	\$0 (1)

Koj muaj peev xwm nrhiav txheej xwm txog cov cim thiab cov niam ntawv luv nyob rau lub kem ntawv no seb nws txhais tau li cas uas yog pib nkag mus rau lub kem ntawv no.

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<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	\$0 (1)
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	\$0 (1)
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	\$0 (1)
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	\$0 (1)
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20- 12.5 mg, 20-25 mg</i>	\$0 (1)
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	\$0 (1)
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (1)
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	\$0 (1)
<i>taztia xt oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	\$0 (1)
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80- 10 mg, 80-5 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80- 25 mg</i>	\$0 (1) QL (30 EA per 30 days)
<i>telmisartan-hydrochlorothiazid oral tablet 80-12.5 mg</i>	\$0 (1) QL (60 EA per 30 days)
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	\$0 (1)
<i>tiadylt er oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	\$0 (1)
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	\$0 (1)
<i>torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	\$0 (1)
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	\$0 (1)
<i>treprostин sodium injection solution 1 mg/ml, 10 mg/ml, 2.5 mg/ml, 5 mg/ml</i>	\$0 (1) PA-NS; ^
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	\$0 (1)
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75- 50 mg</i>	\$0 (1)

Koj muaj peev xwm nrhiav txheej xwm txog cov cim thiab cov niam ntawv luv nyob rau lub kem ntawv no seb nws txhais tau li cas uas yog pib nkag mus rau lub kem ntawv no.

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<i>valsartan oral tablet 160 mg, 40 mg, 80 mg</i>	\$0 (1)	QL (60 EA per 30 days)
<i>valsartan oral tablet 320 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	\$0 (1)	QL (30 EA per 30 days)
<i>verapamil intravenous solution 2.5 mg/ml</i>	\$0 (1)	
<i>verapamil intravenous syringe 2.5 mg/ml</i>	\$0 (1)	
<i>verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg</i>	\$0 (1)	
<i>verapamil oral capsule, ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	\$0 (1)	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	\$0 (1)	
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	\$0 (1)	
KUA QAUB NITRATES		
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	\$0 (1)	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	\$0 (1)	
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	\$0 (1)	
<i>nitro-bid transdermal ointment 2 %</i>	\$0 (1)	
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	\$0 (1)	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	\$0 (1)	

Koj muaj peev xwm nrhiav txheej xwm txog cov cim thiab cov niam ntawv luv nyob rau lub kem ntawv no seb nws txhais tau li cas uas yog pib nkag mus rau lub kem ntawv no.

06/01/2024

D. Daim Ntawv Qhia Txiv txog Cov Tshuaj Uas Tau Txais Kev Duav Roos

Nyob rau nqe no, koj tuaj yeem nrhiav tshuaj uas yog nrhiav raws tus niam ntawv ntawm lub npe. Qhov no yuav qhia koj txog cov naj npawb phab ntawv uas koj muaj peev xwm nrhiav tau cov txheej xwm txog kev duav roos ntxiv.

<i>abacavir</i>	89	<i>allopurinol</i>	75	<i>apri</i>	53
<i>abacavir-lamivudine</i>	89	<i>alosetron</i>	71	<i>APTIOM</i>	26
<i>ABELCET</i>	93	<i>ALPHAGAN P</i>	60	<i>APTIVUS</i>	89
<i>ABILIFY MAINTENA</i>	18	<i>alprazolam</i>	18	<i>ARALAST NP</i>	63
<i>abiraterone</i>	100	<i>ALREX</i>	61	<i>aranelle (28)</i>	53
<i>ABRYSVO</i>	42	<i>altavera (28)</i>	52	<i>ARCALYST</i>	46
<i>acamprosate</i>	63	<i>ALTOPREV</i>	113	<i>AREXVY (PF)</i>	42
<i>acarbose</i>	81	<i>ALUNBRIG</i>	100	<i>arformoterol</i>	66
<i>accutane</i>	51	<i>alyacen 1/35 (28)</i>	52	<i>ARIKAYCE</i>	94
<i>acebutolol</i>	116	<i>alyacen 7/7/7 (28)</i>	53	<i>ariprazole</i>	18
<i>acetaminophen-codeine</i>	32	<i>alyq</i>	66	<i>ARISTADA</i>	18
<i>acetazolamide</i>	59, 60	<i>amabelz</i>	57	<i>ARISTADA INITIO</i>	18
<i>acetic acid</i>	38, 63	<i>amantadine hcl</i>	89	<i>armodafinil</i>	18
<i>acetylcysteine</i>	66	<i>ambrisentan</i>	66	<i>ARNUITY ELLIPTA</i>	66
<i>acitretin</i>	51	<i>amikacin</i>	94	<i>asenapine maleate</i>	19
<i>ACTEMRA</i>	76	<i>amiloride</i>	116	<i>aspirin-dipyridamole</i>	114
<i>ACTEMRA ACTPEN</i>	76	<i>amiloride-hydrochlorothiazide</i>	116	<i>ASSURE ID INSULIN SAFETY</i>	17
<i>ACTHIB (PF)</i>	42	<i>amiodarone</i>	112	<i>atazanavir</i>	89
<i>ACTIMMUNE</i>	46	<i>amitriptyline</i>	18	<i>atenolol</i>	116
<i>acyclovir</i>	89	<i>amlodipine</i>	116	<i>atenolol-chlorthalidone</i>	116
<i>acyclovir sodium</i>	89	<i>amlodipine-atorvastatin</i>	113	<i>atomoxetine</i>	19
<i>ADACEL(TDAP</i>		<i>amlodipine-benazepril</i>	116	<i>atorvastatin</i>	113
<i>ADOLESN/ADULT)(PF)</i>	42	<i>amlodipine-olmesartan</i>	116	<i>atovaquone</i>	94
<i>adefovir</i>	89	<i>amlodipine-valsartan</i>	116	<i>atovaquone-proguanil</i>	94
<i>ADEMPAS</i>	66	<i>amlodipine-valsartan-hcthiazid</i>	116	<i>atropine</i>	59
<i>adrenalin</i>	70	<i>ammonium lactate</i>	47	<i>ATROPINE SULFATE (PF)</i>	59
<i>ADVAIR HFA</i>	66	<i>amnesteem</i>	52	<i>ATROVENT HFA</i>	67
<i>AIMOVIG AUTOINJECTOR</i>	37	<i>amoxapine</i>	18	<i>aubra eq</i>	53
<i>AKEEGA</i>	100	<i>amoxicillin</i>	98	<i>AUGTYRO</i>	100
<i>ak-poly-bac</i>	60	<i>amoxicillin-pot clavulanate</i>	98, 99	<i>aurovela fe 1.5/30 (28)</i>	53
<i>ala-cort</i>	48	<i>amphotericin b</i>	93	<i>aurovela fe 1-20 (28)</i>	53
<i>albendazole</i>	94	<i>ampicillin</i>	99	<i>AUSTEDO</i>	35
<i>albuterol sulfate</i>	66	<i>ampicillin sodium</i>	99	<i>AUSTEDO XR</i>	36
<i>ALBUTEROL SULFATE</i>	66	<i>ampicillin-sulbactam</i>	99	<i>AUSTEDO XR TITRATION</i>	
<i>alclometasone</i>	48	<i>anagrelide</i>	63	<i>KT(WK1-4)</i>	36
<i>alcohol pads</i>	81	<i>anastrozole</i>	100	<i>AUVELITY</i>	19
<i>ALDURAZYME</i>	79	<i>ANORO ELLIPTA</i>	66	<i>aviane</i>	53
<i>ALECENSA</i>	100	<i>APOKYN</i>	31	<i>AYVAKIT</i>	100
<i>alendronate</i>	75, 76	<i>apomorphine</i>	31	<i>azacitidine</i>	101
<i>alfuzosin</i>	16	<i>apraclonidine</i>	60	<i>azathioprine</i>	101
<i>aliskiren</i>	116	<i>aprepitant</i>	71	<i>azelaic acid</i>	52

azelastine	38, 59	breyna	67	caspofungin	93
azithromycin	97	BREZTRI AEROSPHERE	67	CAYSTON	94
aztreonam	94	BRILINTA	114	cefaclor	86
azurette (28)	53	brimonidine	60	cefadroxil	86
bacitracin	60	brinzolamide	62	cefazolin	87
bacitracin-polymyxin b	60	BRIVIACT	26	cefazolin in dextrose (iso-os)	87
baclofen	32	bromfenac	60	CEFAZOLIN IN DEXTROSE (ISO-	
balsalazide	71	bromocriptine	31	OS)	87
BALVERSA	101	BROMSITE	60	cefdinir	87
BARACLUDE	89	BRUKINSA	101	cefeprazole	87
BASAGLAR KWIKPEN U-100		budesonide	67, 71	CEFEPRAZOLE IN DEXTROSE 5 %	87
INSULIN	81	bumetanide	116	cefeprazole in dextrose, iso-osm	87
BCG VACCINE, LIVE (PF)	42	buprenorphine hcl	32	cefixime	87
BELSOMRA	19	buprenorphine-naloxone	34	cefoxitin	87
benazepril	116	bupropion hcl	19	cefoxitin in dextrose, iso-osm	87
benazepril-hydrochlorothiazide	116	bupropion hcl (smoking deter)	65	cefpodoxime	87
BENDEKA	101	buspirone	19	cefpodoxime	87
BENLYSTA	76	butorphanol	34	ceftazidime	87
benztropine	31	BYDUREON BCISE	81	ceftazidime	87
BERINERT	67	cabergoline	79	CEFTRIAXONE	88
BESIVANCE	60	CABOMETYX	101	ceftriaxone in dextrose, iso-os	87
BESREMI	46	calcipotriene	51	cefuroxime axetil	88
betaine	71	calcitonin (salmon)	79	cefuroxime sodium	88
betamethasone dipropionate		calcitriol	79	celecoxib	34
	48, 49	calcium acetate(phosphat bind)	40	cephalexin	88
betamethasone valerate	49	CALQUENCE	101	CERDELGA	79
betamethasone, augmented	49	CALQUENCE (ACALABRUTINIB		CEREZYME	79
BETASERON	46	MAL)	101	cetirizine	70
betaxolol	62	camila	57	cevimeline	63
bethanechol chloride	16	camrese	53	CHEMET	63
BEVESPI AEROSPHERE	67	candesartan	116	chlorhexidine gluconate	38
bexarotene	101	candesartan-hydrochlorothiazide		chloroquine phosphate	94
BEXSERO	42	116		chlorpromazine	19
bicalutamide	101	CAPLYTA	19	chlorthalidone	117
BICILLIN L-A	99	CAPRELSA	101	cholestyramine (with sugar)	113
BIKTARVY	89	captopril	117	cholestyramine light	113
bisoprolol fumarate	116	captopril-hydrochlorothiazide	117	cholestyramine-aspartame	113
bisoprolol-hydrochlorothiazide	116	CARAFATE	74	ciclopirox	50
BIVIGAM	42	carbamazepine	26	cilostazol	114
blisovi fe 1.5/30 (28)	53	carbidopa	31	CILOXAN	60
blisovi fe 1/20 (28)	53	carbidopa-levodopa	31	CIMDUO	89
BOOSTRIX TDAP	42, 43	carbidopa-levodopa-		cinacalcet	80
BORTEZOMIB	101	entacapone	31	CIPRO	88
bortezomib	101	carboplatin	101	CIPRO HC	39
bosentan	67	carglumic acid	63	ciprofloxacin	88
BOSULIF	101	carteolol	62	ciprofloxacin hcl	60, 88
BRAFTOVI	101	cartia xt	117	ciprofloxacin in 5 % dextrose	88
BREO ELLIPTA	67	carvedilol	117	ciprofloxacin-dexamethasone	39

<i>cisplatin</i>	101	COPIKTRA	101	<i>desipramine</i>	20
<i>citalopram</i>	19	CORLANOR	112	<i>desloratadine</i>	70
<i>claravis</i>	52	COTELLIC	102	<i>desmopressin</i>	80
<i>clarithromycin</i>	97	CREON	71	<i>desog-e.estriadiol/e.estriadiol</i>	53
<i>clindamycin hcl</i>	94	CRESEMBA	93	<i>desogestrel-ethinyl estradiol</i>	53
CLINDAMYCIN IN 0.9 % SOD CHLOR		<i>cromolyn</i>	59, 67, 71	<i>desvenlafaxine succinate</i>	20
<i>clindamycin in 5 % dextrose</i>	95	<i>cryselle (28)</i>	53	<i>dexamethasone</i>	85
<i>clindamycin phosphate</i>	52, 57, 95	<i>cyclobenzaprine</i>	32	<i>dexamethasone intensol</i>	85
CLINIMIX 5%/D15W SULFITE FREE	39	<i>cyclophosphamide</i>	102	<i>dexamethasone sodium phos (pf)</i>	85
CLINIMIX 4.25%/D10W SULF FREE	39	CYCLOPHOSPHAMIDE	102	<i>dexamethasone sodium phosphate</i>	61, 85
CLINIMIX 4.25%/D5W SULFIT FREE	63	<i>cyclosporine</i>	102	<i>dexlansoprazole</i>	74
CLINIMIX 5%-D20W(SULFITE-FREE)	39	<i>cyclosporine modified</i>	102	<i>dexamethylphenidate</i>	20
CLINIMIX 6%-D5W (SULFITE-FREE)	39	CYLTEZO(CF)	77	<i>dextroamphetamine-amphetamine</i>	20
CLINIMIX 8%-D10W(SULFITE-FREE)	39	CYLTEZO(CF) PEN	77	<i>dextrose 10 % and 0.2 % nacl</i>	63
CLINIMIX 8%-D14W(SULFITE-FREE)	39	CYLTEZO(CF) PEN CROHN'S-UC-HS	76	<i>dextrose 10 % in water (d10w)</i>	63
CLINOLIPID	39	CYLTEZO(CF) PEN PSORIASIS-UV	77	<i>dextrose 5 % in water (d5w)</i>	64
<i>clobazam</i>	26	<i>cyproheptadine</i>	70	<i>dextrose 5 %-lactated ringers</i>	64
<i>clobetasol</i>	49	<i>cyred eq</i>	53	<i>dextrose 5%-0.2 % sod chloride</i>	64
<i>clobetasol-emollient</i>	49	CYSTADROPS	59	<i>dextrose 5%-0.3 % sod.chloride</i>	64
<i>clomipramine</i>	19	CYSTAGON	16	<i>dextrose 50 % in water (d50w)</i>	64
<i>clonazepam</i>	26, 27	CYSTARAN	59	<i>dextrose 70 % in water (d70w)</i>	64
<i>clonidine</i>	117	<i>cytarabine</i>	102	DIACOMIT	27
<i>clonidine hcl</i>	117	<i>d10 %-0.45 % sodium chloride</i>	63	<i>diazepam</i>	20, 27
<i>clopidogrel</i>	114	<i>d2.5 %-0.45 % sodium chloride</i>	63	<i>diazepam intensol</i>	20
<i>clorazepate dipotassium</i>	19	<i>dalfampridine</i>	36	<i>diazoxide</i>	81
<i>clotrimazole</i>	50, 93	<i>danazol</i>	80	<i>diclofenac potassium</i>	34
<i>clotrimazole-betamethasone</i>	50	<i>dantrolene</i>	32	<i>diclofenac sodium</i>	34, 60
<i>clozapine</i>	19	<i>dapsone</i>	95	<i>diclofenac-misoprostol</i>	34
COARTEM	95	DAPTACEL (DTAP PEDIATRIC) (PF)	43	<i>dicloxacillin</i>	99
<i>colchicine</i>	75	<i>daptomycin</i>	95	<i>dicyclomine</i>	75
<i>colesevelam</i>	113	<i>darifenacin</i>	16	DIFCID	97
<i>colestipol</i>	113	<i>darunavir</i>	89	<i>diflunisal</i>	34
<i>colistin (colistimethate na)</i>	95	<i>dasetta 1/35 (28)</i>	53	<i>difluprednate</i>	61
COLUMVI	101	<i>dasetta 7/7/7 (28)</i>	53	<i>digoxin</i>	112
COMBIGAN	62	DAURISMO	102	<i>dihydroergotamine</i>	37
COMBIVENT RESPIMAT	67	<i>daysee</i>	53	DILANTIN	27
COMETRIQ	101	<i>deblitane</i>	57	DILANTIN EXTENDED	27
COMPLERA	89	<i>deferasirox</i>	63	DILANTIN INFATABS	27
<i>compro</i>	71	DELESTROGEN	57	DILANTIN-125	27
<i>constulose</i>	71	DELSTRIGO	89	<i>diltiazem hcl</i>	117
		DENGVAXIA (PF)	43	<i>dilt-xr</i>	117
		DEPO-SUBQ PROVERA 104	57	<i>diphenhydramine hcl</i>	70
		<i>dermacinrx lidocan</i>	47	<i>diphenoxylate-atropine</i>	75
		DESCOVY	89	<i>dipyridamole</i>	114
				<i>disopyramide phosphate</i>	112

<i>disulfiram</i>	64	ELIQUIS DVT-PE TREAT 30D		<i>ery pads</i>	52
<i>divalproex</i>	27	START	114	<i>ery-tab</i>	97
<i>docetaxel</i>	102	ELLENCE	102	ERYTHROCIN	97
<i>dofetilide</i>	112	ELMIRON	16	<i>erythrocin (as stearate)</i>	97
<i>donepezil</i>	36	ELREXFIO	102	<i>erythromycin</i>	60, 98
DOPTELET (10 TAB PACK)	114	<i>eluryng</i>	57	<i>erythromycin ethylsuccinate</i>	97
DOPTELET (15 TAB PACK)	114	EMCYT	102	<i>erythromycin with ethanol</i>	52
DOPTELET (30 TAB PACK)	114	EMGALITY PEN	37	<i>escitalopram oxalate</i>	20
<i>dorzolamide</i>	62	EMGALITY SYRINGE	37	<i>esomeprazole magnesium</i>	74
<i>dorzolamide-timolol</i>	62	<i>emoquette</i>	53	<i>estarrylla</i>	54
<i>dotti</i>	57	EMSAM	20	<i>estradiol</i>	57, 58
DOVATO	90	<i>emtricitabine</i>	90	<i>estradiol valerate</i>	58
<i>doxazosin</i>	117	<i>emtricitabine-tenofovir (tdf)</i>	90	<i>estradiol-norethindrone acet</i>	58
<i>doxepin</i>	20	EMTRIVA	90	<i>ethambutol</i>	95
<i>doxercalciferol</i>	80	EMVERM	95	<i>ethosuximide</i>	27
<i>doxorubicin</i>	102	<i>enalapril maleate</i>	117	<i>ethynodiol diac-eth estradiol</i>	54
<i>doxorubicin, peg-liposomal</i>	102	<i>enalapril-hydrochlorothiazide</i>	117	<i>etodolac</i>	34, 35
<i>doxy-100</i>	98	ENBREL	77	<i>etonogestrel-ethinyl estradiol</i>	57
<i>doxycycline hyclate</i>	98	ENBREL MINI	77	<i>etoposide</i>	103
<i>doxycycline monohydrate</i>	98	ENBREL SURECLICK	77	<i>etravirine</i>	90
DRIZALMA SPRINKLE	20	ENDARI	64	EULEXIN	103
<i>dronabinol</i>	71	<i>endocet</i>	32	<i>euthyrox</i>	79
<i>drospirenone-ethinyl estradiol</i>	53	ENGERIX-B (PF)	43	<i>everolimus (antineoplastic)</i>	103
DROXIA	102	ENGERIX-B PEDIATRIC (PF)	43	<i>everolimus</i>	
<i>droxidopa</i>	64	<i>enoxaparin</i>	115	<i>(immunosuppressive)</i>	103
<i>duloxetine</i>	20	<i>enpresse</i>	53	EVOTAZ	90
DUPIXENT PEN	47	<i>enskyce</i>	53	<i>exemestane</i>	103
DUPIXENT SYRINGE	47	ENSTILAR	51	EXKIVITY	103
<i>dutasteride</i>	16	<i>entacapone</i>	31	EZALLOR SPRINKLE	113
<i>dutasteride-tamsulosin</i>	17	<i>entecavir</i>	90	<i>ezetimibe</i>	113
<i>e.e.s. 400</i>	97	ENTRESTO	112	<i>ezetimibe-simvastatin</i>	113
<i>ec-naproxen</i>	34	<i>enulose</i>	71	FABRAZYME	80
EDARBI	117	ENVARSUS XR	103	<i>falmina (28)</i>	54
EDARBYCLOR	117	EPCLUSA	90	<i>famciclovir</i>	90
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PENBRAYA (PF).....	44	potassium chloride	41	PROLIA	76
penicillamine	78	potassium chloride in 0.9%nacl..	41	PROMACTA	115
PENICILLIN G POT IN DEXTROSE.	99	potassium chloride in 5 % dex	41	promethazine	70
penicillin g potassium	99	potassium chloride in water	41	propafenone	112
penicillin g procaine	99	potassium chloride-0.45 % nacl..	41	propranolol	120
penicillin g sodium	99	potassium chloride-d5-0.2%nacl.	41	propylthiouracil	81
penicillin v potassium	99, 100	potassium chloride-d5-0.9%nacl.	42	PROQUAD (PF)	45
PENTACEL (PF).....	45	potassium citrate	16	PROSOL 20 %	40
pentamidine	96	PRALUENT PEN	114	protriptyline	24
pentoxifylline	115	pramipexole	31	PULMICORT FLEXHALER	68
perindopril erbumine	119	prasugrel	115	PULMOZYME	69
periogard	39	pravastatin	114	PURIXAN	108
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perphenazine	24	prazosin	119	pyridostigmine bromide	32
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pfizerpen-g	100	prednisolone acetate	61		

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QUETIAPINE.....	24	ROTARIX.....	45	SOMAVERT.....	80
<i>quinapril</i>	120	ROTATEQ VACCINE.....	45	<i>sorafenib</i>	109
<i>quinapril-hydrochlorothiazide</i> ..	120	<i>roweepra</i>	29	<i>sorine</i>	112
<i>quinidine sulfate</i>	112	ROZLYTREK.....	108	<i>sotalol</i>	113
<i>quinine sulfate</i>	96	RUBRACA.....	108	<i>sotalol af</i>	113
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<i>rabeprazole</i>	75	RUKOBIA.....	92	<i>spironolacton-hydrochlorothiaz</i> ..	120
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RADICAVA ORS STARTER KIT		RYDAPT.....	108	SPRITAM.....	29, 30
SUSP.....	37	<i>sajazir</i>	69	SPRYCEL.....	109
<i>raloxifene</i>	76	SANDIMMUNE.....	108	<i>sps (with sorbitol)</i>	65
<i>ramipril</i>	120	SANTYL.....	48	<i>sronyx</i>	56
<i>ranolazine</i>	112	<i>sapropterin</i>	80	<i>ssd</i>	48
<i>rasagiline</i>	31	SAVELLA.....	78	STAMARIL (PF).....	45
RAYALDEE.....	80	SCEMBLIX.....	108, 109	STELARA.....	51
<i>reclipsen (28)</i>	56	<i>scopolamine base</i>	73	STIVARGA.....	109
RECOMBIVAX HB (PF).....	45	SECUADO.....	25	STREPTOMYCIN.....	96
RECTIV.....	73	<i>selegiline hcl</i>	32	STRIBILD.....	92
REGRANEX.....	48	<i>selenium sulfide</i>	51	SUCRAID.....	73
RELENZA DISKHALER.....	92	SELZENTRY.....	92	<i>sucralfate</i>	75
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REMICADE.....	73	<i>sertraline</i>	25	<i>sulfacetamide sodium (acne)</i>	50
<i>repaglinide</i>	84	<i>setlakin</i>	56	<i>sulfacetamide-prednisolone</i>	59
RESTASIS.....	59	<i>sevelamer carbonate</i>	65	<i>sulfadiazine</i>	98
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REXULTI.....	24	SIGNIFOR.....	109	<i>sulfasalazine</i>	73
REYATAZ.....	92	<i>sildenafil (pulm.hypertension)</i>	69	<i>sulindac</i>	35
REZLIDHIA.....	108	<i>silodosin</i>	17	<i>sumatriptan</i>	38
REZUROCK.....	108	<i>silver sulfadiazine</i>	48	<i>sumatriptan succinate</i>	38
RHOPRESSA.....	62	<i>simvastatin</i>	114	<i>sunitinib malate</i>	109
<i>ribavirin</i>	92	<i>sirolimus</i>	109	SUNLENCA.....	92
<i>rifabutin</i>	96	SIRTURO.....	96	SUPREP BOWEL PREP KIT.....	74
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<i>riluzole</i>	64	<i>sodium chloride</i>	42, 65	SYMDEKO.....	69
<i>rimantadine</i>	92	<i>sodium chloride 0.45 %</i>	42	SYMPAZAN.....	30
RINVOQ.....	78	<i>sodium chloride 0.9 %</i>	65	SYMTUZA.....	92
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<i>ritonavir</i>	92	<i>sodium phenylbutyrate</i>	65	SYNTHROID.....	79
<i>rivastigmine</i>	37	<i>sodium polystyrene sulfonate</i>	65	TABLOID.....	109
<i>rivastigmine tartrate</i>	37	<i>sodium,potassium,mag sulfates</i>	73	TABRECTA.....	109
<i>rizatriptan</i>	38	<i>solifenacin</i>	16	<i>tacrolimus</i>	48, 109
ROCKLATAN.....	62	SOLIQUA 100/33	84	<i>tadalafil (pulm. hypertension)</i>	69
<i>roflumilast</i>	69	SOLTAMOX.....	109	TADLIQ.....	69

TAFINLAR	109	<i>tiagabine</i>	30	<i>trifluridine</i>	60
TAGRISSO	109	TIBSOVO	110	<i>trihexyphenidyl</i>	32
TALTZ AUTOINJECTOR	51	TICOVAC	46	TRIARDY XR	85
TALTZ AUTOINJECTOR (2 PACK)	51	<i>tigecycline</i>	96	TRIKAFTA	69
TALTZ AUTOINJECTOR (3 PACK)	51	<i>tilia fe</i>	56	<i>tri-legest fe</i>	56
TALTZ SYRINGE	51	<i>timolol maleate</i>	62, 120	<i>tri-linyah</i>	56
TALVEY	109	TIVICAY	92	<i>tri-lo-estarylla</i>	56
TALZENNA	109	TIVICAY PD	92	<i>tri-lo-marzia</i>	56
<i>tamoxifen</i>	109	<i>tizanidine</i>	32	<i>tri-lo-mili</i>	56
<i>tamsulosin</i>	17	TOBRADEX	62	<i>tri-lo-sprintec</i>	56
<i>tarina 24 fe</i>	56	TOBRADEX ST	62	<i>trimethoprim</i>	88
<i>tarina fe 1-20 eq (28)</i>	56	<i>tobramycin</i>	61	<i>trimipramine</i>	25
TASIGNA	109	<i>tobramycin in 0.225 % nacl</i>	96	TRINTELLIX	25
<i>tazarotene</i>	52	<i>tobramycin sulfate</i>	96	<i>tri-sprintec (28)</i>	56
<i>tazicef</i>	88	<i>tobramycin-dexamethasone</i>	62	TRIUMEQ	92
TAZORAC	52	<i>tolterodine</i>	16	TRIUMEQ PD	92
<i>taztia xt</i>	120	<i>tolvaptan</i>	81	<i>trivora (28)</i>	56
TAZVERIK	109	<i>topiramate</i>	30	TRIZIVIR	92
TDVAX	45	<i>toremifene</i>	110	TROGARZO	93
TECENTRIQ	110	<i>torsemide</i>	120	TROPHAMINE 10 %	40
TECFIDERA	37	TOUJEON MAX U-300 SOLOSTAR	84	<i>trospium</i>	16
TEFLARO	88	TOUJEON SOLOSTAR U-300		TRULANCE	74
<i>telmisartan</i>	120	<i>INSULIN</i>	84	TRULICITY	85
<i>telmisartan-amlodipine</i>	120	TPN ELECTROLYTES	42	TRUMENBA	46
<i>telmisartan-hydrochlorothiazid</i>	120	TRADJENTA	84	TRUQAP	110
<i>temazepam</i>	25	<i>tramadol</i>	35	TRUXIMA	110
TENIVAC (PF)	45, 46	<i>tramadol-acetaminophen</i>	35	TUKYSA	110
<i>tenofovir disoproxil fumarate</i>	92	<i>trandolapril</i>	120	TURALIO	110
TEPMETKO	110	<i>tranexamic acid</i>	57	<i>turqoz (28)</i>	56
<i>terazosin</i>	120	<i>tranylcypromine</i>	25	TWINRIX (PF)	46
<i>terbinafine hcl</i>	94	<i>travasol 10 %</i>	40	TYBOST	93
<i>terbutaline</i>	69	<i>travoprost</i>	62	TYMLOS	76
<i>terconazole</i>	57	TRAZIMERA	110	TYPHIM VI	46
<i>teriflunomide</i>	37	<i>trazodone</i>	25	TYRVAYA	59
TERIPARATIDE	76	TRECATOR	96	<i>unithroid</i>	79
<i>testosterone</i>	80, 81	TRELEGY ELLIPTA	69	<i>ursodiol</i>	74
<i>testosterone cypionate</i>	80	<i>treprostинil sodium</i>	120	<i>valacyclovir</i>	93
<i>testosterone enanthate</i>	80	TRESIBA FLEXTOUCH U-100	84	VALCHLOR	48
TETANUS,DIPHTHERIA TOX		TRESIBA FLEXTOUCH U-200	85	<i>valganciclovir</i>	93
PED(PF)	46	TRESIBA U-100 INSULIN	85	<i>valproate sodium</i>	30
<i>tetrabenazine</i>	37	<i>tretinoин</i>	52	<i>valproic acid</i>	30
<i>tetracycline</i>	98	<i>tretinoин (antineoplastic)</i>	110	<i>valproic acid (as sodium salt)</i>	30
THALOMID	110	TREXALL	110	<i>valsartan</i>	121
THEO-24	69	<i>triamcinolone acetonide</i>	39, 50	<i>valsartan-hydrochlorothiazide</i>	121
<i>theophylline</i>	69	<i>triamterene-hydrochlorothiazid</i>	120	VALTOCO	30
<i>thioridazine</i>	25	<i>trientine</i>	65	<i>vancomycin</i>	96, 97
<i>thiothixene</i>	25	<i>tri-estarylla</i>	56	VANCOMYCIN	97
<i>tiadylt er</i>	120	<i>trifluoperazine</i>	25		

VANCOMYCIN IN 0.9 % SODIUM		XALKORI	111	ZTALMY	31
CHL	97	XARELTO	115, 116	zumandimine (28)	57
VANFLYTA	110	XARELTO DVT-PE TREAT 30D		ZURZUVAE	26
VAQTA (PF)	46	START	115	ZYCLARA	48
varenicline	65	XATMEP	111	ZYDELIG	111
VARIVAX (PF)	46	XCOPRI	30	ZYKADIA	111
VASCEPA	114	XCOPRI MAINTENANCE PACK	30	ZYLET	62
velivet triphasic regimen (28)	56	XCOPRI TITRATION PACK	30	ZYPITAMAG	114
VELPHORO	65	XDEMVY	59	ZYPREXA RELPREVV	26
VELTASSA	65	XELJANZ	78		
VEMLIDY	93	XELJANZ XR	78		
VENCLEXTA	110	XERMELO	111		
VENCLEXTA STARTING PACK	110	XGEVA	100		
venlafaxine	25	XHANCE	70		
VENTAVIS	69	XIFAXAN	97		
VENTOLIN HFA	69	XIGDUO XR	85		
verapamil	121	XOLAIR	70		
VERQUVO	112	XOSPATA	111		
VERSACLOZ	25	XPOVIO	111		
VERZENIO	110	XTANDI	111		
vestura (28)	56	xulane	57		
V-GO 30	18	XULTOPHY 100/3.6	85		
V-GO 40	18	YF-VAX (PF)	46		
vienna	56	yuvafem	59		
vigabatrin	30	zafemy	57		
vigadrone	30	zafirlukast	70		
vigpoder	30	ZARXIO	47		
vilazodone	25	ZEJULA	111		
vincristine	110	ZELBORAF	111		
vinorelbine	110	ZEMAIRA	65		
viorele (28)	56	zenatane	52		
VIRACEPT	93	ZENPEP	74		
VIREAD	93	ZERVIASTE	59		
VITRAKVI	110	zidovudine	93		
VIVITROL	35	ZIEXTENZO	47		
VIZIMPRO	110	ziprasidone hcl	26		
VONJO	110	ziprasidone mesylate	26		
voriconazole	94	ZIRABEV	111		
VOSEVI	93	ZIRGAN	60		
VOTRIENT	110	zoledronic acid	81		
VRAYLAR	25	zoledronic acid-mannitol-water			
VUMERTY	37		65, 81		
VYNDAQEL	112	ZOLINZA	111		
VYVANSE	25	zolmitriptan	38		
warfarin	115	zolpidem	26		
water for irrigation, sterile	65	ZONISADE	31		
WELIREG	111	zonisamide	31		
wera (28)	56	zovia 1-35 (28)	57		

Tsab Ntawv Ceeb Toom Txog Kev Tsis Pub Muaj Kev Ntxub Ntxaug

Kev ntxub ntxaug yog kev ua txhaum txoj cai lij choj. Wellcare by Health Net ua raws li Lub Xeev thiab Tsoom Fww Teb Chaws cov ca lij choj hais txog pej xeem cov ca. Wellcare by Health Net yuav tsis muaj ntxub ntxaug yam tsis raug kev cai lij choj, tsis cais tib neeg, los sis saib lawv txaww lwm tus vim rau qhov yog poj niam txiv neej, haiv neeg, xim tawv nqaij, kev ntseeg, poj koob yawm txww, teb chaws yug, cim thawj qhia txog haiv neeg tsawg, hnub nyooog, kev xiam oob qhab fab hlwb, kev xiam oob qhab ntawm lub cev, xwm txheej kev kho mob, ntaub ntawv qhia paub txog caj ces, muaj neej lawm los tsis tau, poj niam los txiv neej, cim thawj qhia tias yog poj niam los txiv neej, los sis kev nyiam txog kev sib daj sib deev.

Wellcare by Health Net muab:

- Cov koom pab thiab cov kev pab cuam pab dawb rau cov neeg xiam oob qhab los pab kom lawv sib txuas lus tau zoo dua qub, xws li:
 - Cov kws txhais lus piav tes uas tsim nyog
 - Cov ntaub ntawv qhia paub sau ua daim ntawv hauv lwm hom ntaub ntawv (ntawv luam loj, ua suab lus, cov ntaub ntawv hauv khoos phis tawj uas muab mus siv tau, lwm hom ntaub ntawv)
- Cov kev pab cuam txhais lus pab dawb rau cov neeg uas lawv hom lus xub thawj tsis yog Lus Askiv, xws li:
 - Cov kws txhais lus uas tsim nyog
 - Cov ntaub ntawv qhia paub hais ua lwm hom lus

Yog tias koj xav tau cov kev pab cuam no, tiv tauj Wellcare By Health Net los ntawm kev hu rau

1-800-431-9007. Ncua sij hawm Lub Kaum Hli Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, koj yuav hu tau rau peb hauv 7 hnub hauv ib lub lim tiam thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj. Txij thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, koj yuav hu tau rau peb hauv Hnub Monday txog Hnub Friday thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj. Yuav muaj kev siv lub lab npauv xa tsab ntawv xov tom qab tag sij hawm ua hauj lwm, cov hnub kawg hauv lim tiam, thiab hauv cov hnub so uas tsoom fww tso cai. Yog tias koj tsis hnov lus los sis hais tsis tau lus zoo, thov hu rau **TTY 711**. Yog tias thov tuaj, yuav muab daim ntawv no ua kom muab siv tau rau koj hauv cov ntawv su rau neeg dig muag, ntawv luam loj, daim kab xev suab lus, los sis hom siv tau hauv khoos phis tawj. Txhawm rau kom tau daim ntawv theej hauv ib hom ntawm lwm cov hom ntawv no, thov hu los sis sau ntawv xa mus rau:

Wellcare By Health Net

21281 Burbank Blvd.

Woodland Hills, CA 91367

1-800-431-9007 (TTY: 711)

Txoj Hauv Kev Foob Txog Kev Hais Txog Kev Tsis Txaus Siab

Yog koj ntseeg tias Wellcare by Health Net muab tsis tau cov kev pab cuam no los sis tau ntxub ntxaug yam tsis raug raws kev cai hauv lwm txoj hauv kev uas saib raws li qhov yog poj niam los txiv neej, haiv neeg, xim tawv nqaij, kev ntseeg, poj koob yawm txww, teb chaws yug, cim thawj qhia txog

haiv neeg tsawg, hhub nyog, kev xiam oob qhab ntawm lub hlwb, kev xiam oob qhab ntawm lub cev, xwm txheej kev kho mob, ntaub ntawv qhia txog caj ces, muaj txij nkawm lawm los tsis muaj, poj niam txiv neej, cim thawj qhia txog poj niam los txiv neej, los sis kev nyiam txog kev sib daj sib deev, koj tuaj yeem foob txog kev hais txog kev tsis txaus siab tuaj nrog Lub Chaw Pab Cuam Tus Tswv Cuab tau. Koj yuav foob txog kev hais txog kev tsis txaus siab tau raws li kev hu xov tooj, hauv kev sau ua daim ntawv, ntawm yus tus kheej, los sis hauv khoos phis tawj:

- **Raws kev hu xov tooj:** Hu rau Wellcare By Health Net Tus Tub Leg Hauj Lwm Txog Pej Xeem Cov Cai los ntawm kev hu rau tus xov tooj **1-866-458-2208**. Ncua sij hawm 8 teev sawv ntxov thiab 5 teev tsaus ntuj, Hhub Monday txog Hhub Friday. Los sis, yog tias koj tsis hnov lus los sis hais tsis tau lus zoo, thov hu rau TTY 711.
- Hauv kev sau ua daim ntawv: Sau daim foos cia sau kev tsis txaus siab los sis sau tsab ntawv thiab xa mus rau:
Wellcare Civil Rights Coordinator
P.O. Box 9103
Van Nuys, CA 91409-9103
- **Ntawm yus tus kheej:** Tuaj mus kiag tom koj tus kws kho mob lub chaw ua hauj lwm los sis Wellcare by Health Net thiab hais tias koj xav foob txog kev hais txog kev tsis txaus siab.
- **Hauv khoos phis tawj:** Nkag mus saib hauv Wellcare By Health Net lub vev xaib ntawm wellcare.com/healthnetCA.

Office of Civil Rights – California Department of Health Care Services

Koj kuj yuav foob tau kev tsis txaus siab txog pej xeem cov cai nrog California Department of Health Care Services, Office of Civil Rights raws kev hu xov tooj, hauv kev sau ua daim ntawv, los sis hauv khoos phis tawj:

- **Raws kev hu xov tooj:** Hu rau **1-916-440-7370**. Yog tias koj hais tsis tau lus los sis tsis hnov lus zoo, thov hu rau **TTY 711 (Kev Pab Cuam Xa Suab Xov Tooj Hauv Kev Sib Txaus Lus)**.
- **Hauv kev sau ua daim ntawv:** Sau daim foos cia sau kev tsis txaus siab los sis xa ib tsab ntawv mus rau:
Deputy Director, Office of Civil Rights
Department of Health Care Services
Office of Civil Rights
P.O. Box 997413, MS 0009
Sacramento, CA 95899-7413
Cov foos sau kev tsis txaus siab muaj nyob rau ntawm
http://www.dhcs.ca.gov/Pages/Language_Access.aspx.
- **Hauv khoos phis tawj:** Xa ib tsab email mus rau **CivilRights@dhcs.ca.gov**.

Office of Civil Rights - U.S. Department of Health and Human Services

Yog tias koj ntseeg tias koj raug kev ntxub ntxaug uas saib raws li haiv neeg, xim tawv nqaij, teb chaws yug, hhub nyog, kev xiam oob qhab los sis poj niam txiv neej, koj kuj tuaj yeem foob lus tsis txaus siab txog pej xeem cov cai tau nrog U.S. Department of Health and Human Services, Office for Civil Rights raws li kev hu xov tooj, hauv kev sau ua daim ntawv, los sis hauv khoos phis tawj:

- . **Raws kev hu xov tooj:** Hu rau **1-800-368-1019**. Yog tias koj hais tsis tau lus los sis tsis hnov lus zoo, thov hu rau **TTY/TDD 1-800-537-7697**.
- . Hauv kev sau ua daim ntawv: Sau daim foos cia sau kev tsis txaus siab los sis xa ib tsab ntawv mus rau:
U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201
- . **Hauv khoos phis tawj:** Nkag mus saib hauv Office for Civil Rights Lub Chaw Muab Kev Tsis Txaus Siab ntawm <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

English: ATTENTION: If you need help in your language call **1-800-431-9007** (TTY: **711**). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call **1-800-431-9007** (TTY: **711**). These services are free of charge.

Arabic (العربية): انتبه: إذا كنت بحاجة إلى مساعدة بلغتك، فاتصل على الرقم **1-800-431-9007** (TTY: **711**). توفر أيضاً مساعدات وخدمات للأشخاص ذوي الإعاقات مثل المستندات بطريقة برايل وبطبيعة كبيرة. اتصل على الرقم **1-800-431-9007** (TTY: **711**). وهذه الخدمات مجانية.

Armenian (Հայերեն): ՈՒԾԱՂՐՈՒԹՅՈՒՆ. Եթե Ձեր լեզվով օգնության կարիք ունեք, զանգահարեք **1-800-431-9007** (TTY: **711**): Հասանելի են նաև օգնություն և ծառայություններ հաշմանդամություն ունեցող անձանց համար, ինչպիսիք են՝ բրայլյան և խոշոր տառերով փաստաթղթերը: Զանգահարեք **1-800-431-9007** (TTY: **711**): Այս ծառայություններն անվճար են:

Cambodian (ភាសាខ្មែរ): ចំណាំ៖ ប្រសិនបើអ្នកត្រូវការជំនួយជាតាមរបស់អ្នក សូម ទូរសព្ទទៅលេខ **1-800-431-9007** (TTY: **711**)។ ជំនួយនឹងសេវាកម្មសម្រាប់ដែនពីការ ផ្តល់ជាផកសារជាមក្ស្យាជុសសម្រាប់ដែនពីការនេះ នឹងពុម្ពមក្ស្យាជុំកំណត់ដែលដោយ ទូរសព្ទទៅកាន់លេខ **1-800-431-9007** (TTY: **711**)។ សេវាកម្មទាំងនេះមិនគឺតែផ្តល់នោះទេ។

Chinese Mandarin (普通话): 注意：如果您需要语言支持，请致电 **1-800-431-9007** (TTY: **711**)。此外，还为残疾人提供辅助和相关服务，如盲文文件和大字体文件。请致电 **1-800-431-9007** (TTY: **711**)。这些服务均免费提供。

Chinese Cantonese (廣東話): 注意：如果您需要以您母語提供的協助，請致電 **1-800-431-9007** (TTY: **711**)。我們也為殘疾人士提供輔助和服務，例如點字和大字體印刷的文件。請致電 **1-800-431-9007** (TTY: **711**)。這些服務為免費服務。

Farsi (فارسی): توجه: اگر به زبان خود نیاز به کمک دارید با **1-800-431-9007** تماس بگیرید (رایگان: **711**). پشتیبانی و خدمات برای افراد دارای معلویت، مانند اسناد با خط بریل و چاپ درشت، نیز موجود است. با **1-800-431-9007** (رایگان: **711**) تماس بگیرید. این خدمات رایگان است.

Hindi (हिंदी): ध्यान दें: अगर आपको अपनी भाषा में मदद चाहिए, तो **1-800-431-9007** (TTY: **711**) पर कॉल करें. विकलांग लोगों के लिए ब्रेल और बड़े प्रिंट में दस्तावेज़ जैसी सहायता और सेवाएं उपलब्ध हैं. **1-800-431-9007** (TTY: **711**) पर कॉल करें. ये सेवाएं निःशुल्क हैं.

Hmong (Lus Hmoob): THOV PAUB TXOG: Yog tias koj xav tau kev pab ua koj hom lus thov hu rau **1-800-431-9007** (TTY: **711**). Tsis tas i ntawd, peb tseem muaj cov neeg pab thiab cov kev pab cuam rau cov neeg uas muaj cov kev xiam oob qhab, xws li cov ntaub ntawv ua ntawv su rau neeg dig muag thiab ntawv luam loj. Hu rau **1-800-431-9007** (TTY: **711**). Cov kev pab cuam no tsis muaj nqi dab tsi ntxiv lawm.

Japanese (日本語): 注意：言語のヘルプが必要な場合は **1-800-431-9007** (TTY : **711**) までお電話ください。障害をお持ちの方には、点字や大判プリントなどの補助機能やサービスもご利用になれます。**1-800-431-9007** (TTY : **711**) までお電話ください。これらのサービスは無料です。

Korean (한국어): 주의: 귀하의 구사 언어로 도움을 받으셔야 한다면 **1-800-431-9007** (TTY: **711**) 번으로 연락해 주십시오. 점자 및 큰 활자 인쇄 형식으로 된 문서 등 장애인을 위한 도움 및 서비스도 제공됩니다. **1-800-431-9007** (TTY: **711**) 번으로 연락해 주십시오. 해당 서비스는 무료로 제공됩니다.

Laotian (ພາສາລາວ): ລົ້ມໍ່ຄົນ: ຖ້າທ່າກວາທ່ານຕອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານ ໂທ່ານ **1-800-431-9007** (TTY: **711**). ນອກຈາກນີ້, ຍັງມີການຊ່ວຍເຫຼືອ ແລະ ການບໍລິການ ລົ້ມໍ່ຄົນພິການ ເຊັ່ນ: ເອກະສານທີ່ເປັນຕົວຂໍ້ກສອນນູ້ ແລະ ການພິມຂະໜາດໃຫຍ່. ໂທ່ານ **1-800-431-9007** (TTY: **711**). ການບໍລິການເຫຼືອນີ້ແມ່ນພົກ.

Mien (Mienh): Liouh Eix: Oix se meih oix nongc zuqc gorngv mienh wac daih taengx meih, cingv meih mboqv dienx wac **1-800-431-9007** (TTY: **711**). Yie mbuo hac haih nongc mienh wac daih taengx waic fangx nyei mienh, hnangv zing mangc mv buatc lamh nyei mienh nongc nyei nzangc caux domh nzangc wenh jienx. Cingv meih mboqv dienx wac **1-800-431-9007** (TTY: **711**). Naiv deix bong zouc gong se maiv siou zinh nyanh nyei.

Punjabi (ਪੰਜਾਬੀ): ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵੱਚ ਮਦਦ ਚਾਹੀਦੀ ਹੈ, ਤਾਂ **1-800-431-9007** 'ਤੇ ਕਾਲ ਕਰੋ (TTY: **711**)। ਬਰੇਲ ਲਪੀ ਅਤੇ ਵੱਡੇ ਪ੍ਰਟਿ ਵੱਚ ਦਸਤਾਵੇਜ਼ਾਂ ਵਰਗੀਆਂ ਆਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾਵਾਂ ਅਤੇ ਸੇਵਾਵਾਂ ਵੀ ਉਪਲਬਧ ਹਨ। **1-800-431-9007** 'ਤੇ ਕਾਲ ਕਰੋ (TTY: **711**)। ਇਹ ਸੇਵਾਵਾਂ ਬਲਿਕੁਲ ਮੁਫ਼ਤ ਹਨ।

Russian (Русский): ВНИМАНИЕ: если вам требуется помочь на родном языке, позвоните по номеру **1-800-431-9007** (TTY: **711**). Также доступны сопутствующая помощь и услуги для людей с ограниченными возможностями, такие как материалы, напечатанные крупным шрифтом и шрифтом Брайля. Позвоните по номеру **1-800-431-9007** (TTY: **711**). Эти услуги предоставляются бесплатно.

Spanish (Español): ATENCIÓN: Si necesita ayuda en su idioma llame al **1-800-431-9007** (TTY: **711**). También están disponibles ayudas y servicios para personas con discapacidades, como documentos en Braille y letra grande. Llame al **1-800-431-9007** (TTY: **711**). Estos servicios son gratuitos.

Tagalog (Tagalog): ATENSYON: Kung kailangan ninyo ng tulong sa inyong wika, tumawag sa **1-800-431-9007** (TTY: **711**). Available din ang mga tulong at serbisyo para sa mga taong may kapansanan, gaya ng mga dokumento sa braille at malaking print. Tumawag sa **1-800-431-9007** (TTY: **711**). Walang bayad ang mga serbisyon ito.

Thai (ภาษาไทย): โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ โปรดโทร **1-800-431-9007** (TTY: **711**) นอกจากนี้ ยังมีความช่วยเหลือและบริการสำหรับผู้พิการ เช่น เอกสารที่เป็นอักษรเบรล์และเอกสารที่ใช้ตัวอักษรขนาดใหญ่ โทร **1-800-431-9007** (TTY: **711**) บริการเหล่านี้ไม่มีค่าใช้จ่าย

Ukrainian (Українська): УВАГА! Якщо ви потребуєте підтримки своєю мовою, телефонуйте за номером **1-800-431-9007** (TTY: **711**). Також доступні засоби та послуги для людей з обмеженими можливостями, як-от документи шрифтом Брайля та великим шрифтом. Телефонуйте за номером **1-800-431-9007** (TTY: **711**). Ці послуги є безкоштовними.

Vietnamese (Tiếng Việt): CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của quý vị, hãy gọi số **1-800-431-9007** (TTY: **711**). Các hỗ trợ và dịch vụ dành cho người khuyết tật, chẳng hạn như tài liệu bằng chữ nổi và bản in cỡ chữ lớn cũng được cung cấp. Gọi số **1-800-431-9007** (TTY: **711**). Các dịch vụ này được miễn phí.

Tsab Ntawv Ceeb Toom Txog Kev Tsis Pub Muaj Kev Ntxub Ntxaug

Kev ntxub ntxaug yog kev ua txhaum txoj cai lij choj. Wellcare By Health Net in partnership with CalViva Health ua raws li Lub Xeev thiab Tsoom Fww Teb Chaws cov kev cai lij choj hais txog pej xeem cov cai. Wellcare By Health Net in partnership with CalViva Health yuav tsis muaj kev ntxub ntxaug yam txhaum kev cai, cais cov neeg, los sis saib lawv txaww lwm tus vim rau qhov yog poj niam txiv neej, haiv neeg, xim tawv nqaij, kev ntseeg, poj koob yawm txww, teb chaws yug, cim thawj pab pawg haiv neeg tsawg, hnub nyooog, kev xiam oob qhab txog lub hlwb, kev xiam oob qhab ntawm lub cev, xwm txheej kev kho mob, ntaub ntawv qhia txog caj ces, muaj txij nkawm lawm los tsis tau, poj niam los txiv neej, cim thawj qhia txog poj niam los txiv neej, los sis kev nyiam rau fab kev sib daj sib deev.

Wellcare By Health Net in partnership with CalViva Health yuav muab:

- . Cov koom pab thiab cov kev pab cuam pab dawb rau cov neeg xiam oob qhab los pab kom lawv sib txuas lus tau zoo dua qub, xws li:
 - o Cov kws txhais lus piav tes uas tsim nyog
 - o Cov ntaub ntawv qhia paub sau ua daim ntawv hauv lwm hom ntaub ntawv (ntawv luam loj, ua suab lus, cov ntaub ntawv hauv khoos phis tawj uas muab mus siv tau, lwm hom ntaub ntawv)
- . Cov kev pab cuam txhais lus pab dawb rau cov neeg uas lawv hom lus xub thawj tsis yog Lus Askiv, xws li:
 - o Cov kws txhais lus uas tsim nyog
 - o Cov ntaub ntawv qhia paub hais ua lwm hom lus

Yog tias koj xav tau cov kev pab cuam no, tiv tauj Wellcare By Health Net in partnership with CalViva Health los ntawm kev hu rau tus xov tooj **1-833-236-2366**. Ncua sij hawm Lub Kaum Hli Ntuj Tim 1 txog Lub Peb Hlis Ntuj Tim 31, koj yuav hu tau rau peb hauv 7 hnub hauv ib lub lim tiam thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj. Txij thaum Lub Plaub Hlis Ntuj Tim 1 txog Lub Cuaj Hlis Ntuj Tim 30, koj yuav hu tau rau peb hauv Hnub Monday txog Hnub Friday thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj. Yuav muaj kev siv lub lab npauv xa tsab ntawv xov tom qab tag sij hawm ua hauj lwm, cov hnub kawg hauv lim tiam, thiab hauv cov hnub so uas tsoom fwv tso cai. Yog tias koj tsis hnov lus los sis hais tsis tau lus zoo, thov hu rau **TTY 711**. Yog tias thov tuaj, yuav muab daim ntawv no ua kom muab siv tau rau koj hauv cov ntawv su rau neeg dig muag, ntawv luam loj, daim kab xev suab lus, los sis hom siv tau hauv khoos phis tawj. Txhawm rau kom tau daim ntawv theej hauv ib hom ntawm lwm cov hom ntawv no, thov hu los sis sau ntawv xa mus rau:

Wellcare By Health Net in partnership with CalViva Health

21281 Burbank Blvd.

Woodland Hills, CA 91367

1-833-236-2366 (TTY: 711)

Txoj Hauv Kev Foob Txog Kev Hais Txog Kev Tsis Txaus Siab

Yog tias koj ntseeg tias Wellcare By Health Net in partnership with CalViva Health muab tsis tau cov kev pab cuam no los sis muaj kev ntxub ntxaug yam tsis raug kev cai hauv lwm txoj hau kev uas saib

raws li kev yog poj niam txiv neej, haiv neeg, xim tawv nqaij, kev ntseeg, poj koob yawm txwv, teb chaws yug, cim thawj qhia txog pab pawg haiv neeg tsawg, hhub nyoog, kev xiam oob qhab txog lub hlwb, kev xiam oob qhab ntawm lub cev, xwm txheej kev kho mob, ntaub ntawv qhia txog caj ces, muaj txij nkawm lawm los tsis tau, poj niam los txiv neej, cim thawj qhia txog poj niam los txiv neej, los sis kev nyiam fab kev sib daj sib deev, koj yuav foob txog kev hais txog kev tsis txaus siab tau nrog Lub Chaw Pab Cuam Tus Tswv Cuab. Koj yuav foob txog kev hais txog kev tsis txaus siab tau raws li kev hu xov tooj, hauv kev sau ua daim ntawv, ntawm yus tus kheej, los sis hauv khoos phis tawj:

- **Raws kev hu xov tooj:** Tiv tauj Wellcare By Health Net in partnership with CalViva Health Tus Kws Lis Hauj Lwm Txog Pej Xeem Cov Cai los ntawm kev hu rau tus xov tooj **1-866-458-2208**. Ncua sij hawm 8 teev sawv ntxov thiab 5 teev tsaus ntuj, Hnub Monday txog Hnub Friday. Los sis, yog tias koj tsis hnov lus los sis hais tsis tau lus zoo, thov hu rau **TTY 711**.
- **Hauv kev sau ua daim ntawv:** Sau daim foos cia sau kev tsis txaus siab los sis sau tsab ntawv thiab xa mus rau:
Wellcare Civil Rights Coordinator
P.O. Box 9103
Van Nuys, CA 91409-9103
- **Ntawm yus tus kheej:** Mus ntsib koj tus kws kho mob hauv lub chaw ua hauj lwm los sis Wellcare By Health Net in partnership with CalViva Health thiab hais tias koj xav foob txog kev hais txog kev tsis txaus siab.
- **Hauv khoos phis tawj:** Mus saib hauv Wellcare By Health Net in partnership with CalViva Health lub vev xaib ntawm **wellcare.com/healthnetCA**.

Office of Civil Rights – California Department of Health Care Services

Koj kuj yuav foob tau kev tsis txaus siab txog pej xeem cov cai nrog California Department of Health Care Services, Office of Civil Rights raws kev hu xov tooj, hauv kev sau ua daim ntawv, los sis hauv khoos phis tawj:

- **Raws kev hu xov tooj:** Hu rau **1-916-440-7370**. Yog tias koj hais tsis tau lus los sis tsis hnov lus zoo, thov hu rau **TTY 711 (Kev Pab Cuam Xa Suab Xov Tooj Hauv Kev Sib Txaus Lus)**.
- **Hauv kev sau ua daim ntawv:** Sau daim foos cia sau kev tsis txaus siab los sis xa ib tsab ntawv mus rau:
Deputy Director, Office of Civil Rights
Department of Health Care Services
Office of Civil Rights
P.O. Box 997413, MS 0009
Sacramento, CA 95899-7413
Cov foos cia sau kev tsis txaus siab muaj nyob ntawm
http://www.dhcs.ca.gov/Pages/Language_Access.aspx
- **Hauv khoos phis tawj:** Xa ib tsab email mus rau **CivilRights@dhcs.ca.gov**.

Office of Civil Rights - U.S. Department of Health and Human Services

Yog tias koj ntseeg tias koj raug kev ntxub ntxaug uas saib raws li haiv neeg, xim tawv nqaij, teb chaws yug, hnub nyooog, kev xiam oob qhab los sis poj niam txiv neej, koj kuj tuaj yeem foob lus tsis txaus siab txog pej xeem cov cai tau nrog U.S. Department of Health and Human Services, Office for Civil Rights raws li kev hu xov tooj, hauv kev sau ua daim ntawv, los sis hauv khoos phis tawj:

- **Raws kev hu xov tooj:** Hu rau **1-800-368-1019**. Yog tias koj hais tsis tau lus los sis tsis hnov lus zoo, thov hu rau **TTY/TDD 1-800-537-7697**.

- **Hauv kev sau ua daim ntawv:** Sau daim foos cia sau kev tsis txaus siab los sis xa ib tsab ntawv mus rau:

U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201

- **Hauv khoos phis tawj:** Nkag mus saib hauv Office for Civil Rights Lub Chaw Muab Kev Tsis Txaus Siab ntawm <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

English: If you, or someone you are helping, need language services, call Toll-Free **1-833-236-2366** (TTY: **711**). Aids and services for people with disabilities, like documents in braille, accessible PDF and large print, are also available. These services are at no cost to you.

Arabic: إذا احتجت أنت أو شخص ما تقوم بمساعدته إلى خدمات لغوية، فاتصل بالرقم المجاني **1-833-236-2366** (TTY: **711**). تتوفر أيضًا مساعدات وخدمات للأشخاص ذوي الإعاقات مثل المستندات بطريقة بريل وبالطباعة الكبيرة وملفات PDF القابلة للوصول إليها. ولا تتحمل أنت أي تكفة مقابل هذه الخدمات.

Armenian: Եթե ձեզ կամ որևէ մեկին, ում օգնում եք, հարկավոր են լեզվական ծառայություններ, զանգահարեք **1-833-236-2366** (TTY: **711**) անվճար հեռախոսահամարով: Հասանելի են նաև հաշմանդամություն ունեցող անձանց համար նախատեսված օգնականներ և ծառայություններ, ինչպահիք են փաստաթղթերը բրայլի տառերով, հասանելի PDF և մեծ տառերով: Այս ծառայությունները ձեզ համար անվճար են:

Cambodian: ប្រសិនបើអ្នក ឬ អ្នកណាម្នាក់ដែលអ្នកកំពង់តែចូលរួម ត្រូវការសហការ ស្ថិកទូរសព្ទទៅលើខេត្តកិច្ចការណ៍ 1-833-236-2366 (TTY: **711**)។ ជំនួយនឹង សេវាអ្នកអ្នកបែងចែកពិភាក្សាបច្ចុប្បន្នសារធានា អក្សរស្សាបសម្រាប់បង្កើតពិភាក្សាដ្ឋាន ជា PDF ដែលអាចចូលប្រើបាន និង ជាព័ត៌មានអក្សរទាំងបំផុះ កំណត់រកបានដោយ សេវាអ្នកអ្នកបែងចែកពិភាក្សាបច្ចុប្បន្នសារធានា: អ្នកនោះទេ។

Chinese Mandarin: 如果您或您帮助的人需要语言服务，请拨打免费电话 **1-833-236-2366** (TTY: **711**)。我们还为残障人士提供辅助工具和相关服务，如盲文文件、无障碍PDF文件和大号字体文件。您可以免费获得这些服务。

Chinese Cantonese: 如果您或您協助的人需要語言服務，請撥打免付費專線 **1-833-236-2366** (TTY: **711**)。我們也為殘疾人士提供輔助和服務，例如點字、無障礙PDF和大字體印刷的文件。這些服務皆為免費。

Farsi: اگر شما یا فردی که به او کمک می‌کنید به خدمات زبان نیاز دارید، با خط رایگان **1-833-236-2366** (TTY: **711**) تماس بگیرید. کمک‌ها و خدمات برای افراد دارای ناتوانی، مانند مدارکی به زبان بریل، PDF قابل دسترسی، چاپ درشت، نیز در دسترس است. این خدمات به طور رایگان ارائه می‌شوند.

Hindi: यदि आपको, या किसी ऐसे व्यक्ति को जिसकी आप मदद कर रहे हैं, भाषा सेवाओं की आवश्यकता है, तो टोल-फ्री **1-833-236-2366** (TTY: **711**) पर कॉल करें। विकलांग लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल में दस्तावेज़, एक्सेस योग्य PDF और बड़े प्रिंट भी उपलब्ध हैं। ये सेवाएं आपके लिए निःशुल्क उपलब्ध हैं।

Hmong: Yog tias koj, los sis ib tug neeg twg uas koj tab tom pab no, xav tau cov kev pab cuam txhais lus, thov hu rau Tus Xov Tooj Hu Dawb **1-833-236-2366** (TTY: **711**). Tsis tas li ntawd, kuj yuav muaj cov khoom pab thiab cov kev pab cuam rau cov neeg xiam oob qhab, xws li cov ntaub ntawv sau ua tus ntawv su, hom ntawv PDF uas siv tau thiab ntawv luam loj thiab. Koj yuav tsis tas tau them nqi rau cov kev pab cuam no li.

Japanese: あなたご自身や、あなたが介護をしている方が言語サービスを必要としている場合は、フリーダイヤル **1-833-236-2366**(TTY: **711**)にお電話ください。障がいをお持ちの方には、点字やアクセス可能な PDF、大判プリントなどの補助機能やサービスもご利用になれます。これらのサービスは無料です。

Korean: 귀하 또는 귀하가 돋고 있는 다른 사람이 언어 서비스가 필요한 경우, 수신자 부담 전화 **1-833-236-2366**(TTY: **711**) 번으로 연락하십시오. 점자, 액세스 가능한 PDF 및 큰 활자 인쇄 형식으로 된 문서 등 장애인을 위한 도움 및 서비스도 제공됩니다. 이러한 서비스는 무료로 제공됩니다.

Laotian: ຖ້າທ່ານ ຫຼື ຄົນໄດ້ໜຶ່ງທີ່ທ່ານກໍລັງຊວຍເຫຼືອ, ຕ້ອງການດ້ານບໍລິການດ້ານພາສາ, ໂທ ທາເປີໂທຟິທີ **1-833-236-2366** (TTY: **711**). ບອກຈາກນີ້, ຍັງມີການຊວຍເຫຼືອ ແລະ ການບໍລິ ການສໍາລັບຄົນພິການ ເຊັ່ນ: ເຮັດວຽກສາມເປັນຕົວອັກສອນນູນ, PDF ທີ່ສາມາດເຂົ້າເຖິງໄດ້ ແລະ ຕົວພິມຂະໜາດໃຫຍ່. ການບໍລິການເຫຼົານີ້ແມ່ນບໍ່ມີຄາໃຊ້ຈ່າຍໃດງ່າຍສໍາລັບທ່ານ.

Mien: Nangs goongv meih mah xi meih sangs wav laanh munh xamw nongc meih sangs blanc ndouz wac xangh munh wac,dings meih mbopr mal xoud sinh ndiinc wac **1-833-236-2366** (TTY: **711**). Mbul i sangs sind naaih xaangd naaih nqumc dongz sind mal heis wav ndams munh,ganh nangw funl munh meic mbus ndangc,nyamh zongh doc xal haid bei PDF ganw ndangc luw lud. Sangs meih neiv ndams lu dei mal nongc sinh.

Punjabi: ਜੇ ਤੁਹਾਨੂੰ, ਜਾਂ ਉਸ ਵਾਅਕਤੀ ਨੂੰ, ਜਿਸ ਦੀ ਤੁਸੀਂ ਮਦਦ ਕਰ ਰਹੇ ਹੋ, ਭਾਸ਼ਾ ਸੰਬੰਧੀ ਸੇਵਾਵਾਂ ਦੀ ਲੋੜ ਹੈ, ਤਾਂ ਟੋਲ-ਫੁਰੀ **1-833-236-2366** (TTY: **711**)। ਅਸਮਰਥਤਾਵਾਂ ਵਾਲੇ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕੰਬਰੇਲ ਲਪਿ ਵਾਚਿ ਦਸਤਾਵੇਜ਼, ਪਹੁੰਚਯੋਗ PDF ਅਤੇ ਵੱਡੇ ਆਕਾਰ ਵਾਚਿ ਪ੍ਰਤਿ ਵੀ ਉਪਲਬਧ ਹਨ। ਇਹ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਵਾਚਿ ਉਪਲਬਧ ਹਨ।

Russian: Если вам или лицу, которому вы помогаете, требуются услуги перевода, позвоните по бесплатному номеру **1-833-236-2366** (TTY: **711**). Также доступны сопутствующая помощь и услуги для людей с ограниченными возможностями, такие как материалы, напечатанные крупным шрифтом и шрифтом Брайля либо опубликованные в доступном формате PDF. Эти услуги предоставляются бесплатно.

Spanish: Si usted, o alguien a quien está ayudando, necesita servicios lingüísticos, llame gratis al **1-833-236-2366** (TTY: **711**). También están disponibles ayudas y servicios para personas con discapacidades, como documentos en Braille, formato PDF accesible y letra grande. Estos servicios se proporcionan sin costo alguno para usted.

Tagalog: Kung kayo o ang tinutulungan ninyo ay nangangailangan ng mga serbisyo sa wika, tumawag nang Toll-Free sa **1-833-236-2366** (TTY: **711**). Available din ang mga tulong at serbisyo para sa mga taong may kapansanan, gaya ng mga dokumento sa braille, accessible na PDF at malaking print. Wala kayong babayaran para sa mga serbisyong ito.

Thai: หากคุณหรือคนที่คุณกำลังให้ความช่วยเหลืออยู่ต้องการบริการด้านภาษา โปรดติดต่อหมายเลขโทรศัพท์ที่ **1-833-236-2366** (TTY: **711**) เรา มีความช่วยเหลือและบริการสำหรับผู้พิการ เช่น เอกสารที่เป็นอักษรเบรลล์, PDF ที่เข้าถึงได้ และเอกสารที่ใช้ตัวอักษรขนาดใหญ่ พร้อมให้บริการ โดยคุณไม่ต้องเสียค่าใช้จ่ายใดๆ เพื่อใช้บริการเหล่านี้

Ukrainian: Якщо ви, або хтось, кому ви допомагаєте, має потребу в мовних послугах, зверніться на безкоштовну телефонну лінію за номером **1-833-236-2366** (TTY: **711**). Сервіси та послуги доступні для з людей з обмеженими можливостями, всі документи доступні шрифтом Брайля, а також у форматі PDF із збільшеним розміром шрифту. Всі ці послуги цілком безкоштовні.

Vietnamese: Nếu quý vị hoặc người nào đó mà quý vị đang giúp đỡ cần dịch vụ ngôn ngữ, hãy gọi Số điện thoại miễn phí **1-833-236-2366** (TTY: **711**). Chúng tôi cũng cung cấp các dịch vụ và hỗ trợ dành cho người khuyết tật, chẳng hạn như tài liệu bằng chữ nổi, bản PDF và bản in cỡ lớn dễ đọc. Các dịch vụ này được cung cấp miễn phí cho quý vị.



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Tus qauv tshuaj no tau kho thaum 06/01/2024.

Ib Qho Lus Tseem Ceeb Txog Yam koj Them rau Cov Tshuaj Tiv Thaiv Kab Mob - Ib txhia tshuaj tiv thaiv xam tias yog tshuaj kho mob. Lwm cov tshuaj tiv thaiv xam tias yog Part D Cov Tshuaj. Peb lub phiaj xwm saib xyuas feem yuav luag tag cov tshuaj tiv thaiv nyob rau Part D yam koj tsis tau them nyiaj li.

Yog xav paub ntau ntxiv txog ntaub ntawv tsis ntev los no thiab lwm cov lus nug, tiv tauj Wellcare Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm **1-800-431-9007** los sis Wellcare CalViva Health Dual Align Lub Chaw Pab Cuam Tus Tswv Cuab ntawm **1-833-236-2366**, rau cov neeg siv TTY, **711**, ncua thaum Lub Kaum Hlis Ntuj Tim 1 thiab Peb Hlis Ntuj Tim 31, cov neeg sawv cev yuav koom hauv Hnub Monday–Sunday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, ncua Lub Plaub Hlis Ntuj Tim 1 thiab Lub Cuaj Hlis Ntuj Tim 30, cov neeg sawv cev yuav koom hauv Hnub Monday–Friday, thaum 8 teev sawv ntxov txog 8 teev tsaus ntuj, los sis mus saib **wellcare.com/healthnetCA**.

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