



PROSSAM
2023 Formulary
(List of Covered Drugs)

INTRODUCCIÓN / INTRODUCTION

Tú cubierta de farmacia utiliza una lista de medicamentos o formulario que te ofrece una selección amplia de opciones de tratamiento.

Your pharmacy coverage uses a Drug List or Formulary that offers you a wide selection of treatment options.

Los medicamentos en esta lista o formulario han sido seleccionados por su seguridad, efectividad en el tratamiento de condiciones de salud y su costo. Dicha lista consiste en medicamentos con leyenda aprobados por la Administración de Drogas y Alimentos (FDA, por sus siglas en inglés) que están disponibles en el mercado y algunos medicamentos sin leyenda federal (OTC, por sus siglas en inglés), para las clasificaciones que se incluyen.

The medications in this list or formulary have been selected based on their safety, cost, and effectiveness to treat health conditions. This list features prescription drugs that have been approved by the Food and Drug Administration (FDA) and are available in the market, as well as certain over-the-counter drugs (OTC) under the included categories.

En las páginas a continuación presentamos toda la información requerida para facilitarte la lectura e interpretación.

The following pages include all the information you will need to help you read and interpret the List.

Te exhortamos a que evalúes con tu médico los medicamentos disponibles para tratar tu condición. Nuestra lista tiene una diversidad de medicamentos por condición, los cuales incluyen genéricos y de marca preferidos. Si utilizas estos medicamentos contribuyes a mantener los costos del beneficio de farmacia en un nivel razonable y tus copagos serán menores.

We urge you to talk with your doctor and evaluate the medications available to treat your condition. Our List contains a variety of medications classified by condition, including generic and preferred brand drugs. If you use these drugs, you will be helping keep the pharmacy benefit costs at a reasonable level, and your co-payments will also be lower.

Este documento presenta la forma en que se diseñó la lista de medicamentos, así como una descripción de los éditos para verificar dosis y terapias duplicadas. Se muestran los medicamentos por clasificación terapéutica, los apéndices y una lista por orden alfabético (Índice) de los medicamentos disponibles en esta lista.

This document shows how the Drug List was designed, as well as a description of the edits to review dosages and duplicate therapies. The drugs are listed by therapeutic categories. This document also includes appendixes and an alphabetical list (index) of the drugs available in the List.

PA = Prior Authorization [Pre Autorización]; QL = Quantity Limit [Límite de Cantidad];

ST = Step Therapy [Terapia Escalonada]; AL = Age Limit [Límite de Edad]

La inclusión de un medicamento a la Lista no indica que el mismo está cubierto. El certificado del beneficio de Farmacia es el que determina si el medicamento está cubierto o excluido en la póliza. Por ejemplo, los agentes para la disfunción eréctil, las hormonas de crecimiento y los medicamentos sin leyenda federal (OTC) usualmente están excluidos de la cubierta de farmacia.

The inclusion of a drug in the List does not mean the drug is covered. The Pharmacy Benefit Certificate determines whether the drug will be covered or excluded by the plan. For example, drugs to treat erectile dysfunction, growth hormones, and over-the-counter drugs (OTC) are not normally covered by the drug plans.

PARTE I - DISEÑO DE LA LISTA DE MEDICAMENTOS / PART I- DRUG LIST DESIGN

¿Cómo usar esta lista de medicamentos? / How do I use the drug list?

La forma más fácil para conseguir los medicamentos es buscando en el índice. El índice provee una lista por orden alfabético de todos los medicamentos que se presentan en este documento, tanto los de marca como los genéricos. Al lado del medicamento está el número de la página donde encontrarás cómo está cubierto. Busca la página indicada en el índice y encuentra el nombre del medicamento en las columnas.

The easiest way to find the drugs is through the Index. The Index gives you an alphabetical list of all the drugs in this document, both brand name and generic drugs. Next to the drug, you will see the page number where you can find the coverage information. Turn to the page listed in the Index to find the name of the drug listed in the columns.

¿Cuánto pagas por los medicamentos cubiertos? / How much will you pay for covered drugs?

Los medicamentos se clasifican por niveles. Los niveles a continuación identifican los distintos niveles de costo compartido, o sea, lo que pagas por cada medicamento en la receta.

- Nivel 1 –medicamentos genéricos
- Nivel 2 – medicamentos de marca preferidos
- Nivel 3 – medicamentos de marca no preferidos
- Nivel 4 – productos especializados preferido
- Nivel 5 – productos especializados no preferidos

The Drug List is arranged by levels. These levels, listed below, point out the cost-sharing levels, which is what you pay for each prescribed drug.

- *Level 1 –generic drugs*
- *Level 2 – preferred brand drugs*
- *Level 3 – non-preferred brand drugs*
- *Level 4 –specialty preferred products*
- *Level 5 –specialty non-preferred products*

¿Qué son medicamentos genéricos (Nivel 1)? / What are generic drugs (Level 1)?

PA = Prior Authorization [Pre Autorización]; QL = Quantity Limit [Límite de Cantidad];
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Un medicamento genérico tiene el mismo ingrediente activo en la fórmula que el de marca. Usualmente cuestan menos que los de marca y están aprobados por la Administración Federal de Drogas y Alimentos (FDA, por sus siglas en inglés).

A generic drug has the same ingredient in identical amount as the brand name drug. They cost less than brand name drugs and are approved by the Food and Drug Administration (FDA).

Este nivel incluye genéricos que han sido seleccionados por el Comité de Farmacia y Terapéutica como agentes preferidos luego de su evaluación de seguridad, eficacia y costo.

This level includes generic drugs selected by the Pharmacy and Therapeutics Committee as preferred agents, after evaluating their safety, efficiency, and cost.

Éstos están escritos en letras minúsculas (ejemplo, nabumetone).

Generic drugs are listed in lowercase (e.g., nabumetone) in the Drug List.

¿Qué son medicamentos de marca preferidos (Nivel 2)? / What are preferred brand drugs (Level 2)?

Este nivel incluye medicamentos de marca que han sido seleccionados por el Comité de Farmacia y Terapéutica como agentes preferidos luego de su evaluación de seguridad, eficacia y costo. Los mismos están identificados a la derecha como nivel 2. En aquellas clases terapéuticas donde no hay genéricos, te exhortamos a que uses como primera alternativa aquellos identificados como preferidos.

This tier has brand name drugs that have been classified by the Pharmacy and Therapeutics Committee as preferred agents, after an in-depth review in terms of safety, efficiency, and cost. These are identified as level 3 next to the name of the drug. For therapeutic classes where there are no generic drugs, we suggest you use the preferred drugs as your first choice.

¿Qué son medicamentos de marca no preferidos (Nivel 3)? / What are non-preferred brand drugs (Level 3)?

Un medicamento es clasificado como marca no preferido porque existen alternativas en los niveles anteriores con menos efectos secundarios o son más costo-efectivos. Si el asegurado obtiene un medicamento de marca del nivel 4, tiene que pagar un costo mayor.

A brand name drug is classified as non-preferred when there are other choices in other drug levels that have fewer side effects and/or are more cost effective. If you obtain a level 4 drug, you will have to pay more for that drug.

¿Qué son productos especializados (Nivel 4)? / What are specialty products (Level 4)?

Los medicamentos especializados requieren una administración o manejo especial, por su composición compleja. Estos se usan para tratar condiciones crónicas y de alto riesgo que requieren un manejo especial de la condición.

Specialty Drugs need special administration and/or management due to their complex composition. These are used to treat high-risk and chronic health conditions that need special management.

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¿Qué son productos especializados no preferidos (Nivel 5)? / What are non-preferred specialty products (Level 5)?

Los medicamentos en este nivel 5 también tienen un arreglo especial para su despacho, pero tienen un costo mayor que los del nivel 4. Éstos se usan para el tratamiento de condiciones crónicas y de alto riesgo que requieren una administración y manejo especial.

The drugs in level 5 also require special handling for supply but have higher copay when compared to level 4 drugs. These are used to treat chronic and high-risk health conditions that need special handling and administration.

Guías de Referencia / Reference Guidelines

Medicamentos que requieren preautorización (PA) / Medications that require preauthorization (PA)

En un esfuerzo por garantizar la seguridad y el uso apropiado de los medicamentos, algunos necesitan una preautorización para ser adquiridos. Los mismos se han identificado a la derecha con **PA (requiere preautorización)**, en cuyo caso, la farmacia gestiona la preautorización previo al despacho del medicamento.

To guarantee the safe and effective use of drugs, there are certain drugs that need a preauthorization (PA) before dispensing it. A PA is placed next to the name of the drug to identify them, and the pharmacy will process the preauthorization before dispensing it.

Los medicamentos que requieren preautorización usualmente son candidatos al uso inapropiado o están relacionados con un costo elevado por lo que requieren que el asegurado cumpla con unos criterios antes de ser despachados. Aquellos medicamentos que han sido identificados que requieren preautorización deben satisfacer los criterios clínicos establecidos según lo haya determinado el Comité de Farmacia y Terapéutica. Estos criterios clínicos se han desarrollado de acuerdo con la literatura médica actual.

The drugs that need preauthorization are those for which you need to meet certain criteria before using them, are likely to be used inadequately, or have a higher cost. Drugs identified as needing preauthorization should fulfill the clinical criteria, as determined by the Pharmacy and Therapeutics Committee. The criteria have been developed as stated by current medical literature.

También, tienen requisito de PA aquellos medicamentos cuyos costos excedan \$750.00 (verifica tu certificado de beneficio ya que esta cantidad puede ser diferente). La farmacia enviará copia de la receta y se encargarán del proceso.

Drugs whose cost goes beyond \$750.00 will require a preauthorization (check your health plan benefits, as this amount could be different). The pharmacy will send a copy of the prescription to the health plan and will take care of the process.

Programa de Terapia Escalonada (ST) / Step Therapy Program (ST)

En algunos casos, requerimos que utilices primero un medicamento como terapia para tu condición antes de que cubramos otro para esa condición (Terapia Escalonada, *ST* por sus siglas en inglés). Por ejemplo, si el Medicamento A y el Medicamento B se usan ambos para tratar tu condición médica, nosotros requerimos que utilices primero el Medicamento A. Si el Medicamento A no te funciona, entonces cubrimos el Medicamento B.

In some cases, you need to try one drug first to treat your health condition before we cover other drugs for the same condition (Step Therapy). For example, if Drug A and Drug B both treat your health condition, you may need to use Drug A first. If Drug A does not work for you, then we will cover Drug B.

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Límites de cantidad (QL) / *Limits on the amount to be dispensed (QL)*

Ciertos medicamentos tienen un límite en la cantidad a despacharse. Estas cantidades se establecen de acuerdo a lo sugerido por el fabricante como la cantidad máxima adecuada que no está asociada a efectos adversos y la cual es efectiva para el tratamiento de una condición. En el área de Requisitos de la lista de medicamentos se identificaron los límites en la cantidad a despacharse, en aquellos que aplique.

Certain drugs have a limit on the amount to be dispensed. These amounts are established according to the manufacturer's recommendation for adequate amounts to avoid adverse effects and effectively treat a health condition. The Requirements column in the Drug List points out the quantity limits for applicable drugs.

Límites de especialidad médica (SL) / *Medical specialty limits (SL)*

Algunos medicamentos tienen un límite en la especialidad médica. Estos límites de especialidad se establecen de acuerdo a la literatura médica actual.

Some drugs have medical specialty limits. These limits are established in line with current medical literature.

Límites de edad (AL) / *Age limits (AL)*

Algunos medicamentos tienen un límite de edad.

Some drugs have an age limit.

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Leyenda para Símbolos y Abreviaturas de Requisitos/Límites / Legend for Symbols and Abbreviations for Requirements/Limits

Símbolo / Abreviatura (Symbol / Abbreviation)		Descripción	Description
AL	Límite de Edad		<i>Age Limit</i>
PA	Preautorización La farmacia es responsable de solicitar y obtener una preautorización, antes de despachar el medicamento		<i>Prior authorization The pharmacy is responsible of requesting and obtaining a prior authorization, before dispensing the prescription drug.</i>
QL	Medicamentos para los cuales existe algún límite en la cantidad que la farmacia puede despachar		<i>Medications associated to a quantity limit</i>
SL	Medicamentos para los cuales existe algún límite en la especialidad médica que debe manejar la terapia con estos productos		<i>Medications associated to a limit in the medical specialty that must manage the therapy with these products.</i>
ST	Terapia Escalonada		<i>Step Therapy</i>

Listado de Abreviaturas para Formas de Dosificación y Rutas de Administración / Dosage Form and Route of Administration Abbreviations

Description [Descripción]	Abbreviation [Abreviatura]
aerosol [aerosol]	aer
buccal tablet [tableta bucal]	bucc tab
cartridge [cartucho]	cart
concentrate [concentrado]	conc
cream [crema]	crm
delayed release [liberación tardía]	dr
emulsion [emulsión]	emul
extended release [liberación prolongada]	er
external [externo]	ext
external liquid [líquido externo]	ext liq
external packet [paquete externo]	ext pckt

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Description [Descripción]	Abbreviation [Abreviatura]
external shampoo [champú externo]	shampoo
external swab [hisopo externo]	swab
gel [gel]	gel
hydrochlorothiazide	hctz
inhalation aerosol powder breath activated [polvo en aerosol activado por respiración para inhalación]	inh aer pwdr br act
inhalation aerosol solution [solución en aerosol para inhalación]	inh aer
inhalation capsule [cápsula para inhalación]	inh cap
inhalation inhaler [inhalador para inhalación]	inhaler
inhalation nebulization solution [solución para inhalación por nebulización]	inh neb soln
inhalation solution [solución para inhalación]	inh soln
inhalation suspension [suspensión para inhalación]	inh susp
injection / injectable [inyección / inyectable]	inj
injection device [dispositivo inyectable]	inj dev
intramuscular injectable [inyectable intramuscular]	im inj
intramuscular oil [aceite intramuscular]	im oil
intrauterine device [dispositivos intrauterinos]	iud
intravenous [intravenoso]	iv
intravenous injectable [inyectable intravenoso]	iv inj
irrigation solution [solución para irrigación]	irrig soln
lotion [loción]	lot
miscellaneous [misceláneo]	misc
mouth/throat lozenge [pastilla para boca/garganta]	m/t lozg
mouth/throat paste [pasta para boca/garganta]	m/t paste
mouth/throat solution [solución para boca/garganta]	m/t soln
nasal inhaler [inhalador nasal]	nasal inh
ointment [ungüento]	oint
ophthalmic [oftálmico]	ophth
ophthalmic gel forming solution [solución formadora de gel para uso oftálmico]	ophth gfs

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Description [Descripción]	Abbreviation [Abreviatura]
oral capsule [cápsula oral]	cap
oral capsule delayed release particles [cápsula oral de partículas de liberación tardía]	cap dr prt
oral capsule sprinkle [cápsula oral para espolvorear]	cap sprinkle
oral elixir [elixir oral]	oral elix
oral granules [gránulos orales]	oral gr
oral packet [paquete oral]	pckt
oral syrup [jarabe oral]	syr
oral tablet [tableta oral]	tab
oral tablet abuse-deterrent [tableta oral para disuasión de abuso]	tab abuse-deterr
oral tablet chewable [tableta oral masticable]	tab chew
oral tablet disintegrating [tableta de desintegración oral]	tab disint
oral tablet disintegrating soluble [tableta oral de desintegración soluble]	tab disint sol
oral tablet dispersible [tableta oral dispersable]	odt
oral tablet soluble [tableta oral soluble]	tab sol
oral therapy pack [paquete de terapia oral]	pack
pen-injector [inyector tipo pluma]	pen-inj
powder [polvo]	pwdr
prefilled syringe [jeringuilla precargada]	pfs
rectal [rectal]	rect
solution [solución]	soln
subcutaneous [subcutáneo]	sc
sublingual film [cinta sublingual]	subl film
sublingual tablet [tableta sublingual]	tab subl
suppository [supositorio]	supp
suspension [suspensión]	susp
transdermal [transdermal]	td
transdermal patch [parcho transdermal]	td patch
transdermal patch biweekly [parcho transdermal bisemanal]	tdsw patch
transdermal patch weekly [parcho transdermal semanal]	tdwk patch

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Description [Descripción]	Abbreviation [Abreviatura]
vaginal [vaginal]	vag
vaginal diaphragm [diafragma vaginal]	vag diaph

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
THERAPEUTIC CATEGORY [CATEGORÍA TERAPÉUTICA]			
Therapeutic Class [Clase Terapéutica]			
ANALGESICS - DRUGS TO TREAT PAIN, INFLAMMATION, AND MUSCLE AND JOINT CONDITIONS [ANALGÉSICOS - MEDICAMENTOS PARA TRATAR DOLOR, INFLAMACIÓN Y MÚSCULO Y CONDICIONES DE LAS ARTICULACIONES]			
Analgesics - Miscellaneous Analgesics [Analgésicos - Analgésicos Misceláneos]			
BAC 50-325-40 mg tab	1		
BUPAP 50-300 mg tab	3		
<i>butalbital-acetaminophen 50-300 mg tab</i>	1	ORBIVAN CF	
<i>butalbital-acetaminophen 50-325 mg tab</i>	1	PHRENILIN	
<i>butalbital-apap-caffeine 50-325-40 mg cap, 50-325-40 mg tab</i>	1	ESGIC	
<i>butalbital-apap-caffeine 50-300-40 mg cap</i>	1	FIORICET	
<i>butalbital-aspirin-caffeine 50-325-40 mg cap</i>	1	FIORINAL	
ESGIC 50-325-40 mg cap, 50-325-40 mg tab	3		
FIORICET 50-300-40 mg cap	3		
QUTENZA 8 % ext kit	5		PA
QUTENZA (2 PATCH) 8 % ext kit	5		PA
TENCON 50-325 mg tab	3		
ZEBUTAL 50-325-40 mg cap	3		
Nonsteroidal Anti-inflammatory Drugs - Pain/anti-inflammatory Drugs [Medicamentos Antiinflamatorios No-Esteroidales - Medicamentos Para Dolor/Antiinflamatorios]			
ANAPROX DS 550 mg tab	3		
ARTHROTEC 50-0.2 mg tab dr, 75-0.2 mg tab dr	3		
CAMBIA 50 mg pckt	3		QL(9 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CELEBREX 100 mg cap, 200 mg cap, 400 mg cap, 50 mg cap	3		
<i>celecoxib 100 mg cap, 200 mg cap, 400 mg cap, 50 mg cap</i>	1	CELEBREX	
DAYPRO 600 mg tab	3		
<i>diclofenac epolamine 1.3 % patch</i>	1	FLECTOR	
<i>diclofenac potassium 50 mg tab</i>	1	CATAFLAM	
<i>diclofenac potassium 25 mg cap</i>	1	ZIPSOR	
<i>diclofenac sodium 1.5 % ext soln</i>	1	PENNSAID	
<i>diclofenac sodium 3 % gel</i>	4	SOLARAZE	PA
<i>diclofenac sodium 25 mg tab dr, 50 mg tab dr, 75 mg tab dr</i>	1	VOLTAREN	
<i>diclofenac sodium 1 % gel</i>	1	VOLTAREN	
<i>diclofenac sodium er 100 mg tab er 24 hr</i>	1	VOLTAREN XR	
<i>diclofenac-misoprostol 50-0.2 mg tab dr, 75-0.2 mg tab dr</i>	1	ARTHROTEC	
<i>diflunisal 500 mg tab</i>	1	DOLOBID	
DUEXIS 800-26.6 mg tab	3		
EC-NAPROSYN 375 mg tab dr, 500 mg tab dr	3		
<i>etodolac 200 mg cap, 300 mg cap, 400 mg tab, 500 mg tab</i>	1	LODINE	
<i>etodolac er 400 mg tab er 24 hr, 500 mg tab er 24 hr, 600 mg tab er 24 hr</i>	1	LODINE XL	
FELDENE 10 mg cap, 20 mg cap	3		
<i>fenoprofen calcium 400 mg cap, 600 mg tab</i>	1	NALFON	
FLECTOR 1.3 % patch	3		
<i>flurbiprofen 100 mg tab, 50 mg tab</i>	1	ANSAID	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
IBU 400 mg tab, 600 mg tab, 800 mg tab	1		
<i>ibuprofen 400 mg tab, 600 mg tab, 800 mg tab</i>	1	MOTRIN	
<i>ibuprofen-famotidine 800-26.6 mg tab</i>	1	DUEXIS	
INDOCIN 50 mg rect supp	3		
INDOCIN 25 mg/5ml susp	3		
<i>indomethacin 25 mg cap, 50 mg cap</i>	1	INDOCIN	
<i>indomethacin er 75 mg cap er</i>	1	INDOCIN	
<i>ketoprofen 50 mg cap</i>	1	ORUDIS	
<i>ketoprofen er 200 mg cap er 24 hr</i>	1	ORUVAIL	
<i>ketorolac tromethamine 60 mg/2ml im soln</i>	1		
<i>ketorolac tromethamine 15.75 mg/spray nasal soln</i>	1	SPRIX	
<i>ketorolac tromethamine 10 mg tab</i>	1	TORADOL	
<i>ketorolac tromethamine 15 mg/ml inj soln, 30 mg/ml inj soln</i>	1	TORADOL	
<i>meclofenamate sodium 100 mg cap, 50 mg cap</i>	1	MECLOMEN	
<i>mefenamic acid 250 mg cap</i>	1	PONSTEL	
<i>meloxicam 15 mg tab, 7.5 mg tab</i>	1	MOBIC	
<i>meloxicam 7.5 mg/5ml susp</i>	1	MOBIC	
<i>nabumetone 500 mg tab, 750 mg tab</i>	1	RELAFEN	
NALFON 400 mg cap	3		
<i>napro 15 % crm</i>	1		
NAPROSYN 500 mg tab	3		
NAPROSYN 125 mg/5ml susp	3		
<i>naproxen 250 mg tab, 375 mg tab, 375 mg tab dr, 500 mg tab, 500 mg tab dr</i>	1	NAPROSYN	
<i>naproxen 125 mg/5ml susp</i>	1	NAPROSYN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>naproxen dr 500 mg tab dr</i>	1	NAPROSYN	
<i>naproxen sodium 275 mg tab, 550 mg tab</i>	1	ANAPROX	
<i>naproxen sodium er 375 mg tab er 24 hr, 500 mg tab er 24 hr, 750 mg tab er 24 hr</i>	1	NAPRELAN	
<i>naproxen-esomeprazole mg 375-20 mg tab dr, 500-20 mg tab dr</i>	1	VIMOVO	
<i>oxaprozin 600 mg tab</i>	1	DAYPRO	
<i>piroxicam 10 mg cap, 20 mg cap</i>	1	FELDENE	
PRIALT 100 mcg/ml it soln, 500 mcg/20ml it soln, 500 mcg/5ml it soln	3		
<i>salsalate 500 mg tab, 750 mg tab</i>	1	DISALCID	
SPRIX 15.75 mg/spray nasal soln	3		
<i>sulindac 150 mg tab, 200 mg tab</i>	1	CLINORIL	
<i>tolmetin sodium 400 mg cap, 600 mg tab</i>	1	TOLECTIN	
ZIPSOR 25 mg cap	3		
Opioid Analgesics, Long-acting - Opioid Pain Relievers [Analgésicos Opioides, Larga Duración - Opioides Para Alivio De Dolor]			
<i>buprenorphine 10 mcg/hr tdwk patch, 20 mcg/hr tdwk patch, 5 mcg/hr tdwk patch</i>	1	BUTRANS	PA
BUTRANS 10 mcg/hr tdwk patch, 20 mcg/hr tdwk patch, 5 mcg/hr tdwk patch	3		PA
CONZIP 100 mg cap er 24 hr, 200 mg cap er 24 hr, 300 mg cap er 24 hr	3		
<i>fentanyl 100 mcg/hr td patch 72 hr, 12 mcg/hr td patch 72 hr, 25 mcg/hr td patch 72 hr,</i>	1	DURAGESIC	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>50 mcg/hr td patch 72 hr, 75 mcg/hr td patch 72 hr</i>			
<i>levorphanol tartrate 2 mg tab</i>	1		
<i>morphine sulfate er 10 mg cap er 24 hr, 100 mg cap er 24 hr, 20 mg cap er 24 hr, 30 mg cap er 24 hr, 50 mg cap er 24 hr, 60 mg cap er 24 hr, 80 mg cap er 24 hr</i>	1	KADIAN	
<i>morphine sulfate er 100 mg tab er, 15 mg tab er, 200 mg tab er, 30 mg tab er, 60 mg tab er</i>	1	MS CONTIN	
<i>morphine sulfate er beads 120 mg cap er 24 hr, 30 mg cap er 24 hr, 45 mg cap er 24 hr, 60 mg cap er 24 hr, 75 mg cap er 24 hr, 90 mg cap er 24 hr</i>	1	AVINZA	
MS CONTIN 100 mg tab er, 15 mg tab er, 200 mg tab er, 30 mg tab er, 60 mg tab er	3		
NUCYNTA ER 100 mg tab er 12 hr, 150 mg tab er 12 hr, 200 mg tab er 12 hr, 250 mg tab er 12 hr, 50 mg tab er 12 hr	3		
<i>oxycodone hcl er 10 mg tab er 12 hr abuse-deterr, 20 mg tab er 12 hr abuse-deterr, 40 mg tab er 12 hr abuse-deterr, 80 mg tab er 12 hr abuse-deterr</i>	1	OXYCONTIN	
OXYCONTIN 10 mg tab er 12 hr abuse-deterr, 15 mg tab er 12 hr abuse-deterr, 20 mg tab er 12 hr abuse-deterr, 30 mg tab er 12 hr abuse-deterr, 40 mg tab er 12 hr abuse-deterr, 60 mg tab er 12 hr abuse-deterr, 80 mg tab er 12 hr abuse-deterr	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>oxymorphone hcl er 15 mg tab er 12 hr, 7.5 mg tab er 12 hr</i>	1	OPANA ER	
<i>tramadol hcl er 100 mg cap er 24 hr, 200 mg cap er 24 hr, 300 mg cap er 24 hr</i>	1	CONZIP	
<i>tramadol hcl er 100 mg tab er 24 hr, 200 mg tab er 24 hr, 300 mg tab er 24 hr</i>	1	ULTRAM ER	
<i>tramadol hcl er (biphasic) 100 mg tab er 24 hr, 200 mg tab er 24 hr, 300 mg tab er 24 hr</i>	1	RYZOLT	
Opioid Analgesics, Short-acting - Opioid Pain Relievers [Analgésicos Opioides, Corta Duración - Opioides Para Alivio De Dolor]			
<i>acetaminophen-codeine 300-15 mg tab, 300-30 mg tab, 300-60 mg tab</i>	1	TYLENOL WITH CODEINE	
<i>acetaminophen-codeine 120-12 mg/5ml soln</i>	1	TYLENOL WITH CODEINE	
ACTIQ 1200 mcg bucc lozg on hd, 1600 mcg bucc lozg on hd, 200 mcg bucc lozg on hd, 400 mcg bucc lozg on hd, 600 mcg bucc lozg on hd, 800 mcg bucc lozg on hd	3		
ASCOMP-CODEINE 50-325-40-30 mg cap	3		
<i>butalbital-apap-caff-cod 50-325-40-30 mg cap</i>	1	FIORICET WITH CODEINE	
<i>butalbital-asa-caff-codeine 50-325-40-30 mg cap</i>	1	FIORINAL WITH CODEINE	
<i>butorphanol tartrate 1 mg/ml inj soln, 10 mg/ml nasal soln, 2 mg/ml inj soln</i>	1	STADOL	PA
<i>codeine sulfate 15 mg tab, 30 mg tab, 60 mg tab</i>	1		
DEMEROL 100 mg/ml inj soln, 25 mg/ml inj soln, 50 mg/ml inj soln, 75 mg/ml inj soln	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
DILAUDID 2 mg tab, 4 mg tab, 8 mg tab	3		
DILAUDID 1 mg/ml inj soln, 1 mg/ml liq	3		
<i>duramorph 0.5 mg/ml inj soln, 1 mg/ml inj soln</i>	1		
ENDOCET 2.5-325 mg tab	3		
<i>endocet 10-325 mg tab, 5-325 mg tab, 7.5-325 mg tab</i>	1	PERCOCET	
<i>fentanyl citrate 1200 mcg bucc lozg on hd, 1600 mcg bucc lozg on hd, 200 mcg bucc lozg on hd, 400 mcg bucc lozg on hd, 600 mcg bucc lozg on hd, 800 mcg bucc lozg on hd</i>	1	ACTIQ	
<i>fentanyl citrate 100 mcg bucc tab, 200 mcg bucc tab, 400 mcg bucc tab, 600 mcg bucc tab, 800 mcg bucc tab</i>	1	FENTORA	
FENTORA 100 mcg bucc tab, 200 mcg bucc tab, 400 mcg bucc tab, 600 mcg bucc tab, 800 mcg bucc tab	3		
<i>hydrocodone-acetaminophen 2.5-108 mg/5ml soln, 5-217 mg/10ml soln, 7.5-325 mg/15ml soln</i>	1	HYCET	
<i>hydrocodone-acetaminophen 10-325 mg tab, 5-325 mg tab, 7.5-325 mg tab</i>	1	NORCO	
<i>hydrocodone-acetaminophen 10-300 mg tab, 5-300 mg tab, 7.5-300 mg tab</i>	1	VICODIN	
<i>hydrocodone-ibuprofen 10-200 mg tab, 5-200 mg tab</i>	1	REPREXAIN	
<i>hydrocodone-ibuprofen 7.5-200 mg tab</i>	1	VICOPROFEN	
<i>hydromorphone hcl 1 mg/ml inj soln</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>hydromorphone hcl 2 mg tab, 4 mg tab, 8 mg tab</i>	1	DILAUDID	
<i>hydromorphone hcl 1 mg/ml liq</i>	1	DILAUDID	
<i>hydromorphone hcl er 12 mg tab er 24 hr, 16 mg tab er 24 hr, 32 mg tab er 24 hr, 8 mg tab er 24 hr</i>	1		
<i>hydromorphone hcl pf 10 mg/ml inj soln, 50 mg/5ml inj soln, 500 mg/50ml inj soln</i>	1	DILAUDID	
<i>meperidine hcl 50 mg tab</i>	1	DEMEROL	
<i>meperidine hcl 100 mg/ml inj soln, 25 mg/ml inj soln, 50 mg/5ml soln, 50 mg/ml inj soln</i>	1	DEMEROL	
<i>morphine sulfate 15 mg tab, 30 mg tab</i>	1		
<i>morphine sulfate 10 mg/5ml soln, 20 mg/5ml soln</i>	1		
<i>morphine sulfate (concentrate) 100 mg/5ml soln</i>	1	ROXANOL	
<i>morphine sulfate (pf) 0.5 mg/ml inj soln, 1 mg/ml inj soln</i>	1		
<i>nalbuphine hcl 10 mg/ml inj soln</i>	1	NUBAIN	PA
NUCYNTA 100 mg tab, 50 mg tab, 75 mg tab	3		
<i>orphenadrine-aspirin-caffeine 25-385-30 mg tab</i>	1		
OXAYDO 5 mg tab, 7.5 mg tab	3		
<i>oxycodone hcl 5 mg cap</i>	1	OXYIR	
<i>oxycodone hcl 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab, 5 mg tab</i>	1	ROXICODONE	
<i>oxycodone hcl 100 mg/5ml oral conc, 5 mg/5ml soln</i>	1	ROXICODONE	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>oxycodone-acetaminophen 10-325 mg tab, 2.5-325 mg tab, 5-325 mg tab, 7.5-325 mg tab</i>	1	PERCOCET	
<i>oxycodone-acetaminophen 10-300 mg tab, 5-300 mg tab</i>	1	PRIMLEV	
<i>oxymorphone hcl 10 mg tab, 5 mg tab</i>	1	OPANA	
<i>pentazocine-naloxone hcl 50-0.5 mg tab</i>	1	TALWIN NX	PA
PERCOCET 10-325 mg tab, 2.5-325 mg tab, 5-325 mg tab, 7.5-325 mg tab	3		
ROXICODONE 15 mg tab, 30 mg tab	3		
SUBSYS 800 mcg subl liq	3		
<i>tramadol hcl 50 mg tab</i>	1	ULTRAM	
<i>tramadol-acetaminophen 37.5-325 mg tab</i>	1	ULTRACET	
ANESTHETICS - DRUGS FOR NUMBING [ANESTÉSICOS - MEDICAMENTOS PARA ADORMECER]			
Local Anesthetics [Anestésicos Locales]			
<i>agoneaze 2.5-2.5 % ext kit</i>	1	EMLA/TEGADERM	
<i>anodyne lpt 2.5-2.5 % ext kit</i>	1	EMLA/TEGADERM	
<i>ethyl chloride ext aer</i>	1		
GEBAUERS PAIN EASE ext aer	3		
GEBAUERS SPRAY AND STRETCH ext aer	3		
GLYDO 2 % External Prefilled Syringe	3		
LIDO BDK 2.5-2.5 % ext kit	3		
<i>lidocaine 5 % oint</i>	1		
<i>lidocaine 5 % patch</i>	1	LIDODERM	
<i>lidocaine hcl 3 % crm</i>	1	LIDAMANTLE	
<i>lidocaine hcl 3 % lot</i>	1	LIDAMANTLE	
<i>lidocaine hcl 4 % ext soln</i>	1	XYLOCAINE	
<i>lidocaine hcl urethral/mucosal 2 % External Prefilled Syringe</i>	1	GLYDO	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>lidocaine-prilocaine 2.5-2.5 % crm</i>	1	EMLA	
<i>lidocaine-prilocaine 2.5-2.5 % ext kit</i>	1	EMLA/TEGADERM	
LIDODERM 5 % patch	3		
<i>lidopin 3 % crm</i>	1	LIDAMANTLE	
LIVIXIL PAK 2.5-2.5 % ext kit	3		
<i>premium lidocaine 5 % oint</i>	1		
RELADOR PAK 2.5-2.5 % ext kit	3		
RELADOR PAK PLUS 2.5-2.5 % ext kit	3		
SYNERA 70-70 mg patch	3		
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS - DRUGS FOR OVERDOSE OR DETERRENCE [AGENTES CONTRA LA ADICCIÓN/TRATAMIENTO DE ABUSO DE SUSTANCIAS - MEDICAMENTOS PARA LA SOBREDOSIS O DISUASIÓN]			
Alcohol Deterrents/anti-craving - Antidotes/deterrents/protectants [Disuasivos Del Alcohol/Anti Ansiedad - Antídotos/Disuasivos/Protectores]			
<i>acamprosate calcium 333 mg tab dr</i>	1	CAMPRAL	
<i>disulfiram 250 mg tab, 500 mg tab</i>	1	ANTABUSE	
Opioid Dependence Treatments - Antidotes/deterrents/protectants [Tratamientos Para La Dependencia De Opioides - Antídotos/Disuasivos/Protectores]			
<i>buprenorphine hcl 2 mg tab subl, 8 mg tab subl</i>	1	SUBUTEX	PA
<i>buprenorphine hcl-naloxone hcl 12-3 mg subl film, 2-0.5 mg subl film, 2-0.5 mg tab subl, 4-1 mg subl film, 8-2 mg subl film, 8-2 mg tab subl</i>	1	SUBOXONE	PA
<i>naltrexone hcl 50 mg tab</i>	1	REVIA	
VIVITROL 380 mg im susp	5		PA
ZUBSOLV 1.4-0.36 mg tab subl, 5.7-1.4 mg tab subl	3		PA
Opioid Reversal Agents - Antidotes/deterrents/protectants [Agentes Para La Reversión De Opioides - Antídotos/Disuasivos/Protectores]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>naloxone hcl 0.4 mg/ml inj soln, 0.4 mg/ml inj soln cart, 2 mg/2ml inj soln pfs, 4 mg/10ml inj soln</i>	1	NARCAN	
Smoking Cessation Agents - Deterrents [Agentes Para La Cesación De Fumar - Disuasivos]			
<i>bupropion hcl er (smoking det) 150 mg tab er 12 hr</i>	1	ZYBAN	
NICOTROL 10 mg inhaler	2		
NICOTROL NS 10 mg/ml nasal soln	2		
ANTIBACTERIALS - DRUGS TO TREAT BACTERIAL INFECTIONS [ANTIBACTERIANOS - MEDICAMENTOS PARA TRATAR INFECCIONES BACTERIANAS]			
Aminoglycosides - Antibiotics [Aminoglucósidos - Antibióticos]			
<i>amikacin sulfate 1 gm/4ml inj soln</i>	1		
<i>amikacin sulfate 500 mg/2ml inj soln</i>	1	AMIKIN	
<i>gentamicin sulfate 10 mg/ml inj soln</i>	1		
<i>gentamicin sulfate 0.1 % crm, 0.1 % oint</i>	1	GARAMYCIN	
<i>gentamicin sulfate 40 mg/ml inj soln</i>	1	GENTAK	
<i>neomycin sulfate 500 mg tab</i>	1		
<i>streptomycin sulfate 1 gm im soln</i>	1		
Antibacterials, Other - Antibiotics [Antibacterianos, Otros - Antibióticos]			
ALTABAX 1 % oint	3		
BETADINE OPHTHALMIC PREP 5 % ophth soln	3		
CLEOCIN 100 mg vag supp, 150 mg cap, 300 mg cap, 75 mg cap	3		
CLEOCIN 2 % vag crm	3		
CLEOCIN 75 mg/5ml soln	3		
CLEOCIN PHOSPHATE 900 mg/6ml inj soln	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CLEOCIN-T 1 % lot	3		
CLINDACIN ETZ 1 % swab	3		
CLINDACIN-P 1 % swab	3		
CLINDAGEL 1 % gel	3		
<i>clindamycin hcl 150 mg cap, 300 mg cap, 75 mg cap</i>	1	CLEOCIN	
<i>clindamycin palmitate hcl 75 mg/5ml soln</i>	1	CLEOCIN	
<i>clindamycin phosphate 2 % vag crm</i>	1	CLEOCIN	
<i>clindamycin phosphate 900 mg/6ml inj soln</i>	1	CLEOCIN	
<i>clindamycin phosphate 1 % swab</i>	1	CLEOCIN-T	AL
<i>clindamycin phosphate 1 % gel</i>	1	CLEOCIN-T	AL
<i>clindamycin phosphate 1 % ext soln, 1 % gel, 1 % lot</i>	1	CLEOCIN-T	AL
<i>clindamycin phosphate 1 % foam</i>	1	EVOCLIN	AL
<i>colistimethate sodium (cba) 150 mg inj soln</i>	1	COLY-MYCIN	
COLY-MYCIN M 150 mg inj soln	3		
FEM PH 0.9-0.025 % vag gel	3		
FLAGYL 375 mg cap	3		
<i>fosfomicin tromethamine 3 gm pckt</i>	1	MONUROL	
HIPREX 1 gm tab	3		
LINCOCIN 300 mg/ml inj soln	3		
<i>lincomycin hcl 300 mg/ml inj soln</i>	1	LINCOCIN	
<i>linezolid 600 mg/300ml iv soln</i>	4	ZYVOX	PA
<i>linezolid 600 mg tab</i>	5	ZYVOX	PA
<i>linezolid 100 mg/5ml susp</i>	5	ZYVOX	PA
<i>linezolid in sodium chloride 600-0.9 mg/300ml-% iv soln</i>	4	ZYVOX	PA
MACROBID 100 mg cap	3		
<i>mafenide acetate 5 % ext pckt</i>	1	SULFAMYLON	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>methenamine hippurate 1 gm tab</i>	1	HIPREX	
<i>methenamine mandelate 1 gm tab</i>	1		
<i>metronidazole 250 mg tab, 375 mg cap, 500 mg tab</i>	1	FLAGYL	
<i>metronidazole 0.75 % vag gel</i>	1	METROGEL	
<i>mupirocin 2 % oint</i>	1	BACTROBAN	
<i>mupirocin calcium 2 % crm</i>	1	BACTROBAN	
<i>nitrofurantoin 25 mg/5ml susp</i>	1	FURADANTIN	
<i>nitrofurantoin macrocrystal 100 mg cap, 25 mg cap, 50 mg cap</i>	1	MACRODANTIN	
<i>nitrofurantoin monohyd macro 100 mg cap</i>	1	MACROBID	
<i>povidone-iodine 5 % ophth soln</i>	1	BETADINE OPHTHALMIC PREP	
SILVADENE 1 % crm	3		
<i>silver sulfadiazine 1 % crm</i>	1	SILVADENE	
SSD 1 % crm	3		
SULFAMYLON 5 % ext pckt	3		
SULFAMYLON 85 mg/gm crm	3		
<i>tigecycline 50 mg iv soln</i>	1	TYGACIL	
<i>trimethoprim 100 mg tab</i>	1	PROLOPRIM	
VANCOCIN 125 mg cap, 250 mg cap	5		PA
<i>vancomycin hcl 250 mg/5ml soln</i>	1	FIRVANQ	PA
<i>vancomycin hcl 125 mg cap, 250 mg cap</i>	1	VANCOCIN	
VANDAZOLE 0.75 % vag gel	3		
XIFAXAN 200 mg tab, 550 mg tab	5		PA
ZYVOX 600 mg tab	5		PA
ZYVOX 100 mg/5ml susp, 200 mg/100ml iv soln, 600 mg/300ml iv soln	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Beta-lactam, Cephalosporins - Antibiotics [Beta-Lactámicos, Cefalosporinas - Antibióticos]			
<i>cefaclor 250 mg cap, 500 mg cap</i>	1	CECLOR	
<i>cefaclor er 500 mg tab er 12 hr</i>	1	CECLOR CD	
<i>cefadroxil 1 gm tab, 500 mg cap</i>	1	DURICEF	
<i>cefadroxil 250 mg/5ml susp, 500 mg/5ml susp</i>	1	DURICEF	
<i>cefazolin sodium 1 gm inj soln, 500 mg inj soln</i>	1	ANCEF	
<i>cefdinir 300 mg cap</i>	1	OMNICEF	
<i>cefdinir 125 mg/5ml susp, 250 mg/5ml susp</i>	1	OMNICEF	
<i>cefepime hcl 1 gm inj soln, 2 gm iv soln</i>	1	MAXIPIME	
<i>cefixime 100 mg/5ml susp, 200 mg/5ml susp</i>	1	SUPRAX	
<i>cefpodoxime proxetil 100 mg tab, 200 mg tab</i>	1	VANTIN	
<i>cefpodoxime proxetil 100 mg/5ml susp, 50 mg/5ml susp</i>	1	VANTIN	
<i>cefprozil 250 mg tab, 500 mg tab</i>	1	CEFZIL	
<i>cefprozil 125 mg/5ml susp, 250 mg/5ml susp</i>	1	CEFZIL	
<i>ceftazidime 1 gm inj soln</i>	1	FORTAZ	
<i>ceftriaxone sodium 1 gm inj soln, 2 gm inj soln, 250 mg inj soln, 500 mg inj soln</i>	1	ROCEPHIN	
<i>cefuroxime axetil 250 mg tab, 500 mg tab</i>	1	CEFTIN	
<i>cefuroxime sodium 1.5 gm iv soln, 750 mg inj soln</i>	1	ZINACEF	
<i>cephalexin 250 mg tab, 500 mg tab</i>	1		
<i>cephalexin 250 mg cap, 500 mg cap, 750 mg cap</i>	1	KEFLEX	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>cephalexin 125 mg/5ml susp, 250 mg/5ml susp</i>	1	KEFLEX	
Beta-lactam, Penicillins - Antibiotics [Beta-Lactámicos, Penicilinas - Antibióticos]			
<i>amoxicillin 125 mg tab chew, 250 mg cap, 250 mg tab chew, 500 mg cap, 500 mg tab, 875 mg tab</i>	1	AMOXIL	
<i>amoxicillin 125 mg/5ml susp, 200 mg/5ml susp, 250 mg/5ml susp, 400 mg/5ml susp</i>	1	AMOXIL	
<i>amoxicillin-pot clavulanate 200-28.5 mg tab chew, 250-125 mg tab, 400-57 mg tab chew, 500-125 mg tab, 875-125 mg tab</i>	1	AUGMENTIN	
<i>amoxicillin-pot clavulanate 200-28.5 mg/5ml susp, 250-62.5 mg/5ml susp, 400-57 mg/5ml susp, 600-42.9 mg/5ml susp</i>	1	AUGMENTIN	
<i>amoxicillin-pot clavulanate er 1000-62.5 mg tab er 12 hr</i>	1	AUGMENTIN XR	
<i>ampicillin 500 mg cap</i>	1		
<i>ampicillin sodium 10 gm iv soln, 125 mg inj soln, 2 gm inj soln, 2 gm iv soln, 250 mg inj soln, 500 mg inj soln</i>	1		
<i>ampicillin sodium 1 gm inj soln</i>	1	TOTACILLIN-N	
AUGMENTIN 500-125 mg tab	3		
AUGMENTIN 125-31.25 mg/5ml susp	3		
AUGMENTIN ES-600 600-42.9 mg/5ml susp	3		
BICILLIN C-R 1200000 unit/2ml im susp	2		
BICILLIN C-R 900/300 900000-300000 unit/2ml im susp	2		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
BICILLIN L-A 1200000 unit/2ml im susp pfs, 2400000 unit/4ml im susp pfs, 600000 unit/ml im susp pfs	2		
<i>dicloxacillin sodium 250 mg cap, 500 mg cap</i>	1	DYCILL	
<i>nafcillin sodium 10 gm iv soln, 2 gm inj soln</i>	1		
<i>nafcillin sodium 1 gm inj soln</i>	1	NALLPEN	
<i>oxacillin sodium 1 gm inj soln, 10 gm iv soln, 2 gm inj soln</i>	1		
<i>penicillin g potassium 20000000 unit inj soln, 5000000 unit inj soln</i>	1	PFIZERPEN	
<i>penicillin g sodium 5000000 unit inj soln</i>	1		
<i>penicillin v potassium 500 mg tab</i>	1	PEN-VEE K	
<i>penicillin v potassium 250 mg tab</i>	1	VEETIDS	
<i>penicillin v potassium 125 mg/5ml soln, 250 mg/5ml soln</i>	1	VEETIDS	
PFIZERPEN 20000000 unit inj soln, 5000000 unit inj soln	3		
Macrolides - Antibiotics [Macrólidos - Antibióticos]			
<i>azithromycin 1 gm pckt, 250 mg tab, 500 mg tab, 600 mg tab</i>	1	ZITHROMAX	
<i>azithromycin 100 mg/5ml susp, 200 mg/5ml susp</i>	1	ZITHROMAX	
<i>clarithromycin 250 mg tab, 500 mg tab</i>	1	BIAXIN	
<i>clarithromycin 125 mg/5ml susp, 250 mg/5ml susp</i>	1	BIAXIN	
<i>clarithromycin er 500 mg tab er 24 hr</i>	1	BIAXIN XL	
DIFICID 200 mg tab	3		
E.E.S. 400 400 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
E.E.S. GRANULES 200 mg/5ml susp	3		
<i>ery 2 % pad</i>	1		AL
ERYGEL 2 % gel	3		
ERYPED 200 200 mg/5ml susp	3		
ERYPED 400 400 mg/5ml susp	3		
ERY-TAB 250 mg tab dr, 333 mg tab dr, 500 mg tab dr	3		
ERYTHROCIN STEARATE 250 mg tab	3		
<i>erythromycin 250 mg tab dr, 333 mg tab dr, 500 mg tab dr</i>	1	ERY-TAB	
<i>erythromycin 2 % ext soln</i>	1	ERYDERM	AL
<i>erythromycin 2 % gel</i>	1	ERYGEL	AL
<i>erythromycin base 250 mg cap dr prt, 250 mg tab</i>	1		
<i>erythromycin base 250 mg tab dr, 333 mg tab dr, 500 mg tab, 500 mg tab dr</i>	1	ERY-TAB	
<i>erythromycin ethylsuccinate 400 mg tab</i>	1	E.E.S.	
<i>erythromycin ethylsuccinate 200 mg/5ml susp, 400 mg/5ml susp</i>	1	ERYPED	
ZITHROMAX 1 gm pckt, 250 mg tab, 500 mg tab	3		
ZITHROMAX 100 mg/5ml susp, 200 mg/5ml susp	3		
ZITHROMAX TRI-PAK 500 mg tab	3		
ZITHROMAX Z-PAK 250 mg tab	3		
Ntibacterials, Other - Antibiotics [Antibacterianos, Otros - Antibióticos]			
<i>methenamine mandelate 0.5 gm tab</i>	1		
Quinolones - Antibiotics [Quinolonas - Antibióticos]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CIPRO 250 mg tab, 500 mg tab	3		
CIPRO 250 MG/5ML (5%) susp, 500 MG/5ML (10%) susp	3		
<i>ciprofloxacin hcl 100 mg tab, 250 mg tab, 500 mg tab, 750 mg tab</i>	1	CIPRO	
<i>levofloxacin 250 mg tab, 500 mg tab, 750 mg tab</i>	1	LEVAQUIN	
<i>levofloxacin 25 mg/ml soln</i>	1	LEVAQUIN	
<i>moxifloxacin hcl 400 mg tab</i>	1	AVELOX	
<i>ofloxacin 300 mg tab, 400 mg tab</i>	1	FLOXIN	
Sulfonamides - Antibiotics [Sulfonamidas - Antibióticos]			
BACTRIM 400-80 mg tab	3		
BACTRIM DS 800-160 mg tab	3		
KLARON 10 % lot	3		
<i>sulfacetamide sodium 10 % ophth soln</i>	1	BLEPH-10	
<i>sulfacetamide sodium 10 % ophth oint</i>	1	SODIUM SULAMYD	
<i>sulfacetamide sodium (acne) 10 % lot</i>	1	KLARON	AL
<i>sulfadiazine 500 mg tab</i>	1		
<i>sulfamethoxazole-trimethoprim 400-80 mg tab, 800-160 mg tab</i>	1	SEPTRA	
<i>sulfamethoxazole-trimethoprim 200-40 mg/5ml susp, 400-80 mg/5ml iv soln</i>	1	SEPTRA	
Tetracyclines - Antibiotics [Tetraciclinas - Antibióticos]			
<i>avidoxy 100 mg tab</i>	1	ADOXA	
AVIDOXY DK 100 mg cmb kit	3		
<i>demeclocycline hcl 150 mg tab, 300 mg tab</i>	1	DECLOMYCIN	
<i>doxycycline hyclate 100 mg tab dr, 150 mg tab dr, 75 mg tab dr</i>	1	DORYX	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>doxycycline hyclate 100 mg iv soln</i>	1	DOXY	
<i>doxycycline hyclate 20 mg tab</i>	1	PERIOSTAT	
<i>doxycycline hyclate 100 mg tab</i>	1	VIBRA-TABS	
<i>doxycycline hyclate 100 mg cap, 50 mg cap</i>	1	VIBRAMYCIN	
<i>doxycycline monohydrate 100 mg tab, 150 mg cap, 150 mg tab, 50 mg tab, 75 mg tab</i>	1	ADOXA	
<i>doxycycline monohydrate 100 mg cap, 50 mg cap, 75 mg cap</i>	1	MONODOX	
<i>doxycycline monohydrate 25 mg/5ml susp</i>	1	VIBRAMYCIN	
<i>minocycline hcl pwr</i>	1		
<i>minocycline hcl 100 mg tab, 50 mg tab, 75 mg tab</i>	1	DYNACIN	
<i>minocycline hcl 100 mg cap, 50 mg cap, 75 mg cap</i>	1	MINOCIN	
<i>minocycline hcl er 105 mg tab er 24 hr, 115 mg tab er 24 hr, 135 mg tab er 24 hr, 45 mg tab er 24 hr, 55 mg tab er 24 hr, 65 mg tab er 24 hr, 80 mg tab er 24 hr, 90 mg tab er 24 hr</i>	1	SOLODYN	
MONDOXYNE NL 100 mg cap	3		
SOLODYN 105 mg tab er 24 hr, 115 mg tab er 24 hr, 55 mg tab er 24 hr, 65 mg tab er 24 hr, 80 mg tab er 24 hr	3		
<i>tetracycline hcl 250 mg cap, 500 mg cap</i>	1		
VIBRAMYCIN 100 mg cap	3		
VIBRAMYCIN 25 mg/5ml susp	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ANTICONVULSANTS - DRUGS TO TREAT SEIZURES [ANTICONVULSIVOS - MEDICAMENTOS PARA TRATAR CONVULSIONES]			
Anticonvulsants, Other - Seizure Control Drugs [Anticonvulsivos, Otros - Medicamentos Para El Control De Convulsiones]			
KEPPRA 1000 mg tab, 250 mg tab, 500 mg tab, 750 mg tab	3		
KEPPRA 100 mg/ml soln	3		
KEPPRA XR 500 mg tab er 24 hr, 750 mg tab er 24 hr	3		
<i>levetiracetam 1000 mg tab, 250 mg tab, 500 mg tab, 750 mg tab</i>	1	KEPPRA	
<i>levetiracetam 100 mg/ml soln</i>	1	KEPPRA	
<i>levetiracetam er 500 mg tab er 24 hr, 750 mg tab er 24 hr</i>	1	KEPPRA XR	
<i>phenobarbital 20 mg/5ml oral elix</i>	1		
ROWEEPRA 500 mg tab	3		
Calcium Channel Modifying Agents - Seizure Control Drugs [Agentes Modificadores De Los Canales De Calcio - Medicamentos Para El Control De Convulsiones]			
CELONTIN 300 mg cap	3		
<i>ethosuximide 250 mg cap</i>	1	ZARONTIN	
<i>ethosuximide 250 mg/5ml soln</i>	1	ZARONTIN	
ZARONTIN 250 mg cap	3		
ZARONTIN 250 mg/5ml soln	3		
ZONEGRAN 100 mg cap, 25 mg cap	3		
<i>zonisamide 100 mg cap, 25 mg cap, 50 mg cap</i>	1	ZONEGRAN	
Gamma-aminobutyric Acid (gaba) Augmenting Agents - Seizure Control Drugs [Agentes Que Aumentan El Ácido Gamma-Aminobutírico (Gaba) - Medicamentos Para El Control De Convulsiones]			
<i>clobazam 10 mg tab, 20 mg tab</i>	1	ONFI	
<i>clobazam 2.5 mg/ml susp</i>	1	ONFI	
<i>clonazepam 0.125 mg tab disint, 0.25 mg tab disint, 0.5</i>	1	KLONOPIN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>mg tab, 0.5 mg tab disint, 1 mg tab, 1 mg tab disint, 2 mg tab, 2 mg tab disint</i>			
DEPAKOTE 125 mg tab dr, 250 mg tab dr, 500 mg tab dr	3		
DEPAKOTE ER 250 mg tab er 24 hr, 500 mg tab er 24 hr	3		
DEPAKOTE SPRINKLES 125 mg cap dr sprinkle	3		
DIASTAT ACUDIAL 10 mg rect gel, 20 mg rect gel	3		
DIASTAT PEDIATRIC 2.5 mg rect gel	3		
<i>diazepam 10 mg/2ml im soln auto-inj, 5 mg/ml inj soln</i>	1		
<i>diazepam 10 mg rect gel, 2.5 mg rect gel, 20 mg rect gel</i>	1	DIASTAT	
<i>divalproex sodium 125 mg cap dr sprinkle, 125 mg tab dr, 250 mg tab dr, 500 mg tab dr</i>	1	DEPAKOTE	
<i>divalproex sodium er 250 mg tab er 24 hr, 500 mg tab er 24 hr</i>	1	DEPAKOTE ER	
<i>gabapentin 100 mg cap, 300 mg cap, 400 mg cap, 600 mg tab, 800 mg tab</i>	1	NEURONTIN	
<i>gabapentin 250 mg/5ml soln, 300 mg/6ml soln</i>	1	NEURONTIN	
KLONOPIN 0.5 mg tab, 1 mg tab, 2 mg tab	3		
MYSOLINE 250 mg tab, 50 mg tab	3		
NAYZILAM 5 mg/0.1ml nasal soln	2		
NEURONTIN 100 mg cap, 300 mg cap, 400 mg cap, 600 mg tab, 800 mg tab	3		
NEURONTIN 250 mg/5ml soln	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>phenobarbital 100 mg tab, 15 mg tab, 16.2 mg tab, 30 mg tab, 32.4 mg tab, 60 mg tab, 64.8 mg tab, 97.2 mg tab</i>	1		
<i>primidone 250 mg tab, 50 mg tab</i>	1	MYSOLINE	
<i>tiagabine hcl 12 mg tab, 16 mg tab, 2 mg tab, 4 mg tab</i>	1	GABITRIL	
<i>valproic acid 250 mg cap</i>	1	DEPAKENE	
<i>valproic acid 250 mg/5ml soln</i>	1	DEPAKENE	
<i>vigabatrin 500 mg pckt, 500 mg tab</i>	4	SABRIL	PA
Glutamate Reducing Agents - Seizure Control Drugs [Agentes Reductores De Glutamato - Medicamentos Para El Control De Convulsiones]			
<i>felbamate 400 mg tab, 600 mg tab</i>	1	FELBATOL	
<i>felbamate 600 mg/5ml susp</i>	1	FELBATOL	
FELBATOL 400 mg tab, 600 mg tab	3		
FELBATOL 600 mg/5ml susp	3		
LAMICTAL 100 mg tab, 150 mg tab, 200 mg tab, 25 mg tab, 25 mg tab chew, 5 mg tab chew	3		
LAMICTAL XR 100 mg tab er 24 hr, 200 mg tab er 24 hr, 21 x 25 MG & 7 x 50 mg oral kit, 25 & 50 & 100 mg oral kit, 25 mg tab er 24 hr, 250 mg tab er 24 hr, 300 mg tab er 24 hr, 50 & 100 & 200 mg oral kit, 50 mg tab er 24 hr	3		
<i>lamotrigine 100 mg tab, 100 mg tab disint, 150 mg tab, 200 mg tab, 200 mg tab disint, 25 mg tab, 25 mg tab chew, 25 mg tab disint, 5 mg tab chew, 50 mg tab disint</i>	1	LAMICTAL	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>lamotrigine 25 & 50 & 100 mg oral kit</i>	1	LAMICTAL ODT	
<i>lamotrigine er 100 mg tab er 24 hr, 200 mg tab er 24 hr, 25 mg tab er 24 hr, 250 mg tab er 24 hr, 300 mg tab er 24 hr, 50 mg tab er 24 hr</i>	1	LAMICTAL	
<i>lamotrigine starter kit-blue 35 x 25 mg oral kit</i>	1	LAMICTAL STARTER	
<i>lamotrigine starter kit-green 84 x 25 MG & 14x100 mg oral kit</i>	1	LAMICTAL STARTER	
<i>lamotrigine starter kit-orange 42 x 25 MG & 7 x 100 mg oral kit</i>	1	LAMICTAL STARTER	
TOPAMAX 100 mg tab, 200 mg tab, 25 mg tab, 50 mg tab	3		
TOPAMAX SPRINKLE 15 mg cap sprinkle, 25 mg cap sprinkle	3		
<i>topiramate 100 mg tab, 15 mg cap sprinkle, 200 mg tab, 25 mg cap sprinkle, 25 mg tab, 50 mg tab</i>	1	TOPAMAX	
Sodium Channel Agents - Seizure Control Drugs [Agentes De Los Canales De Sodio - Medicamentos Para El Control De Convulsiones]			
BANZEL 200 mg tab, 400 mg tab	3		
<i>carbamazepine 100 mg tab chew, 200 mg tab</i>	1	TEGRETOL	
<i>carbamazepine 100 mg/5ml susp</i>	1	TEGRETOL	
<i>carbamazepine er 100 mg cap er 12 hr, 200 mg cap er 12 hr, 300 mg cap er 12 hr</i>	1	CARBATROL	
<i>carbamazepine er 100 mg tab er 12 hr, 200 mg tab er 12 hr, 400 mg tab er 12 hr</i>	1	TEGRETOL XR	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CARBATROL 100 mg cap er 12 hr, 200 mg cap er 12 hr, 300 mg cap er 12 hr	3		
DILANTIN 100 mg cap, 30 mg cap	2		
DILANTIN 125 mg/5ml susp	2		
DILANTIN INFATABS 50 mg tab chew	3		
EPITOL 200 mg tab	3		
EQUETRO 100 mg cap er 12 hr, 200 mg cap er 12 hr, 300 mg cap er 12 hr	3		
<i>fosphenytoin sodium 100 mg pe/2ml inj soln, 500 mg pe/10ml inj soln</i>	1	CEREBYX	
<i>lacosamide 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab</i>	1	VIMPAT	
<i>lacosamide 10 mg/ml soln</i>	1	VIMPAT	
<i>oxcarbazepine 150 mg tab, 300 mg tab, 600 mg tab</i>	1	TRILEPTAL	
<i>oxcarbazepine 300 mg/5ml susp</i>	1	TRILEPTAL	
PHENYTEK 200 mg cap, 300 mg cap	3		
<i>phenytoin 50 mg tab chew</i>	1	DILANTIN	
<i>phenytoin 125 mg/5ml susp</i>	1	DILANTIN	
PHENYTOIN INFATABS 50 mg tab chew	3		
<i>phenytoin sodium 50 mg/ml inj soln</i>	1	DILANTIN	
<i>phenytoin sodium extended 100 mg cap, 200 mg cap, 300 mg cap</i>	1	DILANTIN	
<i>rufinamide 40 mg/ml susp</i>	1	BANZEL	
TEGRETOL 200 mg tab	3		
TEGRETOL 100 mg/5ml susp	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
TEGRETOL-XR 100 mg tab er 12 hr, 200 mg tab er 12 hr, 400 mg tab er 12 hr	3		
TRILEPTAL 150 mg tab, 300 mg tab, 600 mg tab	3		
TRILEPTAL 300 mg/5ml susp	3		
VIMPAT 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab	3		
VIMPAT 10 mg/ml soln	3		
ANTIDEMENTIA AGENTS - DRUGS TO TREAT ALZHEIMER'S DISEASE AND DEMENTIA [AGENTES ANTIDEMENCIA - MEDICAMENTOS PARA TRATAR LA ENFERMEDAD DE ALZHEIMER Y DEMENCIA]			
Antidementia Agents, Other - Alzheimer's Disease And Dementia Drugs [Agentes Antidemencia, Otros - Medicamentos Para La Enfermedad De Alzheimer Y Demencia]			
<i>ergoloid mesylates 1 mg tab</i>	1	HYDERGINE	
Cholinesterase Inhibitors - Alzheimer's Disease And Dementia Drugs [Inhibidores De La Colinesterasa - Medicamentos Para La Enfermedad De Alzheimer Y Demencia]			
ARICEPT 10 mg tab, 23 mg tab, 5 mg tab	3		
<i>donepezil hcl 10 mg tab, 23 mg tab, 5 mg tab</i>	1	ARICEPT	
<i>donepezil hcl 10 mg tab disint, 5 mg tab disint</i>	1	ARICEPT ODT	
EXELON 13.3 mg/24hr td patch 24hr, 4.6 mg/24hr td patch 24hr, 9.5 mg/24hr td patch 24hr	2		
<i>galantamine hydrobromide 12 mg tab, 4 mg tab, 8 mg tab</i>	1	RAZADYNE	
<i>galantamine hydrobromide 4 mg/ml soln</i>	1	RAZADYNE	
<i>galantamine hydrobromide er 16 mg cap er 24 hr, 24 mg cap er 24 hr, 8 mg cap er 24 hr</i>	1	RAZADYNE ER	
<i>rivastigmine 13.3 mg/24hr td patch 24hr, 4.6 mg/24hr td</i>	1	EXELON	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>patch 24hr, 9.5 mg/24hr td patch 24hr</i>			
<i>rivastigmine tartrate 1.5 mg cap, 3 mg cap, 4.5 mg cap, 6 mg cap</i>	1	EXELON	
N-methyl-d-aspartate (nmda) Receptor Antagonist - Alzheimer's Disease And Dementia Drugs [Antagonistas Del Receptor N-Metil-D-Aspartato (Nmda) - Medicamentos Para La Enfermedad De Alzheimer Y Demencia]			
<i>memantine hcl 10 mg tab, 28 x 5 MG & 21 x 10 mg tab, 5 mg tab</i>	1	NAMENDA	
<i>memantine hcl 2 mg/ml soln</i>	1	NAMENDA	
NAMENDA 10 mg tab, 5 mg tab	2		
NAMENDA TITRATION PAK 28 x 5 MG & 21 x 10 mg tab	2		
ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION [ANTIDEPRESIVOS - MEDICAMENTOS PARA TRATAR LA DEPRESIÓN]			
Antidepressants, Other - Antidepressants [Antidepresivos, Otros - Antidepresivos]			
APLENZIN 174 mg tab er 24 hr, 348 mg tab er 24 hr, 522 mg tab er 24 hr	3		
<i>bupropion hcl 100 mg tab, 75 mg tab</i>	1	WELLBUTRIN	
<i>bupropion hcl er (sr) 100 mg tab er 12 hr, 150 mg tab er 12 hr, 200 mg tab er 12 hr</i>	1	WELLBUTRIN SR	
<i>bupropion hcl er (xl) 150 mg tab er 24 hr, 300 mg tab er 24 hr</i>	1	WELLBUTRIN XL	
<i>mirtazapine 15 mg tab, 15 mg tab disint, 30 mg tab, 30 mg tab disint, 45 mg tab, 45 mg tab disint, 7.5 mg tab</i>	1	REMERON	
REMERON 15 mg tab, 30 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
REMERON SOLTAB 15 mg tab disint, 30 mg tab disint, 45 mg tab disint	3		
WELLBUTRIN SR 100 mg tab er 12 hr, 150 mg tab er 12 hr, 200 mg tab er 12 hr	3		
WELLBUTRIN XL 150 mg tab er 24 hr, 300 mg tab er 24 hr	3		
Monoamine Oxidase Inhibitors - Antidepressants [Inhibidores De La Monoaminoxidasa - Antidepresivos]			
EMSAM 12 mg/24hr td patch 24hr, 6 mg/24hr td patch 24hr, 9 mg/24hr td patch 24hr	3		
MARPLAN 10 mg tab	3		
NARDIL 15 mg tab	3		
PARNATE 10 mg tab	3		
<i>phenelzine sulfate 15 mg tab</i>	1	NARDIL	
<i>tranylcypromine sulfate 10 mg tab</i>	1	PARNATE	
Ssris/snrts (selective Serotonin Reuptake Inhibitors/serotonin And Norepinephrine Reuptake Inhibitor) - Antidepressants [Isrsts/Irsnts (Inhibidores Selectivos De La Recaptación De Serotonina/Inhibidores De La Recaptación De Serotonina Y Norepinefrina) - Antidepresivos]			
CELEXA 10 mg tab, 20 mg tab, 40 mg tab	3		
<i>citalopram hydrobromide 10 mg tab, 20 mg tab, 40 mg tab</i>	1	CELEXA	
<i>citalopram hydrobromide 10 mg/5ml soln</i>	1	CELEXA	
CYMBALTA 20 mg cap dr prt, 30 mg cap dr prt, 60 mg cap dr prt	3		
<i>desvenlafaxine er 100 mg tab er 24 hr, 50 mg tab er 24 hr</i>	1	KHEDEZLA	
<i>desvenlafaxine succinate er 100 mg tab er 24 hr, 25 mg tab er 24 hr, 50 mg tab er 24 hr</i>	1	PRISTIQ	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>duloxetine hcl 20 mg cap dr prt, 30 mg cap dr prt, 60 mg cap dr prt</i>	1	CYMBALTA	
EFFEXOR XR 150 mg cap er 24 hr, 37.5 mg cap er 24 hr, 75 mg cap er 24 hr	3		
<i>escitalopram oxalate 10 mg tab, 20 mg tab, 5 mg tab</i>	1	LEXAPRO	
<i>escitalopram oxalate 5 mg/5ml soln</i>	1	LEXAPRO	
<i>fluoxetine hcl 10 mg cap, 10 mg tab, 20 mg cap, 20 mg tab, 40 mg cap, 60 mg tab, 90 mg cap dr</i>	1	PROZAC	
<i>fluoxetine hcl 20 mg/5ml soln</i>	1	PROZAC	
<i>fluoxetine hcl (pmdd) 10 mg tab, 20 mg tab</i>	1	SARAFEM	
<i>fluvoxamine maleate 100 mg tab, 25 mg tab, 50 mg tab</i>	1	LUVOX	
<i>fluvoxamine maleate er 100 mg cap er 24 hr, 150 mg cap er 24 hr</i>	1	LUVOX CR	
LEXAPRO 10 mg tab, 20 mg tab, 5 mg tab	3		
<i>nefazodone hcl 100 mg tab, 150 mg tab, 200 mg tab, 250 mg tab, 50 mg tab</i>	1	SERZONE	
<i>olanzapine-fluoxetine hcl 12-25 mg cap, 12-50 mg cap, 3-25 mg cap, 6-25 mg cap, 6-50 mg cap</i>	1	SYMBYAX	
<i>paroxetine hcl 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab</i>	1	PAXIL	
<i>paroxetine hcl 10 mg/5ml susp</i>	1	PAXIL	
<i>paroxetine hcl er 12.5 mg tab er 24 hr, 25 mg tab er 24 hr, 37.5 mg tab er 24 hr</i>	1	PAXIL CR	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
PAXIL 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab	3		
PAXIL 10 mg/5ml susp	3		
PAXIL CR 12.5 mg tab er 24 hr, 25 mg tab er 24 hr, 37.5 mg tab er 24 hr	3		
PRISTIQ 100 mg tab er 24 hr, 25 mg tab er 24 hr, 50 mg tab er 24 hr	2		
PROZAC 10 mg cap, 20 mg cap, 40 mg cap	3		
<i>sertraline hcl 100 mg tab, 25 mg tab, 50 mg tab</i>	1	ZOLOFT	
<i>sertraline hcl 20 mg/ml oral conc</i>	1	ZOLOFT	
SYMBYAX 3-25 mg cap, 6-25 mg cap	3		
<i>trazodone hcl 100 mg tab, 150 mg tab, 300 mg tab, 50 mg tab</i>	1	DESYREL	
<i>venlafaxine hcl 100 mg tab, 25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab</i>	1	EFFEXOR	
<i>venlafaxine hcl er 150 mg tab er 24 hr, 225 mg tab er 24 hr, 37.5 mg tab er 24 hr, 75 mg tab er 24 hr</i>	1		
<i>venlafaxine hcl er 150 mg cap er 24 hr, 37.5 mg cap er 24 hr, 75 mg cap er 24 hr</i>	1	EFFEXOR XR	
VIIBRYD 10 mg tab, 20 mg tab, 40 mg tab	3		
<i>vilazodone hcl 10 mg tab, 20 mg tab, 40 mg tab</i>	1	VIIBRYD	
ZOLOFT 100 mg tab, 25 mg tab, 50 mg tab	3		
ZOLOFT 20 mg/ml oral conc	3		
Tricyclics - Antidepressants [Tricíclicos - Antidepresivos]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>amitriptyline hcl 10 mg tab, 100 mg tab, 150 mg tab, 25 mg tab, 50 mg tab, 75 mg tab</i>	1	ELAVIL	
<i>amoxapine 100 mg tab, 150 mg tab, 25 mg tab, 50 mg tab</i>	1	ASENDIN	
ANAFRANIL 25 mg cap, 50 mg cap, 75 mg cap	3		
<i>chlordiazepoxide-amitriptyline 10-25 mg tab, 5-12.5 mg tab</i>	1	LIMBITROL	
<i>clomipramine hcl 25 mg cap, 50 mg cap, 75 mg cap</i>	1	ANAFRANIL	
<i>desipramine hcl 10 mg tab, 100 mg tab, 150 mg tab, 25 mg tab, 50 mg tab, 75 mg tab</i>	1	NORPRAMIN	
<i>doxepin hcl 10 mg cap, 100 mg cap, 150 mg cap, 25 mg cap, 50 mg cap, 75 mg cap</i>	1	SINEQUAN	
<i>doxepin hcl 10 mg/ml oral conc</i>	1	SINEQUAN	
<i>imipramine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	1	TOFRANIL	
<i>imipramine pamoate 100 mg cap, 125 mg cap, 150 mg cap, 75 mg cap</i>	1	TOFRANIL-PM	
NORPRAMIN 10 mg tab, 25 mg tab	3		
<i>nortriptyline hcl 10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap</i>	1	PAMELOR	
<i>nortriptyline hcl 10 mg/5ml soln</i>	1	PAMELOR	
PAMELOR 10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap	3		
<i>perphenazine-amitriptyline 2-10 mg tab, 2-25 mg tab, 4-10 mg tab, 4-25 mg tab, 4-50 mg tab</i>	1	TRIAVIL	
<i>protriptyline hcl 10 mg tab, 5 mg tab</i>	1	VIVACTIL	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>trimipramine maleate 100 mg cap, 25 mg cap, 50 mg cap</i>	1	SURMONTIL	
ANTIEMETICS - DRUGS TO TREAT NAUSEA AND VOMITING [ANTIEMÉTICOS - MEDICAMENTOS PARA TRATAR NÁUSEA Y VÓMITO]			
Antiemetics, Other - Nausea And Vomiting Drugs [Antieméticos, Otros - Medicamentos Para Náusea Y Vómito]			
ANTIVERT 50 mg tab	3		
<i>dimenhydrinate 50 mg/ml inj soln</i>	1		
<i>meclizine hcl 12.5 mg tab, 25 mg tab, 50 mg tab</i>	1	ANTIVERT	
PHENERGAN 25 mg/ml inj soln, 50 mg/ml inj soln	3		
<i>promethazine hcl 12.5 mg rect supp, 12.5 mg tab, 25 mg rect supp, 25 mg tab, 50 mg tab</i>	1	PHENERGAN	
<i>promethazine hcl 25 mg/ml inj soln, 50 mg/ml inj soln, 6.25 mg/5ml soln, 6.25 mg/5ml syr</i>	1	PHENERGAN	
PROMETHEGAN 12.5 mg rect supp, 25 mg rect supp, 50 mg rect supp	3		
<i>scopolamine 1 mg/3days td patch 72 hr</i>	1	TRANSDERM-SCOP	
TIGAN 100 mg/ml im soln	3		
TRANSDERM-SCOP 1 mg/3days td patch 72 hr	3		
<i>trimethobenzamide hcl 300 mg cap</i>	1	TIGAN	
Emetogenic Therapy Adjuncts - Nausea And Vomiting Drugs [Terapias Adyuvantes Emetogénicas - Medicamentos Para Náusea Y Vómito]			
ANZEMET 50 mg tab	3		
<i>aprepitant 125 mg cap, 40 mg cap, 80 & 125 mg cap, 80 mg cap</i>	1	EMEND	
<i>dronabinol 10 mg cap, 2.5 mg cap, 5 mg cap</i>	1	MARINOL	
EMEND 80 mg cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
EMEND TRI-PACK 80 & 125 mg cap	3		
<i>granisetron hcl 1 mg tab</i>	1	KYTRIL	
MARINOL 2.5 mg cap	3		
<i>ondansetron 4 mg tab disint, 8 mg tab disint</i>	1	ZOFRAN ODT	
<i>ondansetron hcl 4 mg/2ml inj soln pfs</i>	1		
<i>ondansetron hcl 24 mg tab, 4 mg tab, 8 mg tab</i>	1	ZOFRAN	
<i>ondansetron hcl 4 mg/2ml inj soln, 4 mg/5ml soln, 40 mg/20ml inj soln</i>	1	ZOFRAN	
SANCUSO 3.1 mg/24hr td patch	3		
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS [ANTIFUNGALES - MEDICAMENTOS PARA TRATAR INFECCIONES FÚNGICAS]			
Antifungals - Fungal Infection Drugs [Antifungales - Medicamentos Para Infección Fúngica]			
<i>amphotericin b 50 mg iv soln</i>	1	FUNGIZONE	
ANCOBON 250 mg cap, 500 mg cap	3		
CANCIDAS 50 mg iv soln, 70 mg iv soln	5		PA
<i>casposfungin acetate 50 mg iv soln, 70 mg iv soln</i>	4	CANCIDAS	PA
CICLODAN 8 % ext soln	3		
<i>ciclopirox 0.77 % gel</i>	1	LOPROX	
<i>ciclopirox 1 % shampoo</i>	1	LOPROX	
<i>ciclopirox 8 % ext soln</i>	1	PENLAC	
<i>ciclopirox olamine 0.77 % crm</i>	1	LOPROX	
<i>ciclopirox olamine 0.77 % ext susp</i>	1	LOPROX	
<i>ciclopirox treatment 8 % ext kit</i>	1	PENLAC	
<i>clotrimazole 1 % crm</i>	1	LOTRIMIN	
<i>clotrimazole 10 mg m/t troche</i>	1	MYCELEX	
<i>clotrimazole 1 % ext soln</i>	1	MYCELEX	
<i>clotrimazole af 1 % crm</i>	1	LOTRIMIN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>clotrimazole-betamethasone 1-0.05 % crm</i>	1	LOTRISONE	
<i>clotrimazole-betamethasone 1-0.05 % lot</i>	1	LOTRISONE	
CRESEMBA 186 mg cap, 372 mg iv soln	3		PA
<i>cvs miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	1		
<i>cvs miconazole 3 combo-suppl 200 & 2 mg-% (9gm) vag kit</i>	1		
DERMAZENE 1-1 % crm	3		
DIFLUCAN 100 mg tab, 150 mg tab, 200 mg tab	3		
DIFLUCAN 10 mg/ml susp, 40 mg/ml susp	3		
<i>econazole nitrate 1 % crm</i>	1	SPECTAZOLE	
<i>eql miconazole 3 200 & 2 mg-% (9gm) vag kit</i>	1		
ERTACZO 2 % crm	3		
EXODERM 25-1 % lot	3		
<i>fluconazole 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab</i>	1	DIFLUCAN	
<i>fluconazole 10 mg/ml susp, 40 mg/ml susp</i>	1	DIFLUCAN	
<i>flucytosine 250 mg cap, 500 mg cap</i>	1	ANCOBON	
<i>gnp miconazole 3 200 & 2 mg-% (9gm) vag kit</i>	1		
<i>griseofulvin microsize 500 mg tab</i>	1	GRIFULVIN V	
<i>griseofulvin microsize 125 mg/5ml susp</i>	1	GRIFULVIN V	
<i>griseofulvin ultramicrosize 125 mg tab, 250 mg tab</i>	1	GRIS-PEG	
<i>hydrocortisone-iodoquinol 1-1 % crm</i>	1		
<i>iodoquinol-hc-aloe polysacch 1-2-1 % gel</i>	1	ALCORTIN A	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>itraconazole 100 mg cap</i>	1	SPORANOX	
<i>itraconazole 10 mg/ml soln</i>	1	SPORANOX	
<i>ketoconazole 2 % foam</i>	1	EXTINA	
<i>ketoconazole 200 mg tab</i>	1	NIZORAL	
<i>ketoconazole 2 % crm</i>	1	NIZORAL	
<i>ketoconazole 2 % shampoo</i>	1	NIZORAL	
KETODAN 2 % ext kit, 2 % foam	3		
LOPROX 1 % shampoo	3		
<i>micafungin sodium 100 mg iv soln, 50 mg iv soln</i>	4	MYCAMINE	PA
<i>miconazole 3 200 mg vag supp</i>	1	MONISTAT	
<i>miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	1		
<i>miconazole 3 combo pack app 200 & 2 mg-% (9gm) vag kit</i>	1		
<i>miconazole 3 combo-supp 200 & 2 mg-% (9gm) vag kit</i>	1		
<i>miconazole-zinc oxide-petrolat 0.25-15-81.35 % oint</i>	1	VUSION	
MONISTAT 3 COMBINATION PACK 200 & 2 mg-% (9gm) vag kit	1		
MONISTAT 3 COMBO PACK APP 200 & 2 mg-% (9gm) vag kit	1		
MYCAMINE 100 mg iv soln, 50 mg iv soln	5		PA
<i>naftifine hcl 1 % crm, 2 % crm</i>	1	NAFTIN	
NYAMYC 100000 unit/gm ext pwdr	3		
<i>nystatin 500000 unit tab</i>	1	MYCOSTATIN	
<i>nystatin 100000 unit/gm crm, 100000 unit/gm ext pwdr, 100000 unit/gm oint</i>	1	MYCOSTATIN	
<i>nystatin 100000 unit/ml m/t susp</i>	1	MYCOSTATIN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>nystatin-triamcinolone</i> 100000-0.1 unit/gm-% crm, 100000-0.1 unit/gm-% oint	1	MYCOLOG	
NYSTOP 100000 unit/gm ext pwr	3		
<i>oxiconazole nitrate 1 % crm</i>	1	OXISTAT	
OXISTAT 1 % crm	3		
OXISTAT 1 % lot	3		
<i>px miconazole 3-day combo</i> 200 & 2 mg-% (9gm) vag kit	1		
<i>ra miconazole 3 combo pack</i> 200 & 2 mg-% (9gm) vag kit	1		
<i>ra miconazole 3 combo pack</i> <i>app</i> 200 & 2 mg-% (9gm) vag kit	1		
<i>sm miconazole 3</i> 200 & 2 mg- % (9gm) vag kit	1		
<i>sm miconazole 3 applicator</i> 200 & 2 mg-% (9gm) vag kit	1		
<i>sulconazole nitrate 1 % crm</i>	1	EXELDERM	
<i>sulconazole nitrate 1 % ext</i> <i>soln</i>	1	EXELDERM	
<i>terbinafine hcl 250 mg tab</i>	1	LAMISIL	QL(84 / 90)
<i>terconazole 0.4 % vag crm,</i> <i>0.8 % vag crm</i>	1	TERAZOL	
<i>terconazole 80 mg vag supp</i>	1	TERAZOL 3	
VAGISTAT-3 200 & 2 mg-% (9gm) vag kit	1		
VFEND 200 mg tab, 50 mg tab	5		PA
VFEND 40 mg/ml susp	5		PA
<i>voriconazole 200 mg tab, 50</i> <i>mg tab</i>	4	VFEND	PA
<i>voriconazole 40 mg/ml susp</i>	4	VFEND	PA
VUSION 0.25-15-81.35 % oint	3		
XOLEGEL COREPAK 2 & 1 % ext kit	3		
XOLEGEL DUO/HEAD & SHOULDERS 2 & 1 % ext kit	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
XOLEGEL DUO/XOLEX 2 & 1 % ext kit	3		
ANTIGOUT AGENTS - DRUGS TO TREAT GOUT [AGENTES CONTRA LA GOTA - MEDICAMENTOS PARA TRATAR LA GOTA]			
Antigout Agents - Gout Drugs [Agentes Contra La Gota - Medicamentos Para La Gota]			
<i>allopurinol 100 mg tab, 300 mg tab</i>	1	ZYLOPRIM	
<i>colchicine 0.6 mg tab</i>	1	COLCRYS	
<i>colchicine-probenecid 0.5-500 mg tab</i>	1	COLBENEMID	
COLCRYS 0.6 mg tab	3		
<i>febuxostat 40 mg tab, 80 mg tab</i>	1	ULORIC	
<i>probenecid 500 mg tab</i>	1	BENEMID	
ULORIC 40 mg tab, 80 mg tab	3		
ZYLOPRIM 100 mg tab, 300 mg tab	3		
ANTI-INFLAMMATORY AGENTS - DRUGS TO TREAT INFLAMMATION [AGENTES ANTIINFLAMATORIOS - MEDICAMENTOS PARA TRATAR LA INFLAMACIÓN]			
Glucocorticoids - Drugs To Treat Inflammation [Glucocorticoides - Medicamentos Para Tratar Inflamación]			
<i>anucort-hc 25 mg rect supp</i>	1		
ANUSOL-HC 25 mg rect supp	3		
ANUSOL-HC 2.5 % crm	3		
EPIFOAM 1-1 % foam	3		
HEMMOREX-HC 25 mg rect supp, 30 mg rect supp	3		
<i>hydrocortisone (perianal) 2.5 % crm</i>	1	ANUSOL HC	
<i>hydrocortisone (perianal) 1 % crm</i>	1	PROCTOCORT	
<i>hydrocortisone ace-pramoxine 2.5-1 % crm</i>	1	PRAMOSONE	
<i>hydrocortisone acetate 25 mg rect supp</i>	1		
<i>hydrocortisone acetate 30 mg rect supp</i>	1	PROCTOCORT	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
PRAMOSONE 1-1 % crm, 1-1 % oint, 1-2.5 % crm, 1-2.5 % oint	3		
PRAMOSONE 1-1 % lot, 1-2.5 % lot	3		
PROCTOCORT 30 mg rect supp	3		
PROCTOCORT 1 % crm	3		
PROCTO-MED HC 2.5 % crm	3		
PROCTOSOL HC 2.5 % crm	3		
PROCTOZONE-HC 2.5 % crm	3		
ANTIMIGRAINE AGENTS - DRUGS TO TREAT MIGRAINES [AGENTES ANTIMIGRAÑA - MEDICAMENTOS PARA TRATAR LA MIGRAÑA]			
Ergot Alkaloids - Migraine Drugs [Alcaloides De Ergot - Medicamentos Para Migraña]			
CAFERGOT 1-100 mg tab	3		QL(30 / 30)
<i>dihydroergotamine mesylate 1 mg/ml inj soln</i>	1	D.H.E. 45	QL(3 / 30)
<i>dihydroergotamine mesylate 4 mg/ml nasal soln</i>	1	MIGRANAL	QL(8 / 30)
ERGOMAR 2 mg tab subl	3		QL(20 / 30)
<i>ergotamine-caffeine 1-100 mg tab</i>	1	CAFERGOT	QL(30 / 30)
MIGERGOT 2-100 mg rect supp	3		QL(12 / 30)
MIGRANAL 4 mg/ml nasal soln	3		QL(8 / 30)
Serotonin (5-ht) 1b/1d Receptor Agonists - Migraine Drugs [Agonistas Receptores De Serotonina (5-Ht) 1B/1D - Medicamentos Para Migraña]			
<i>almotriptan malate 12.5 mg tab, 6.25 mg tab</i>	1	AXERT	
<i>eletriptan hydrobromide 20 mg tab, 40 mg tab</i>	1	RELPAX	QL(6 / 30)
FROVA 2.5 mg tab	3		
<i>frovatriptan succinate 2.5 mg tab</i>	1	FROVA	QL(9 / 30)
IMITREX 20 mg/act nasal soln, 5 mg/act nasal soln	3		QL(6 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
IMITREX 100 mg tab	3		QL(9 / 30)
IMITREX 25 mg tab, 50 mg tab	3		QL(18 / 30)
IMITREX STATDOSE REFILL 4 mg/0.5ml sc soln cart, 6 mg/0.5ml sc soln cart	3		QL(2 / 30)
IMITREX STATDOSE SYSTEM 4 mg/0.5ml sc soln auto-inj, 6 mg/0.5ml sc soln auto-inj	3		QL(2 / 30)
MAXALT 10 mg tab	3		QL(12 / 30)
MAXALT-MLT 10 mg tab disint	3		QL(12 / 30)
<i>naratriptan hcl 1 mg tab, 2.5 mg tab</i>	1	AMERGE	QL(9 / 30)
RELPAX 20 mg tab, 40 mg tab	2		QL(6 / 30)
<i>rizatriptan benzoate 10 mg tab</i>	1	MAXALT	QL(12 / 30)
<i>rizatriptan benzoate 5 mg tab</i>	1	MAXALT	QL(24 / 30)
<i>rizatriptan benzoate 10 mg tab disint</i>	1	MAXALT MLT	QL(12 / 30)
<i>rizatriptan benzoate 5 mg tab disint</i>	1	MAXALT MLT	QL(24 / 30)
<i>sumatriptan 20 mg/act nasal soln, 5 mg/act nasal soln</i>	1	IMITREX	QL(6 / 30)
<i>sumatriptan succinate 6 mg/0.5ml sc soln</i>	1	IMITREX	QL(5 / 30)
<i>sumatriptan succinate 100 mg tab</i>	1	IMITREX	QL(9 / 30)
<i>sumatriptan succinate 25 mg tab, 50 mg tab</i>	1	IMITREX	QL(18 / 30)
<i>sumatriptan succinate 4 mg/0.5ml sc soln auto-inj, 6 mg/0.5ml sc soln auto-inj</i>	1	IMITREX STATDOSE	QL(2 / 30)
<i>sumatriptan succinate refill 4 mg/0.5ml sc soln cart, 6 mg/0.5ml sc soln cart</i>	1	IMITREX STATDOSE	QL(2 / 30)
<i>sumatriptan-naproxen sodium 85-500 mg tab</i>	1	TREXIMET	QL(9 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>zolmitriptan 2.5 mg tab disint, 5 mg tab disint</i>	1	ZOMIG	
<i>zolmitriptan 2.5 mg tab, 5 mg nasal soln, 5 mg tab</i>	1	ZOMIG	QL(6 / 30)
ANTIMYASTHENIC AGENTS - DRUGS TO TREAT MYASTHENIA GRAVIS [AGENTES ANTIMIASTÉNICOS - MEDICAMENTOS PARA TRATAR LA MIASTENIA GRAVE]			
Parasympathomimetics - Myasthenia Gravis Drugs [Parasimpatomiméticos - Medicamentos Para Miastenia Grave]			
<i>pyridostigmine bromide 60 mg tab</i>	1	MESTINON	
<i>pyridostigmine bromide 60 mg/5ml soln</i>	1	MESTINON	
<i>pyridostigmine bromide er 180 mg tab er</i>	1	MESTINON	
ANTIMYCOBACTERIALS - DRUGS TO TREAT INFECTIONS [ANTIMICOBACTERIANOS - MEDICAMENTOS PARA TRATAR INFECCIONES]			
Antimycobacterials, Other - Miscellaneous Anti-infectives [Antimicobacterianos, Otros - Antiinfecciosos Misceláneos]			
<i>dapsone 100 mg tab, 25 mg tab</i>	1		
MYCOBUTIN 150 mg cap	3		
<i>rifabutin 150 mg cap</i>	1	MYCOBUTIN	
Antituberculars - Tuberculosis Drugs [Antituberculosos - Medicamentos Para Tuberculosis]			
<i>cycloserine 250 mg cap</i>	1		
<i>ethambutol hcl 100 mg tab, 400 mg tab</i>	1	MYAMBUTOL	
<i>isoniazid 100 mg tab, 300 mg tab</i>	1		
<i>isoniazid 100 mg/ml inj soln, 50 mg/5ml syr</i>	1		
MYAMBUTOL 400 mg tab	3		
<i>pretomanid 200 mg tab</i>	4		PA
PRIFTIN 150 mg tab	3		
<i>pyrazinamide 500 mg tab</i>	1		
<i>rifampin 150 mg cap, 300 mg cap</i>	1	RIFADIN	
TRECTOR 250 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ANTINEOPLASTICS [ANTINEOPLÁSTICOS]			
Monoclonal Antibody/antibody-drug Conjugate [Anticuerpos Monoclonales/Conjugado Anticuerpo-Fármaco]			
ADCETRIS 50 mg iv soln	4		PA
ARZERRA 100 mg/5ml iv conc, 1000 mg/50ml iv conc	4		PA
DARZALEX 100 mg/5ml iv soln, 400 mg/20ml iv soln	4		PA
EMPLICITI 300 mg iv soln, 400 mg iv soln	4		PA
KEYTRUDA 100 mg/4ml iv soln	4		PA
OPDIVO 100 mg/10ml iv soln, 240 mg/24ml iv soln, 40 mg/4ml iv soln	4		PA
YERVOY 200 mg/40ml iv soln, 50 mg/10ml iv soln	4		PA
ANTINEOPLASTICS - DRUGS TO TREAT CANCER [ANTINEOPLÁSTICOS - MEDICAMENTOS PARA TRATAR EL CÁNCER]			
Alkylating Agents - Chemotherapy Agents [Agentes Alquilantes - Agentes De Quimioterapia]			
<i>busulfan 6 mg/ml iv soln</i>	4	BUSULFEX	PA
BUSULFEX 6 mg/ml iv soln	4		PA
<i>cyclophosphamide 1 gm inj soln, 2 gm inj soln, 25 mg tab, 50 mg tab, 500 mg inj soln</i>	4		PA
<i>dacarbazine 100 mg iv soln, 200 mg iv soln</i>	4		PA
GLEOSTINE 10 mg cap, 100 mg cap, 40 mg cap	4		PA
GLIADEL WAFER 7.7 mg implant wafer	4		PA
LEUKERAN 2 mg tab	4		PA
MATULANE 50 mg cap	4		PA
<i>melphalan 2 mg tab</i>	4	ALKERAN	PA
<i>melphalan hcl 50 mg iv soln</i>	4	ALKERAN	PA
MYLERAN 2 mg tab	4		PA
TEMODAR 100 mg iv soln	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>temozolomide 100 mg cap, 140 mg cap, 180 mg cap, 20 mg cap, 250 mg cap, 5 mg cap</i>	4	TEMODAR	PA
<i>thiotepa 100 mg inj soln</i>	4	TEPADINA	
<i>thiotepa 15 mg inj soln</i>	4	THIOPLEX	PA
ZANOSAR 1 gm iv soln	4		PA
Antiandrogens - Hormone Suppressants [Antiandrógenos - Supresores De Hormonas]			
<i>abiraterone acetate 250 mg tab, 500 mg tab</i>	4	ZYTIGA	PA
<i>bicalutamide 50 mg tab</i>	4	CASODEX	PA
CASODEX 50 mg tab	4		PA
<i>hydroxyprogesterone caproate 1.25 gm/5ml im soln</i>	5	DELALUTIN	PA
NILANDRON 150 mg tab	4		PA
<i>nilutamide 150 mg tab</i>	4	NILANDRON	PA
NUBEQA 300 mg tab	4		PA
XTANDI 40 mg cap	4		PA
Antiangiogenic Agents - Chemotherapy Agents [Agentes Antiangiogénicos - Agentes De Quimioterapia]			
<i>lenalidomide 10 mg cap, 15 mg cap, 25 mg cap, 5 mg cap</i>	4	REVLIMID	PA
POMALYST 1 mg cap, 2 mg cap, 3 mg cap, 4 mg cap	4		PA
REVLIMID 10 mg cap, 15 mg cap, 2.5 mg cap, 25 mg cap, 5 mg cap	5		PA
THALOMID 100 mg cap, 150 mg cap, 200 mg cap, 50 mg cap	5		PA
Antiestrogens/modifiers - Chemotherapy Agents [Antiestrógenos/Modificadores - Agentes De Quimioterapia]			
EMCYT 140 mg cap	4		PA
SOLTAMOX 10 mg/5ml soln	4		PA
<i>tamoxifen citrate 10 mg tab, 20 mg tab</i>	4	NOLVADEX	PA
<i>toremifene citrate 60 mg tab</i>	4	FARESTON	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Antimetabolites - Chemotherapy Agents [Antimetabolitos - Agentes De Quimioterapia]			
<i>capecitabine 150 mg tab, 500 mg tab</i>	4	XELODA	PA
CARAC 0.5 % crm	5		PA
DROXIA 200 mg cap, 300 mg cap, 400 mg cap	3		
EFUDEX 5 % crm	5		PA
<i>fluorouracil 1 gm/20ml iv soln, 500 mg/10ml iv soln</i>	4		PA
<i>fluorouracil 0.5 % crm</i>	4	CARAC	PA
<i>fluorouracil 5 % crm</i>	4	EFUDEX	PA
<i>fluorouracil 2 % ext soln, 5 % ext soln</i>	4	EFUDEX	PA
HYDREA 500 mg cap	3		PA
<i>hydroxyurea 500 mg cap</i>	4	HYDREA	PA
<i>mercaptopurine 50 mg tab</i>	4	PURINETHOL	PA
NIPENT 10 mg iv soln	4		PA
<i>pemetrexed disodium 1000 mg iv soln, 750 mg iv soln</i>	4		PA
<i>pemetrexed disodium 1 gm/40ml iv soln, 100 mg/4ml iv soln, 500 mg/20ml iv soln</i>	4		PA
<i>pemetrexed ditromethamine 100 mg iv soln, 500 mg iv soln</i>	4		PA
TABLOID 40 mg tab	4		PA
XELODA 150 mg tab, 500 mg tab	4		PA
Antineoplastics (combination Product) [Antineoplásicos (Productos En Combinación)]			
RITUXAN HYCELA 1400-23400 MG -ut/11.7ml sc soln, 1600-26800 MG -ut/13.4ml sc soln	4		PA
Antineoplastics- Chemotherapy Agents [Antineoplásicos- Agentes De Quimioterapia]			
ABRAXANE 100 mg iv susp	4		PA
ADRIAMYCIN 50 mg iv soln	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ALIMTA 100 mg iv soln, 500 mg iv soln	4		PA
ARRANON 5 mg/ml iv soln	4		PA
arsenic trioxide 10 mg/10ml iv soln	4	TRISENOX	PA
BENDEKA 100 mg/4ml iv soln	4		PA
BICNU 100 mg iv soln	4		PA
bleomycin sulfate 30 unit inj soln	4	BLENOXANE	PA
bortezomib 2.5 mg inj soln	4		PA
bortezomib 3.5 mg inj soln	4	VELCADE	PA
carmustine 300 mg iv soln, 50 mg iv soln	4		PA
carmustine 100 mg iv soln	4	BICNU	PA
cisplatin 100 mg/100ml iv soln, 200 mg/200ml iv soln, 50 mg/50ml iv soln	4		PA
cladribine 10 mg/10ml iv soln	4	LEUSTATIN	PA
clofarabine 1 mg/ml iv soln	4	CLOLAR	PA
CLOLAR 1 mg/ml iv soln	4		PA
COSMEGEN 0.5 mg iv soln	4		PA
cytarabine 20 mg/ml inj soln	4		PA
cytarabine (pf) 100 mg/ml inj soln, 20 mg/ml inj soln	4		PA
dactinomycin 0.5 mg iv soln	4	COSMEGEN	PA
daunorubicin hcl 20 mg/4ml iv soln	4		PA
decitabine 50 mg iv soln	4	DACOGEN	PA
dexrazoxane hcl 250 mg iv soln, 500 mg iv soln	4	ZINECARD	PA
docetaxel 160 mg/16ml iv soln, 160 mg/8ml iv conc, 20 mg/2ml iv soln, 80 mg/8ml iv soln	4	TAXOTERE	PA
DOXIL 2 mg/ml iv inj	4		PA
doxorubicin hcl 10 mg iv soln, 50 mg iv soln	4		PA
doxorubicin hcl liposomal 2 mg/ml iv inj	4	DOXIL	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ELLEENCE 200 mg/100ml iv soln, 50 mg/25ml iv soln	4		PA
FASLODEX 250 mg/5ml im soln pfs	4		PA
<i>fluorouracil 2.5 gm/50ml iv soln, 5 gm/100ml iv soln</i>	4		PA
<i>fulvestrant 250 mg/5ml im soln pfs</i>	4	FASLODEX	PA
<i>gemcitabine hcl 2 gm iv soln</i>	4		PA
<i>gemcitabine hcl 1 gm/26.3ml iv soln, 2 gm/52.6ml iv soln, 200 mg/5.26ml iv soln</i>	4		PA
<i>gemcitabine hcl 1 gm iv soln, 200 mg iv soln</i>	4	GEMZAR	PA
HALAVEN 1 mg/2ml iv soln	4		PA
IDAMYCIN PFS 10 mg/10ml iv soln, 20 mg/20ml iv soln, 5 mg/5ml iv soln	4		PA
<i>idarubicin hcl 10 mg/10ml iv soln, 20 mg/20ml iv soln, 5 mg/5ml iv soln</i>	4	IDAMYCIN PFS	PA
IFEX 1 gm iv soln, 3 gm iv soln	4		PA
<i>ifosfamide 1 gm iv soln, 3 gm iv soln</i>	4	IFEX	PA
<i>ifosfamide 1 gm/20ml iv soln, 3 gm/60ml iv soln</i>	4	IFEX	PA
<i>irinotecan hcl 500 mg/25ml iv soln</i>	4		PA
<i>irinotecan hcl 100 mg/5ml iv soln, 300 mg/15ml iv soln, 40 mg/2ml iv soln</i>	4	CAMPTOSAR	PA
ISTODAX 10 mg iv soln	4		PA
IXEMPRA KIT 15 mg iv soln, 45 mg iv soln	4		PA
JEVTANA 60 mg/1.5ml iv soln	4		PA
KADCYLA 100 mg iv soln, 160 mg iv soln	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
KYPROLIS 10 mg iv soln, 30 mg iv soln, 60 mg iv soln	4		PA
<i>mitomycin 20 mg iv soln, 40 mg iv soln, 5 mg iv soln</i>	4	MUTAMYCIN	PA
MVASI 100 mg/4ml iv soln, 400 mg/16ml iv soln	4		PA
ORSERDU 345 mg tab, 86 mg tab	4		PA
<i>oxaliplatin 100 mg/20ml iv soln, 200 mg/40ml iv soln, 50 mg/10ml iv soln</i>	4	ELOXATIN	PA
<i>paclitaxel 100 mg/16.7ml iv conc, 150 mg/25ml iv conc, 30 mg/5ml iv conc, 300 mg/50ml iv conc</i>	4	TAXOL	PA
<i>pemetrexed disodium 100 mg iv soln, 500 mg iv soln</i>	4	ALIMTA	PA
PHOTOFRIN 75 mg iv soln	4		PA
PROLEUKIN 22000000 unit iv soln	4		PA
TICE BCG 50 mg i-vesic susp	4		PA
TREANDA 100 mg iv soln, 25 mg iv soln	4		PA
UVADEX 20 mcg/ml Extracorporeal Solution	4		PA
VELCADE 3.5 mg inj soln	4		PA
VINCASAR PFS 1 mg/ml iv soln	4		PA
<i>vincristine sulfate 1 mg/ml iv soln</i>	4	VINCASAR	PA
<i>vinorelbine tartrate 10 mg/ml iv soln, 50 mg/5ml iv soln</i>	4	NAVELBINE	PA
ZALTRAP 100 mg/4ml iv soln, 200 mg/8ml iv soln	4		PA
Antineoplastics, Other - Chemotherapy Agents [Antineoplásicos, Otros - Agentes De Quimioterapia]			
ALECENSA 150 mg cap	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ALUNBRIG 180 mg tab, 30 mg tab, 90 & 180 mg tab pack, 90 mg tab	4		PA
<i>bleomycin sulfate 15 unit inj soln</i>	4	BLENOXANE	PA
<i>bortezomib 3.5 mg/1.4ml iv soln</i>	4		PA
BOSULIF 100 mg tab, 400 mg tab, 500 mg tab	4		PA
CALQUENCE 100 mg tab	5		PA
CAPRELSA 100 mg tab, 300 mg tab	4		PA
<i>carboplatin 150 mg/15ml iv soln, 450 mg/45ml iv soln, 50 mg/5ml iv soln, 600 mg/60ml iv soln</i>	4	PARAPLATIN	PA
COMETRIQ (100 MG DAILY DOSE) 80 & 20 mg oral kit	4		PA
COMETRIQ (140 MG DAILY DOSE) 3 x 20 MG & 80 mg oral kit	4		PA
COMETRIQ (60 MG DAILY DOSE) 20 mg oral kit	4		PA
COPIKTRA 15 mg cap, 25 mg cap	5		PA
<i>docetaxel 20 mg/ml iv conc, 80 mg/4ml iv conc</i>	4	TAXOTERE	PA
<i>doxorubicin hcl 2 mg/ml iv soln</i>	4	ADRIAMYCIN	PA
<i>fludarabine phosphate 50 mg/2ml iv soln</i>	4		PA
<i>fludarabine phosphate 50 mg iv soln</i>	4	FLUDARA	PA
ICLUSIG 15 mg tab, 45 mg tab	4		PA
<i>imatinib mesylate 100 mg tab, 400 mg tab</i>	4	GLEEVEC	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
IMBRUVICA 140 mg cap, 140 mg tab, 280 mg tab, 420 mg tab	4		PA
IMBRUVICA 70 mg/ml susp	4		PA
<i>lapatinib ditosylate 250 mg tab</i>	4	TYKERB	PA
<i>leucovorin calcium 10 mg tab, 100 mg inj soln, 15 mg tab, 200 mg inj soln, 25 mg tab, 350 mg inj soln, 5 mg tab, 50 mg inj soln, 500 mg inj soln</i>	4		PA
<i>levoleucovorin calcium 50 mg iv soln</i>	4	FUSILEV	PA
<i>mitoxantrone hcl 25 mg/12.5ml iv conc, 30 mg/15ml iv conc</i>	4		PA
<i>mitoxantrone hcl 20 mg/10ml iv conc</i>	4	NOVANTRONE	PA
NERLYNX 40 mg tab	4		PA
ONCASPAR 750 unit/ml inj soln	4		PA
<i>oxaliplatin 100 mg iv soln, 50 mg iv soln</i>	4	ELOXATIN	PA
SPRYCEL 100 mg tab, 140 mg tab, 20 mg tab, 50 mg tab, 70 mg tab, 80 mg tab	4		PA
SYNRIBO 3.5 mg sc soln	4		PA
TASIGNA 150 mg cap, 200 mg cap, 50 mg cap	4		PA
<i>valrubicin 40 mg/ml i-vesic soln</i>	4	VALSTAR	PA
VERZENIO 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab	4		PA
<i>vinblastine sulfate 1 mg/ml iv soln</i>	4		PA
VOTRIENT 200 mg tab	4		PA
XALKORI 200 mg cap, 250 mg cap	4		PA
ZOLINZA 100 mg cap	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Aromatase Inhibitors, 3rd Generation - Chemotherapy Agents [Inhibidores De La Aromatasa, 3Era Generación - Agentes De Quimioterapia]			
<i>anastrozole 1 mg tab</i>	4	ARIMIDEX	PA
ARIMIDEX 1 mg tab	4		PA
AROMASIN 25 mg tab	4		PA
<i>exemestane 25 mg tab</i>	4	AROMASIN	PA
FEMARA 2.5 mg tab	4		PA
<i>letrozole 2.5 mg tab</i>	4	FEMARA	PA
Enzyme Inhibitors - Chemotherapy Agents [Inhibidores De Enzimas - Agentes De Quimioterapia]			
ETOPOPHOS 100 mg iv soln	4		PA
<i>etoposide 50 mg cap</i>	4		PA
<i>etoposide 1 gm/50ml iv soln, 100 mg/5ml iv soln, 500 mg/25ml iv soln</i>	4	VEPESID	PA
HYCAMTIN 0.25 mg cap, 1 mg cap, 4 mg iv soln	4		PA
TALZENNA 0.25 mg cap, 1 mg cap	5		PA
TOPOSAR 1 gm/50ml iv soln, 100 mg/5ml iv soln, 500 mg/25ml iv soln	4		PA
<i>topotecan hcl 4 mg/4ml iv soln</i>	4		PA
<i>topotecan hcl 4 mg iv soln</i>	4	HYCAMTIN	PA
Molecular Target Inhibitors - Chemotherapy Agents [Inhibidores Moleculares - Agentes De Quimioterapia]			
AFINITOR DISPERZ 2 mg tab sol, 3 mg tab sol, 5 mg tab sol	4		PA
ALIQOPA 60 mg iv soln	5		PA
BRAFTOVI 75 mg cap	5		PA
ERBITUX 100 mg/50ml iv soln, 200 mg/100ml iv soln	4		PA
ERIVEDGE 150 mg cap	4		PA
<i>erlotinib hcl 100 mg tab, 150 mg tab, 25 mg tab</i>	4	TARCEVA	PA
<i>everolimus 2.5 mg tab, 5 mg tab, 7.5 mg tab</i>	4	AFINITOR	PA
GILOTRIF 20 mg tab, 30 mg tab, 40 mg tab	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
IBRANCE 100 mg cap, 100 mg tab, 125 mg cap, 125 mg tab, 75 mg cap, 75 mg tab	4		PA
IDHIFA 100 mg tab, 50 mg tab	4		PA
IRESSA 250 mg tab	4		PA
JAKAFI 10 mg tab, 15 mg tab, 20 mg tab, 25 mg tab, 5 mg tab	4		PA
MEKINIST 0.5 mg tab, 2 mg tab	4		PA
MEKINIST 0.05 mg/ml soln	4		PA
MEKTOVI 15 mg tab	5		PA
NEXAVAR 200 mg tab	4		PA
NINLARO 2.3 mg cap, 3 mg cap, 4 mg cap	4		PA
RUBRACA 200 mg tab, 250 mg tab, 300 mg tab	5		PA
RYDAPT 25 mg cap	4		
<i>sorafenib tosylate 200 mg tab</i>	4	NEXAVAR	PA
STIVARGA 40 mg tab	4		PA
<i>sunitinib malate 50 mg cap</i>	4	SUTENT	PA
SUTENT 12.5 mg cap, 25 mg cap, 50 mg cap	4		PA
TAFINLAR 10 mg tab sol, 50 mg cap, 75 mg cap	4		PA
TAGRISO 40 mg tab, 80 mg tab	4		PA
TALZENNA 0.1 mg cap, 0.35 mg cap, 0.5 mg cap, 0.75 mg cap	5		PA
TARCEVA 100 mg tab, 150 mg tab, 25 mg tab	4		PA
TIBSOVO 250 mg tab	4		
VECTIBIX 100 mg/5ml iv soln, 400 mg/20ml iv soln	4		PA
ZELBORAF 240 mg tab	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Monoclonal Antibodies/antibody-drug Conjugate - Chemotherapy Agents [Anticuerpos Monoclonales/Conjugado Anticuerpo-Fármaco - Agentes De Quimioterapia]			
HERCEPTIN 150 mg iv soln	4		PA
INLYTA 1 mg tab, 5 mg tab	4		PA
KANJINTI 150 mg iv soln, 420 mg iv soln	4		PA
PERJETA 420 mg/14ml iv soln	4		PA
RUXIENCE 100 mg/10ml iv soln, 500 mg/50ml iv soln	4		PA
ZIRABEV 100 mg/4ml iv soln, 400 mg/16ml iv soln	4		PA
Retinoids - Chemotherapy Agents [Retinoides - Agentes De Quimioterapia]			
<i>bexarotene 75 mg cap</i>	4	TARGRETIN	PA
PANRETIN 0.1 % gel	4		PA
TARGRETIN 75 mg cap	4		PA
TARGRETIN 1 % gel	5		PA
<i>tretinoin 10 mg cap</i>	4	VESANOID	PA
Treatment Adjuncts - Supportive Chemotherapy Drugs [Adjuntos De Tratamiento - Medicamentos De Apoyo Para Quimioterapia]			
ELITEK 1.5 mg iv soln, 7.5 mg iv soln	4		PA
ETHYOL 500 mg iv soln	4		PA
<i>mesna 100 mg/ml iv soln</i>	4	MESNEX	PA
MESNEX 400 mg tab	4		PA
MESNEX 100 mg/ml iv soln	4		PA
VORAXAZE 1000 unit iv soln	4		PA
ANTIPARASITICS - DRUGS TO TREAT PARASITIC INFECTIONS [ANTIPARASITARIOS - MEDICAMENTOS PARA TRATAR INFECCIONES PARASITARIAS]			
Anthelmintics - Worm Infection Drugs [Antihelmínticos - Medicamentos Para Infección Por Gusanos]			
<i>albendazole 200 mg tab</i>	1	ALBENZA	
<i>ivermectin 3 mg tab</i>	1	STROMECTOL	
<i>praziquantel 600 mg tab</i>	1	BILTRICIDE	
STROMECTOL 3 mg tab	3		
Antiprotozoals - Protozoal Infection Drugs [Antiprotozoarios - Medicamentos Para Infección Protozoaria]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ALINIA 100 mg/5ml susp	3		
atovaquone 750 mg/5ml susp	4	MEPRON	PA
atovaquone-proguanil hcl 250-100 mg tab, 62.5-25 mg tab	1	MALARONE	
chloroquine phosphate 250 mg tab	1		
chloroquine phosphate 500 mg tab	1	ARALEN	
COARTEM 20-120 mg tab	3		
hydroxychloroquine sulfate 200 mg tab	1	PLAQUENIL	
MALARONE 250-100 mg tab, 62.5-25 mg tab	3		
mefloquine hcl 250 mg tab	1		
MEPRON 750 mg/5ml susp	5		PA
nitazoxanide 500 mg tab	1	ALINIA	
pentamidine isethionate 300 mg inh soln	1	NEBUPENT	
pentamidine isethionate 300 mg inj soln	1	PENTAM	
PLAQUENIL 200 mg tab	3		
primaquine phosphate 26.3 (15 Base) mg tab	1		
pyrimethamine 25 mg tab	1	DARAPRIM	
QUALAQUIN 324 mg cap	3		QL(42 / 365)
quinine sulfate 324 mg cap	1	QUALAQUIN	QL(42 / 365)
tinidazole 250 mg tab, 500 mg tab	1	TINDAMAX	
Pediculicides/scabicides - Scabies And Lice Drugs [Pediculicidas/Escabicidas - Medicamentos Para Sarna Y Piojos]			
malathion 0.5 % lot	1	OVIDE	
NATROBA 0.9 % ext susp	3		
OVIDE 0.5 % lot	3		
permethrin 5 % crm	1	ELIMITE	
spinosad 0.9 % ext susp	1		
sulfurated lime ext soln	1		
ANTIPARKINSON AGENTS - DRUGS TO TREAT PARKINSON'S DISEASE [AGENTES ANTIPARKINSON - MEDICAMENTOS PARA TRATAR LA ENFERMEDAD DE PARKINSON]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Anticholinergics - Parkinson's Disease Drugs [Anticolinérgicos - Medicamentos Para La Enfermedad De Parkinson]			
<i>benztropine mesylate 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	COGENTIN	
<i>benztropine mesylate 1 mg/ml inj soln</i>	1	COGENTIN	
<i>trihexyphenidyl hcl 0.4 mg/ml soln</i>	1		
<i>trihexyphenidyl hcl 2 mg tab, 5 mg tab</i>	1	ARTANE	
Antiparkinson Agents, Other - Parkinson's Disease Drugs [Agentes Antiparkinson, Otros - Medicamentos Para La Enfermedad De Parkinson]			
<i>amantadine hcl 50 mg/5ml soln</i>	1		
<i>amantadine hcl 100 mg cap, 100 mg tab</i>	1	SYMMETREL	
COMTAN 200 mg tab	3		
<i>entacapone 200 mg tab</i>	1	COMTAN	
TASMAR 100 mg tab	3		
<i>tolcapone 100 mg tab</i>	1	TASMAR	
Dopamine Agonists - Parkinson's Disease Drugs [Agonistas De Dopamina - Medicamentos Para La Enfermedad De Parkinson]			
APOKYN 30 mg/3ml sc soln cart	5		PA
<i>bromocriptine mesylate 2.5 mg tab, 5 mg cap</i>	1	PARLODEL	
MIRAPEX ER 0.375 mg tab er 24 hr, 0.75 mg tab er 24 hr, 1.5 mg tab er 24 hr, 2.25 mg tab er 24 hr, 3 mg tab er 24 hr, 3.75 mg tab er 24 hr, 4.5 mg tab er 24 hr	3		
NEUPRO 1 mg/24hr td patch 24hr, 2 mg/24hr td patch 24hr, 3 mg/24hr td patch 24hr, 4 mg/24hr td patch 24hr, 6 mg/24hr td patch 24hr, 8 mg/24hr td patch 24hr	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
PARLODEL 2.5 mg tab, 5 mg cap	3		
<i>pramipexole dihydrochloride 0.125 mg tab, 0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab, 1.5 mg tab</i>	1	MIRAPEX	
<i>pramipexole dihydrochloride er 0.375 mg tab er 24 hr, 0.75 mg tab er 24 hr, 1.5 mg tab er 24 hr, 2.25 mg tab er 24 hr, 3 mg tab er 24 hr, 3.75 mg tab er 24 hr, 4.5 mg tab er 24 hr</i>	1	MIRAPEX ER	
<i>ropinirole hcl 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab, 5 mg tab</i>	1	REQUIP	
<i>ropinirole hcl er 12 mg tab er 24 hr, 2 mg tab er 24 hr, 4 mg tab er 24 hr, 6 mg tab er 24 hr, 8 mg tab er 24 hr</i>	1	REQUIP XL	
Dopamine Precursors/L-amino Acid Decarboxylase Inhibitors - Parkinson's Disease Drugs [Precusores De Dopamina/ Inhibidores De La Decarboxylasa L-Amino Ácido - Medicamentos Para La Enfermedad De Parkinson]			
<i>carbidopa 25 mg tab</i>	1	LODOSYN	
<i>carbidopa-levodopa 10-100 mg tab disint, 25-100 mg tab disint, 25-250 mg tab disint</i>	1	PARCOPA	
<i>carbidopa-levodopa 10-100 mg tab, 25-100 mg tab, 25-250 mg tab</i>	1	SINEMET	
<i>carbidopa-levodopa er 25-100 mg tab er, 50-200 mg tab er</i>	1	SINEMET CR	
<i>carbidopa-levodopa-entacapone 12.5-50-200 mg tab, 18.75-75-200 mg tab, 25-100-200 mg tab, 31.25-125-200 mg tab, 37.5-150-200 mg tab, 50-200-200 mg tab</i>	1	STALEVO	
LODOSYN 25 mg tab	3		
SINEMET 10-100 mg tab, 25-100 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
STALEVO 100 25-100-200 mg tab	3		
STALEVO 125 31.25-125-200 mg tab	3		
STALEVO 150 37.5-150-200 mg tab	3		
STALEVO 200 50-200-200 mg tab	3		
STALEVO 50 12.5-50-200 mg tab	3		
STALEVO 75 18.75-75-200 mg tab	3		
Monoamine Oxidase B (mao-b) Inhibitors - Parkinson's Disease Drugs [Inhibidores De La Monoaminoxidasa B (Mao-B) - Medicamentos Para La Enfermedad De Parkinson]			
AZILECT 0.5 mg tab, 1 mg tab	3		
<i>rasagiline mesylate 0.5 mg tab, 1 mg tab</i>	1	AZILECT	
<i>selegiline hcl 5 mg tab</i>	1		
<i>selegiline hcl 5 mg cap</i>	1	ELDEPRYL	
ZELAPAR 1.25 mg tab disint	3		
ANTIPSYCHOTICS - DRUGS TO TREAT MOOD DISORDERS [ANTIPSIKÓTICOS - MEDICAMENTOS PARA TRATAR TRASTORNOS DEL ESTADO DE ÁNIMO]			
1st Generation/typical - Mood Disorder Drugs [1Era Generación/Típicos - Medicamentos Para Trastornos Del Estado De Ánimo]			
<i>chlorpromazine hcl 25 mg/ml inj soln, 50 mg/2ml inj soln</i>	1		
<i>chlorpromazine hcl 10 mg tab, 100 mg tab, 200 mg tab, 25 mg tab, 50 mg tab</i>	1	THORAZINE	
COMPRO 25 mg rect supp	3		
<i>fluphenazine decanoate 25 mg/ml inj soln</i>	1	PROLIXIN	
<i>fluphenazine hcl 1 mg tab, 10 mg tab, 2.5 mg tab, 5 mg tab</i>	1	PROLIXIN	
<i>fluphenazine hcl 2.5 mg/5ml oral elix, 2.5 mg/ml inj soln, 5 mg/ml oral conc</i>	1	PROLIXIN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
HALDOL DECANOATE 100 mg/ml im soln, 50 mg/ml im soln	3		
<i>haloperidol 0.5 mg tab, 1 mg tab, 10 mg tab, 2 mg tab, 20 mg tab, 5 mg tab</i>	1	HALDOL	
<i>haloperidol decanoate 100 mg/ml im soln, 50 mg/ml im soln</i>	1	HALDOL	
<i>haloperidol lactate 2 mg/ml oral conc, 5 mg/ml inj soln</i>	1	HALDOL	
<i>loxapine succinate 10 mg cap, 25 mg cap, 5 mg cap, 50 mg cap</i>	1	LOXITANE	
<i>perphenazine 16 mg tab, 2 mg tab, 4 mg tab, 8 mg tab</i>	1	TRILAFON	
<i>pimozide 1 mg tab, 2 mg tab</i>	1	ORAP	
<i>prochlorperazine 25 mg rect supp</i>	1	COMPRO	
<i>prochlorperazine edisylate 10 mg/2ml inj soln</i>	1		
<i>prochlorperazine maleate 10 mg tab, 5 mg tab</i>	1	COMPAZINE	
<i>thioridazine hcl 10 mg tab, 100 mg tab, 25 mg tab, 50 mg tab</i>	1	MELLARIL	
<i>thiothixene 1 mg cap, 10 mg cap, 2 mg cap, 5 mg cap</i>	1	NAVANE	
<i>trifluoperazine hcl 1 mg tab, 10 mg tab, 2 mg tab, 5 mg tab</i>	1	STELAZINE	
2nd Generation/atypical - Mood Disorder Drugs [2Da Generación/Atípicos - Medicamentos Para Trastornos Del Estado De Ánimo]			
ABILIFY 10 mg tab, 15 mg tab, 2 mg tab, 20 mg tab, 30 mg tab, 5 mg tab	3		
ABILIFY ASIMTUFII 720 mg/2.4ml im pfs, 960 mg/3.2ml im pfs	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ABILIFY MAINTENA 300 mg im pfs, 300 mg Intramuscular Suspension Reconstituted ER	3		
<i>aripiprazole 10 mg tab, 15 mg tab, 2 mg tab, 20 mg tab, 30 mg tab, 5 mg tab</i>	1	ABILIFY	
<i>aripiprazole 1 mg/ml soln</i>	1	ABILIFY	
<i>aripiprazole 10 mg tab disint, 15 mg tab disint</i>	1	ABILIFY DISCMELT	
<i>asenapine maleate 10 mg tab sub, 5 mg tab sub</i>	1	SAPHRIS	
FANAPT 1 mg tab, 10 mg tab, 12 mg tab, 2 mg tab, 4 mg tab, 6 mg tab, 8 mg tab	3		
FANAPT TITRATION PACK 1 & 2 & 4 & 6 mg tab	3		
INVEGA 1.5 mg tab er 24 hr, 3 mg tab er 24 hr, 6 mg tab er 24 hr, 9 mg tab er 24 hr	3		
INVEGA SUSTENNA 117 mg/0.75ml im susp pfs, 156 mg/ml im susp pfs, 234 mg/1.5ml im susp pfs, 39 mg/0.25ml im susp pfs, 78 mg/0.5ml im susp pfs	5		PA
LATUDA 120 mg tab, 20 mg tab, 40 mg tab, 80 mg tab	3		
<i>olanzapine 10 mg im soln, 10 mg tab, 15 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab, 7.5 mg tab</i>	1	ZYPREXA	
<i>olanzapine 10 mg tab disint, 15 mg tab disint, 20 mg tab disint, 5 mg tab disint</i>	1	ZYPREXA ZYDIS	
<i>paliperidone er 1.5 mg tab er 24 hr, 3 mg tab er 24 hr, 6 mg tab er 24 hr, 9 mg tab er 24 hr</i>	1	INVEGA	
<i>quetiapine fumarate 100 mg tab, 200 mg tab, 25 mg tab,</i>	1	SEROQUEL	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
300 mg tab, 400 mg tab, 50 mg tab			
quetiapine fumarate er 150 mg tab er 24 hr, 200 mg tab er 24 hr, 300 mg tab er 24 hr, 400 mg tab er 24 hr, 50 mg tab er 24 hr	1	SEROQUEL XR	
RISPERDAL 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab	3		
RISPERDAL 1 mg/ml soln	3		
RISPERDAL CONSTA 12.5 mg Intramuscular Suspension Reconstituted ER, 25 mg Intramuscular Suspension Reconstituted ER, 37.5 mg Intramuscular Suspension Reconstituted ER, 50 mg Intramuscular Suspension Reconstituted ER	5		PA
risperidone 0.25 mg tab, 0.25 mg tab disint, 0.5 mg tab, 0.5 mg tab disint, 1 mg tab, 1 mg tab disint, 2 mg tab, 2 mg tab disint, 3 mg tab, 3 mg tab disint, 4 mg tab, 4 mg tab disint	1	RISPERDAL	
risperidone 1 mg/ml soln	1	RISPERDAL	
SEROQUEL 100 mg tab, 200 mg tab, 25 mg tab, 300 mg tab, 400 mg tab, 50 mg tab	3		
SEROQUEL XR 150 mg tab er 24 hr, 200 mg tab er 24 hr, 300 mg tab er 24 hr, 400 mg tab er 24 hr, 50 mg tab er 24 hr	3		
ziprasidone hcl 20 mg cap, 40 mg cap, 60 mg cap, 80 mg cap	1	GEODON	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>ziprasidone mesylate 20 mg im soln</i>	1	GEODON	
ZYPREXA 10 mg im soln, 10 mg tab, 15 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab, 7.5 mg tab	3		
ZYPREXA RELPREVV 210 mg im susp, 300 mg im susp, 405 mg im susp	3		
ZYPREXA ZYDIS 10 mg tab disint, 15 mg tab disint, 20 mg tab disint, 5 mg tab disint	3		
Treatment-resistant - Mood Disorder Drugs [Resistentes A Tratamiento - Medicamentos Para Trastornos Del Estado De Ánimo]			
<i>clozapine 100 mg tab, 200 mg tab, 25 mg tab, 50 mg tab</i>	1	CLOZARIL	
<i>clozapine 100 mg tab disint, 12.5 mg tab disint, 150 mg tab disint, 200 mg tab disint, 25 mg tab disint</i>	1	FAZACLO	
CLOZARIL 100 mg tab, 25 mg tab	3		
ANTISPASTICITY AGENTS [AGENTES CONTRA LA ESPASTICIDAD]			
Antispasticity Agents [Agentes Contra La Espasticidad]			
<i>baclofen 10 mg tab, 20 mg tab</i>	1	LIORESAL	
DANTRIUM 25 mg cap	3		
<i>dantrolene sodium 100 mg cap, 25 mg cap, 50 mg cap</i>	1	DANTRIUM	
<i>tizanidine hcl 2 mg cap, 2 mg tab, 4 mg cap, 4 mg tab, 6 mg cap</i>	1	ZANAFLEX	
ZANAFLEX 2 mg cap, 4 mg cap, 4 mg tab, 6 mg cap	3		
ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS [ANTIVIRALES - MEDICAMENTOS PARA TRATAR INFECCIONES VIRALES]			
Anti-cytomegalovirus (cmv) Agents - Miscellaneous Antiviral Drugs [Agentes Anti Citomegalovirus (Cmv) - Medicamentos Antivirales Misceláneos]			
VALCYTE 450 mg tab	5		PA
VALCYTE 50 mg/ml soln	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>valganciclovir hcl 450 mg tab</i>	4	VALCYTE	PA
<i>valganciclovir hcl 50 mg/ml soln</i>	4	VALCYTE	PA
ZIRGAN 0.15 % ophth gel	3		
Anti-hepatitis B (hbv) Agents - Hepatitis B Drugs [Agentes Contra La Hepatitis B (Vhb) - Medicamentos Para Hepatitis B]			
<i>adefovir dipivoxil 10 mg tab</i>	1	HEPSERA	PA
ALFERON N 5000000 unit/ml inj soln	4		PA
BARACLUDE 0.5 mg tab, 1 mg tab	5		PA
BARACLUDE 0.05 mg/ml soln	5		PA
<i>entecavir 0.5 mg tab, 1 mg tab</i>	1	BARACLUDE	PA
<i>lamivudine 100 mg tab</i>	4	EPIVIR HBV	PA
Anti-hepatitis C (hcv) Agents, Direct Acting Agents - Hepatitis C Drugs [Agentes Contra La Hepatitis C (Vhc), Agentes De Acción Directa - Medicamentos Para Hepatitis C]			
HARVONI 45-200 mg tab, 90-400 mg tab	4		PA
<i>ledipasvir-sofosbuvir 90-400 mg tab</i>	4	HARVONI	PA
MAVYRET 100-40 mg tab	4		PA
SOVALDI 400 mg tab	4		PA
Anti-hepatitis C (hcv) Agents, Other - Hepatitis C Drugs [Agentes Contra La Hepatitis C (Vhc), Otros - Medicamentos Para Hepatitis C]			
PEGASYS 180 mcg/ml sc soln	5		PA
<i>ribavirin 200 mg tab</i>	4	COPEGUS	PA
<i>ribavirin 200 mg cap</i>	4	REBETOL	PA
Antitherpetic Agents - Herpes Drugs [Agentes Antiherpéticos - Medicamentos Para Herpes]			
<i>acyclovir 200 mg cap, 400 mg tab, 800 mg tab</i>	1	ZOVIRAX	
<i>acyclovir 5 % crm, 5 % oint</i>	1	ZOVIRAX	
<i>acyclovir 200 mg/5ml susp</i>	1	ZOVIRAX	
DENAVIR 1 % crm	3		
<i>famciclovir 125 mg tab, 250 mg tab, 500 mg tab</i>	1	FAMVIR	
<i>penciclovir 1 % crm</i>	1	DENAVIR	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>trifluridine 1 % ophth soln</i>	1	VIROPTIC	
<i>valacyclovir hcl 1 gm tab, 500 mg tab</i>	1	VALTREX	
VALTREX 1 gm tab, 500 mg tab	3		
XERESE 5-1 % crm	3		
Anti-hiv Agents, Integrase Inhibitors (insti) - Hiv Drugs [Agentes Anti-Vih, Inhibidores De La Integrasa (Insti) - Medicamentos Para Vih]			
ISENTRESS 100 mg tab chew, 25 mg tab chew, 400 mg tab	4		PA
ISENTRESS HD 600 mg tab	4		PA
JULUCA 50-25 mg tab	3		
STRIBILD 150-150-200-300 mg tab	4		PA
TIVICAY 50 mg tab	4		PA
Anti-hiv Agents, Non-nucleoside Reverse Transcriptase Inhibitors (nrti) - Hiv Drugs [Agentes Anti-Vih, Inhibidores No-Nucleósidos De La Transcriptasa Reversa (Nrti) - Medicamentos Para Vih]			
COMPLERA 200-25-300 mg tab	5		PA
EDURANT 25 mg tab	4		PA
<i>efavirenz 200 mg cap, 50 mg cap, 600 mg tab</i>	4	SUSTIVA	PA
<i>efavirenz-emtricitab-tenofo df 600-200-300 mg tab</i>	4	ATRIPLA	PA
<i>efavirenz-lamivudine-tenofovir 600-300-300 mg tab</i>	1	SYMFI	PA
<i>etravirine 100 mg tab, 200 mg tab</i>	4	INTELENCE	PA
INTELENCE 100 mg tab, 200 mg tab, 25 mg tab	4		PA
<i>nevirapine 200 mg tab</i>	4	VIRAMUNE	PA
<i>nevirapine 50 mg/5ml susp</i>	4	VIRAMUNE	PA
<i>nevirapine er 100 mg tab er 24 hr, 400 mg tab er 24 hr</i>	4	VIRAMUNE XR	PA
ODEFSEY 200-25-25 mg tab	4		PA
SYMTUZA 800-150-200-10 mg tab	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Anti-hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (nrti) - Hiv Drugs [Agentes Anti-Vih, Inhibidores Nucleósidos Y Nucleótidos De La Transcriptasa Reversa (Nrti) - Medicamentos Para Vih]			
<i>abacavir sulfate 300 mg tab</i>	4	ZIAGEN	PA
<i>abacavir sulfate 20 mg/ml soln</i>	4	ZIAGEN	PA
<i>abacavir sulfate-lamivudine 600-300 mg tab</i>	4	EPZICOM	PA
COMBIVIR 150-300 mg tab	5		PA
DOVATO 50-300 mg tab	4		PA
<i>emtricitabine 200 mg cap</i>	4	EMTRIVA	PA
<i>emtricitabine-tenofovir df 200-300 mg tab</i>	1	TRUVADA	PA
EMTRIVA 200 mg cap	4		PA
EMTRIVA 10 mg/ml soln	4		PA
EPIVIR 150 mg tab, 300 mg tab	5		PA
EPIVIR 10 mg/ml soln	5		PA
EPZICOM 600-300 mg tab	4		PA
<i>lamivudine 150 mg tab, 300 mg tab</i>	4	EPIVIR	PA
<i>lamivudine 10 mg/ml soln</i>	4	EPIVIR	PA
<i>lamivudine-zidovudine 150-300 mg tab</i>	4	COMBIVIR	PA
RETROVIR 100 mg cap	5		PA
RETROVIR 10 mg/ml iv soln, 50 mg/5ml syr	5		PA
<i>stavudine 15 mg cap, 20 mg cap, 30 mg cap, 40 mg cap</i>	4	ZERIT	PA
<i>tenofovir disoproxil fumarate 300 mg tab</i>	4	VIREAD	PA
TRIZIVIR 300-150-300 mg tab	5		PA
VIREAD 150 mg tab, 200 mg tab, 250 mg tab, 300 mg tab	4		PA
VIREAD 40 mg/gm oral pwdr	4		PA
ZIAGEN 300 mg tab	5		PA
ZIAGEN 20 mg/ml soln	5		PA
<i>zidovudine 100 mg cap, 300 mg tab</i>	4	RETROVIR	PA
<i>zidovudine 50 mg/5ml syr</i>	4	RETROVIR	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Anti-hiv Agents, Other - Hiv Drugs [Agentes Anti-Vih, Otros - Medicamentos Para Vih]			
FUZEON 90 mg sc soln	4		PA
<i>maraviroc 150 mg tab, 300 mg tab</i>	4	SELZENTRY	PA
SELZENTRY 150 mg tab, 25 mg tab, 300 mg tab, 75 mg tab	4		PA
SELZENTRY 20 mg/ml soln	4		PA
TROGARZO 200 mg/1.33ml iv soln	4		PA
TYBOST 150 mg tab	4		PA
Anti-hiv Agents, Protease Inhibitors - Hiv Drugs [Agentes Anti-Vih, Inhibidores De La Proteasa - Medicamentos Para Vih]			
APTIVUS 250 mg cap	4		PA
<i>atazanavir sulfate 150 mg cap, 200 mg cap, 300 mg cap</i>	4	REYATAZ	PA
<i>darunavir 600 mg tab, 800 mg tab</i>	4	PREZISTA	PA
EVOTAZ 300-150 mg tab	4		PA
<i>fosamprenavir calcium 700 mg tab</i>	4	LEXIVA	PA
KALETRA 100-25 mg tab, 200-50 mg tab	4		PA
KALETRA 400-100 mg/5ml soln	4		PA
LEXIVA 700 mg tab	4		PA
LEXIVA 50 mg/ml susp	4		PA
<i>lopinavir-ritonavir 200-50 mg tab</i>	4	KALETRA	PA
<i>lopinavir-ritonavir 400-100 mg/5ml soln</i>	4	KALETRA	PA
PREZCOBIX 800-150 mg tab	4		PA
PREZISTA 150 mg tab, 600 mg tab, 75 mg tab, 800 mg tab	5		PA
PREZISTA 100 mg/ml susp	5		PA
REYATAZ 50 mg pckt	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
REYATAZ 200 mg cap, 300 mg cap	5		PA
<i>ritonavir 100 mg tab</i>	4	NORVIR	PA
VIRACEPT 250 mg tab, 625 mg tab	4		PA
Anti-influenza Agents - Flu Drugs [Agentes Contra La Influenza - Medicamentos Para Gripe]			
<i>oseltamivir phosphate 30 mg cap, 45 mg cap, 75 mg cap</i>	1	TAMIFLU	
<i>oseltamivir phosphate 6 mg/ml susp</i>	1	TAMIFLU	
RELENZA DISKHALER 5 mg/act inh aer pwdr br act	3		
<i>rimantadine hcl 100 mg tab</i>	1	FLUMADINE	
TAMIFLU 30 mg cap, 45 mg cap, 75 mg cap	3		
TAMIFLU 6 mg/ml susp	3		
Antivirales - Medicamentos Para Tratar Infecciones Virales [Agentes Antivirales, Otros - Medicamentos Para Vih]			
PAXLOVID (300/100) 20 x 150 MG & 10 x 100mg tab pack	2		QL(30 / 5), AL
Antivirals, Others - Drugs To Treat Viral Infections [Agentes Antivirales, Otros - Medicamentos Para Vih]			
LAGEVRIO 200 mg cap	2		QL(40 / 5), AL
PAXLOVID (150/100) 10 x 150 MG & 10 x 100mg tab pack	2		QL(20 / 5), AL
ANXIOLYTICS - DRUGS TO TREAT ANXIETY [ANSIOLÍTICOS - MEDICAMENTOS PARA TRATAR LA ANSIEDAD]			
Anxiolytics, Other - Anxiety Drugs [Ansiolíticos, Otros - Medicamentos Para Ansiedad]			
<i>buspirone hcl 10 mg tab, 15 mg tab, 30 mg tab, 5 mg tab, 7.5 mg tab</i>	1	BUSPAR	
<i>droperidol 2.5 mg/ml inj soln</i>	1		
<i>meprobamate 200 mg tab, 400 mg tab</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Benzodiazepines - Anxiety Drugs [Benzodiazepinas - Medicamentos Para Ansiedad]			
<i>alprazolam 0.25 mg tab disint, 0.5 mg tab disint, 1 mg tab disint</i>	1	NIRAVAM	
<i>alprazolam 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	XANAX	
<i>alprazolam er 0.5 mg tab er 24 hr, 1 mg tab er 24 hr, 3 mg tab er 24 hr</i>	1	XANAX XR	
ALPRAZOLAM INTENSOL 1 mg/ml oral conc	3		
<i>alprazolam xr 0.5 mg tab er 24 hr, 1 mg tab er 24 hr, 3 mg tab er 24 hr</i>	1	XANAX XR	
ATIVAN 0.5 mg tab, 1 mg tab, 2 mg tab	3		
ATIVAN 2 mg/ml inj soln, 4 mg/ml inj soln	3		
<i>chlordiazepoxide hcl 10 mg cap, 25 mg cap, 5 mg cap</i>	1	LIBRIUM	
<i>clorazepate dipotassium 15 mg tab, 3.75 mg tab, 7.5 mg tab</i>	1	TRANXENE	
<i>diazepam 5 mg/ml oral conc</i>	1		
<i>diazepam 10 mg tab, 2 mg tab, 5 mg tab</i>	1	VALIUM	
<i>diazepam 5 mg/5ml soln</i>	1	VALIUM	
DIAZEPAM INTENSOL 5 mg/ml oral conc	1		
DORAL 15 mg tab	3		
<i>estazolam 1 mg tab, 2 mg tab</i>	1	PROSOM	
<i>lorazepam 4 mg/ml inj soln</i>	1		
<i>lorazepam 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	ATIVAN	
<i>lorazepam 2 mg/ml inj soln</i>	1	ATIVAN	
<i>lorazepam 2 mg/ml oral conc</i>	1	LORAZEPAM INTENSOL	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
LORAZEPAM INTENSOL 2 mg/ml oral conc	3		
midazolam hcl 10 mg/10ml inj soln, 10 mg/2ml inj soln, 2 mg/2ml inj soln, 2 mg/ml syr, 25 mg/5ml inj soln, 5 mg/5ml inj soln, 5 mg/ml inj soln, 50 mg/10ml inj soln	1		
midazolam hcl (pf) 10 mg/2ml inj soln, 2 mg/2ml inj soln, 5 mg/5ml inj soln, 5 mg/ml inj soln	1		
oxazepam 10 mg cap, 15 mg cap, 30 mg cap	1	SERAX	
quazepam 15 mg tab	1	DORAL	
VALIUM 10 mg tab, 2 mg tab, 5 mg tab	3		
XANAX 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab	3		
XANAX XR 0.5 mg tab er 24 hr, 1 mg tab er 24 hr, 3 mg tab er 24 hr	3		
BIPOLAR AGENTS - DRUGS TO TREAT MOOD DISORDERS [AGENTES PARA BIPOLARIDAD - MEDICAMENTOS PARA TRATAR TRASTORNOS DEL ESTADO DE ÁNIMO]			
Mood Stabilizers - Mood Disorder Drugs [Estabilizadores Del Ánimo - Medicamentos Para Trastornos Del Estado De Ánimo]			
<i>lithium 8 meq/5ml soln</i>	1		
<i>lithium carbonate 150 mg cap, 600 mg cap</i>	1		
<i>lithium carbonate 300 mg cap</i>	1	ESKALITH	
<i>lithium carbonate 300 mg tab</i>	1	LITHOBID	
<i>lithium carbonate er 450 mg tab er</i>	1	ESKALITH CR	
<i>lithium carbonate er 300 mg tab er</i>	1	LITHOBID	
LITHOBID 300 mg tab er	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
BLOOD GLUCOSE REGULATORS - DRUGS TO REGULATE BLOOD SUGAR [REGULADORES DE GLUCOSA EN SANGRE - MEDICAMENTOS PARA REGULAR EL AZÚCAR EN LA SANGRE]			
Antidiabetic Agents - Diabetic Drugs [Agentes Antidiabéticos - Medicamentos Para La Diabetes]			
<i>acarbose 100 mg tab, 25 mg tab, 50 mg tab</i>	1	PRECOSE	
ACTOPLUS MET 15-850 mg tab	3		
ACTOS 15 mg tab, 30 mg tab, 45 mg tab	3		
AMARYL 1 mg tab, 2 mg tab, 4 mg tab	3		
BYDUREON BCISE 2 mg/0.85ml Subcutaneous Auto-injector	2		ST
CYCLOSET 0.8 mg tab	3		
DUETACT 30-2 mg tab, 30-4 mg tab	3		
FARXIGA 10 mg tab, 5 mg tab	2		ST
<i>glimepiride 1 mg tab, 2 mg tab, 4 mg tab</i>	1	AMARYL	
<i>glipizide 10 mg tab, 5 mg tab</i>	1	GLUCOTROL	
<i>glipizide er 10 mg tab er 24 hr, 2.5 mg tab er 24 hr, 5 mg tab er 24 hr</i>	1	GLUCOTROL XL	
<i>glipizide xl 10 mg tab er 24 hr, 2.5 mg tab er 24 hr, 5 mg tab er 24 hr</i>	1	GLUCOTROL XL	
<i>glipizide-metformin hcl 2.5-250 mg tab, 2.5-500 mg tab, 5-500 mg tab</i>	1	METAGLIP	
GLUCOTROL XL 10 mg tab er 24 hr, 2.5 mg tab er 24 hr, 5 mg tab er 24 hr	3		
GLUMETZA 1000 mg tab er 24 hr, 500 mg tab er 24 hr	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>glyburide 1.25 mg tab, 2.5 mg tab, 5 mg tab</i>	1	DIABETA	
<i>glyburide micronized 1.5 mg tab, 3 mg tab, 6 mg tab</i>	1	GLYNASE	
<i>glyburide-metformin 1.25-250 mg tab, 2.5-500 mg tab, 5-500 mg tab</i>	1	GLUCOVANCE	
GLYNASE 1.5 mg tab, 3 mg tab, 6 mg tab	3		
INVOKAMET 150-1000 mg tab, 150-500 mg tab, 50-1000 mg tab, 50-500 mg tab	2		
INVOKAMET XR 150-1000 mg tab er 24 hr, 150-500 mg tab er 24 hr, 50-1000 mg tab er 24 hr, 50-500 mg tab er 24 hr	2		
INVOKANA 100 mg tab, 300 mg tab	2		
JANUMET 50-1000 mg tab, 50-500 mg tab	2		
JANUMET XR 100-1000 mg tab er 24 hr, 50-1000 mg tab er 24 hr, 50-500 mg tab er 24 hr	2		
JANUVIA 100 mg tab, 25 mg tab, 50 mg tab	2		
JENTADUETO 2.5-1000 mg tab, 2.5-500 mg tab, 2.5-850 mg tab	2		
<i>metformin hcl 1000 mg tab, 500 mg tab, 850 mg tab</i>	1	GLUCOPHAGE	
<i>metformin hcl 500 mg/5ml soln</i>	1	RIOMET	
<i>metformin hcl er 500 mg tab er 24 hr, 750 mg tab er 24 hr</i>	1	GLUCOPHAGE XR	
<i>metformin hcl er (mod) 1000 mg tab er 24 hr, 500 mg tab er 24 hr</i>	1	GLUMETZA	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>metformin hcl er (osm) 1000 mg tab er 24 hr, 500 mg tab er 24 hr</i>	1	FORTAMET	
<i>miglitol 100 mg tab, 25 mg tab, 50 mg tab</i>	1	GLYSET	
MOUNJARO 10 mg/0.5ml sc soln pen-inj, 12.5 mg/0.5ml sc soln pen-inj, 15 mg/0.5ml sc soln pen-inj, 2.5 mg/0.5ml sc soln pen-inj, 5 mg/0.5ml sc soln pen-inj, 7.5 mg/0.5ml sc soln pen-inj	2		ST
<i>nateglinide 120 mg tab, 60 mg tab</i>	1	STARLIX	
<i>pioglitazone hcl 15 mg tab, 30 mg tab, 45 mg tab</i>	1	ACTOS	
<i>pioglitazone hcl-glimepiride 30-2 mg tab, 30-4 mg tab</i>	1	DUETACT	
<i>pioglitazone hcl-metformin hcl 15-500 mg tab, 15-850 mg tab</i>	1	ACTOPLUS MET	
<i>repaglinide 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	PRANDIN	ST
SYMLINPEN 120 2700 mcg/2.7ml sc soln pen-inj	3		ST
SYMLINPEN 60 1500 mcg/1.5ml sc soln pen-inj	3		ST
TRADJENTA 5 mg tab	2		
TRULICITY 0.75 mg/0.5ml sc soln pen-inj, 1.5 mg/0.5ml sc soln pen-inj	2		ST
VICTOZA 18 mg/3ml sc soln pen-inj	2		ST
XIGDUO XR 10-1000 mg tab er 24 hr, 10-500 mg tab er 24 hr, 2.5-1000 mg tab er 24 hr, 5-1000 mg tab er 24 hr, 5-500 mg tab er 24 hr	2		ST
Glycemic Agents - Diabetic Drugs [Agentes Glucémicos - Medicamentos Para La Diabetes]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
BAQSIMI ONE PACK 3 mg/dose nasal pwdr	2		
BAQSIMI TWO PACK 3 mg/dose nasal pwdr	2		
<i>diazoxide 50 mg/ml susp</i>	1	PROGLYCEM	
GLUCAGEN HYPOKIT 1 mg inj soln	2		
<i>glucagon emergency 1 mg inj kit</i>	2	GLUCAGON EMERGENCY	
Insulins - Diabetic Drugs [Insulinas - Medicamentos Para La Diabetes]			
HUMALOG 100 unit/ml inj soln, 100 unit/ml sc soln cart	2		QL(20 / 30)
HUMALOG JUNIOR KWIKPEN 100 unit/ml sc soln pen-inj	2		QL(18 / 30)
HUMALOG KWIKPEN 200 unit/ml sc soln pen-inj	2		QL(12 / 30)
HUMALOG KWIKPEN 100 unit/ml sc soln pen-inj	2		QL(18 / 30)
HUMALOG MIX 50/50 (50-50) 100 unit/ml sc susp	2		QL(20 / 30)
HUMALOG MIX 50/50 KWIKPEN (50-50) 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
HUMALOG MIX 75/25 (75-25) 100 unit/ml sc susp	2		QL(20 / 30)
HUMALOG MIX 75/25 KWIKPEN (75-25) 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
HUMULIN 70/30 (70-30) 100 unit/ml sc susp	2		QL(20 / 30)
HUMULIN 70/30 KWIKPEN (70-30) 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
HUMULIN N 100 unit/ml sc susp	2		QL(20 / 30)
HUMULIN N KWIKPEN 100 unit/ml sc susp pen-inj	2		QL(18 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
HUMULIN R 100 unit/ml inj soln	2		QL(20 / 30)
HUMULIN R U-500 (CONCENTRATED) 500 unit/ml sc soln	2		QL(20 / 30)
HUMULIN R U-500 KWIKPEN 500 unit/ml sc soln pen-inj	2		QL(6 / 30)
LANTUS 100 unit/ml sc soln	2		QL(20 / 30)
LANTUS SOLOSTAR 100 unit/ml sc soln pen-inj	2		QL(18 / 30)
LEVEMIR 100 unit/ml sc soln	2		QL(20 / 30)
LEVEMIR FLEXPEN 100 unit/ml sc soln pen-inj	2		QL(18 / 30)
NOVOLIN 70/30 FLEXPEN (70-30) 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
NOVOLIN 70/30 FLEXPEN RELION (70-30) 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
NOVOLIN N FLEXPEN 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
NOVOLIN N FLEXPEN RELION 100 unit/ml sc susp pen-inj	2		QL(18 / 30)
TOUJEO MAX SOLOSTAR 300 unit/ml sc soln pen-inj	2		QL(18 / 30)
TOUJEO SOLOSTAR 300 unit/ml sc soln pen-inj	2		QL(18 / 30)
BLOOD PRODUCTS/MODIFIERS/VOLUME EXPANDERS - DRUGS TO TREAT BLOOD DISORDERS [PRODUCTOS PARA LA SANGRE/MODIFICADORES/EXPANSORES DE VOLUMEN - MEDICAMENTOS PARA TRATAR TRASTORNOS DE LA SANGRE]			
Anticoagulants - Blood Thinners [Anticoagulantes - Diluyentes De La Sangre]			
ARIXTRA 10 mg/0.8ml sc soln, 2.5 mg/0.5ml sc soln, 5 mg/0.4ml sc soln, 7.5 mg/0.6ml sc soln	5		PA
ELIQUIS 2.5 mg tab, 5 mg tab	2		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ELIQUIS DVT/PE STARTER PACK 5 mg tab pack	2		PA
<i>enoxaparin sodium 100 mg/ml inj soln pfs, 120 mg/0.8ml inj soln pfs, 150 mg/ml inj soln pfs, 30 mg/0.3ml inj soln pfs, 300 mg/3ml inj soln, 40 mg/0.4ml inj soln pfs, 60 mg/0.6ml inj soln pfs, 80 mg/0.8ml inj soln pfs</i>	4	LOVENOX	PA
<i>fondaparinux sodium 10 mg/0.8ml sc soln, 2.5 mg/0.5ml sc soln, 5 mg/0.4ml sc soln, 7.5 mg/0.6ml sc soln</i>	5	ARIXTRA	PA
FRAGMIN 10000 unit/4ml sc soln, 10000 unit/ml sc soln pfs, 12500 unit/0.5ml sc soln pfs, 15000 unit/0.6ml sc soln pfs, 18000 unit/0.72ml sc soln pfs, 2500 unit/0.2ml sc soln pfs, 5000 unit/0.2ml sc soln pfs, 7500 unit/0.3ml sc soln pfs	5		PA
<i>heparin sodium (porcine) 1000 unit/ml inj soln, 10000 unit/ml inj soln, 20000 unit/ml inj soln, 5000 unit/ml inj soln</i>	1		
JANTOVEN 1 mg tab, 10 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab	3		
LOVENOX 100 mg/ml inj soln pfs, 120 mg/0.8ml inj soln pfs, 150 mg/ml inj soln pfs, 30 mg/0.3ml inj soln pfs, 300 mg/3ml inj soln, 40 mg/0.4ml inj soln pfs, 60 mg/0.6ml inj soln pfs, 80 mg/0.8ml inj soln pfs	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>warfarin sodium 1 mg tab, 10 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab</i>	1	COUMADIN	
XARELTO 10 mg tab, 15 mg tab, 2.5 mg tab, 20 mg tab	2		PA
XARELTO 1 mg/ml susp	2		PA
XARELTO STARTER PACK 15 & 20 mg tab pack	2		PA
Blood Formation Modifiers - Blood Formation Drugs [Modificadores De La Formación De La Sangre - Medicamentos Para La Formación De La Sangre]			
AGRYLIN 0.5 mg cap	3		
<i>anagrelide hcl 0.5 mg cap, 1 mg cap</i>	1	AGRYLIN	
ARANESP (ALBUMIN FREE) 10 mcg/0.4ml inj soln pfs, 100 mcg/0.5ml inj soln pfs, 100 mcg/ml inj soln, 150 mcg/0.3ml inj soln pfs, 200 mcg/0.4ml inj soln pfs, 200 mcg/ml inj soln, 25 mcg/0.42ml inj soln pfs, 25 mcg/ml inj soln, 300 mcg/0.6ml inj soln pfs, 40 mcg/0.4ml inj soln pfs, 40 mcg/ml inj soln, 500 mcg/ml inj soln pfs, 60 mcg/0.3ml inj soln pfs, 60 mcg/ml inj soln	5		PA
<i>azacitidine 100 mg inj susp</i>	4	VIDAZA	PA
EPOGEN 10000 unit/ml inj soln, 2000 unit/ml inj soln, 20000 unit/ml inj soln, 3000 unit/ml inj soln, 4000 unit/ml inj soln	5		PA
FOLOTYN 20 mg/ml iv soln, 40 mg/2ml iv soln	4		PA
GRANIX 300 mcg/0.5ml sc soln pfs, 480 mcg/0.8ml sc soln pfs	5		PA
LEUKINE 250 mcg inj soln	5		PA, QL(117.24 / 42)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
MIRCERA 100 mcg/0.3ml inj soln pfs, 120 mcg/0.3ml inj soln pfs, 200 mcg/0.3ml inj soln pfs, 50 mcg/0.3ml inj soln pfs, 75 mcg/0.3ml inj soln pfs	5		PA
MOZOBIL 24 mg/1.2ml sc soln	5		PA
NEULASTA 6 mg/0.6ml sc soln pfs	5		PA
NEULASTA ONPRO 6 mg/0.6ml sc pfs kit	5		PA
NEUPOGEN 300 mcg/0.5ml inj soln pfs, 300 mcg/ml inj soln, 480 mcg/0.8ml inj soln pfs, 480 mcg/1.6ml inj soln	5		PA
NPLATE 250 mcg sc soln, 500 mcg sc soln	5		PA
PROCRIT 10000 unit/ml inj soln, 2000 unit/ml inj soln, 20000 unit/ml inj soln, 3000 unit/ml inj soln, 4000 unit/ml inj soln, 40000 unit/ml inj soln	4		PA
PROMACTA 12.5 mg tab, 25 mg tab, 50 mg tab, 75 mg tab	5		PA
REBLOZYL 25 mg sc soln, 75 mg sc soln	4		PA
VIDAZA 100 mg inj susp	4		PA
ZARXIO 300 mcg/0.5ml inj soln pfs, 480 mcg/0.8ml inj soln pfs	5		PA
ZIEXTENZO 6 mg/0.6ml sc soln pfs	4		PA
Hemostasis Agents - Drugs To Stop Bleeding [Agentes Para La Hemostasia - Medicamentos Para Detener El Sangrado]			
<i>aminocaproic acid 250 mg/ml iv soln</i>	4		PA
<i>aminocaproic acid 1000 mg tab, 500 mg tab</i>	1	AMICAR	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>aminocaproic acid 0.25 gm/ml soln</i>	4	AMICAR	PA
CYKLOKAPRON 1000 mg/10ml iv soln	5		PA
HEMLIBRA 105 mg/0.7ml sc soln, 150 mg/ml sc soln, 30 mg/ml sc soln, 60 mg/0.4ml sc soln	5		
<i>tranexamic acid 1000 mg/10ml iv soln</i>	1	CYKLOKAPRON	PA
<i>tranexamic acid 650 mg tab</i>	1	LYSTEDA	PA
Platelet Modifying Agents - Platelet Modifying Drugs [Agentes Modificadores De Plaquetas - Medicamentos Modificadores De Plaquetas]			
<i>aspirin-dipyridamole er 25-200 mg cap er 12 hr</i>	1	AGGRENOX	
BRILINTA 60 mg tab, 90 mg tab	2		PA
<i>cilostazol 100 mg tab, 50 mg tab</i>	1	PLETAL	
<i>clopidogrel bisulfate 300 mg tab, 75 mg tab</i>	1	PLAVIX	
<i>dipyridamole 25 mg tab, 50 mg tab, 75 mg tab</i>	1	PERSANTINE	
EFFIENT 10 mg tab, 5 mg tab	2		PA
PLAVIX 75 mg tab	3		
<i>prasugrel hcl 10 mg tab, 5 mg tab</i>	1	EFFIENT	PA
CARDIOVASCULAR AGENTS - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS [AGENTES CARDIOVASCULARES - MEDICAMENTOS PARA TRATAR CONDICIONES DEL CORAZÓN Y LA CIRCULACIÓN]			
Alpha-adrenergic Agonists - Blood Pressure Drugs [Agonistas Alfa-Adrenérgicos - Medicamentos Para La Presión Sanguínea]			
CATAPRES-TTS-1 0.1 mg/24hr tdkw patch	3		
CATAPRES-TTS-2 0.2 mg/24hr tdkw patch	3		
CATAPRES-TTS-3 0.3 mg/24hr tdkw patch	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>clonidine 0.1 mg/24hr tdwk patch, 0.2 mg/24hr tdwk patch, 0.3 mg/24hr tdwk patch</i>	1	CATAPRES-TTS	
<i>clonidine hcl 0.1 mg tab, 0.2 mg tab, 0.3 mg tab</i>	1	CATAPRES	
<i>guanfacine hcl 1 mg tab, 2 mg tab</i>	1	TENEX	
<i>methyldopa 250 mg tab, 500 mg tab</i>	1	ALDOMET	
<i>midodrine hcl 10 mg tab, 2.5 mg tab, 5 mg tab</i>	1	PROAMATINE	
NEXICLON XR 0.17 mg tab er 24 hr	3		
Alpha-adrenergic Blocking Agents - Blood Pressure Drugs [Agentes Bloqueadores Alfa-Adrenérgicos - Medicamentos Para La Presión Sanguínea]			
DIBENZYLINE 10 mg cap	4		PA
MINIPRESS 1 mg cap, 2 mg cap, 5 mg cap	3		
<i>phenoxybenzamine hcl 10 mg cap</i>	4	DIBENZYLINE	PA
<i>prazosin hcl 1 mg cap, 2 mg cap, 5 mg cap</i>	1	MINIPRESS	
Angiotensin II Receptor Antagonists - Blood Pressure Drugs [Antagonistas Del Receptor De Angiotensina II - Medicamentos Para La Presión Sanguínea]			
BENICAR 20 mg tab, 40 mg tab, 5 mg tab	3		
<i>candesartan cilexetil 16 mg tab, 32 mg tab, 4 mg tab, 8 mg tab</i>	1	ATACAND	
<i>irbesartan 150 mg tab, 300 mg tab, 75 mg tab</i>	1	AVAPRO	
<i>losartan potassium 100 mg tab, 25 mg tab, 50 mg tab</i>	1	COZAAR	
<i>olmesartan medoxomil 20 mg tab, 40 mg tab, 5 mg tab</i>	1	BENICAR	
<i>telmisartan 20 mg tab, 40 mg tab, 80 mg tab</i>	1	MICARDIS	
<i>valsartan 160 mg tab, 320 mg tab, 40 mg tab, 80 mg tab</i>	1	DIOVAN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Angiotensin-converting Enzyme (ace) Inhibitors - Blood Pressure Drugs [Inhibidores De La Enzima Convertidora De Angiotensina (Eca) - Medicamentos Para La Presión Sanguínea]			
<i>benazepril hcl 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab</i>	1	LOTENSIN	
<i>captopril 100 mg tab, 12.5 mg tab, 25 mg tab, 50 mg tab</i>	1	CAPOTEN	
<i>enalapril maleate 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab</i>	1	VASOTEC	
<i>fosinopril sodium 10 mg tab, 20 mg tab, 40 mg tab</i>	1	MONOPRIL	
<i>lisinopril 10 mg tab, 2.5 mg tab, 20 mg tab, 30 mg tab, 40 mg tab, 5 mg tab</i>	1	ZESTRIL	
<i>moexipril hcl 15 mg tab, 7.5 mg tab</i>	1	UNIVASC	
<i>perindopril erbumine 2 mg tab, 4 mg tab, 8 mg tab</i>	1	ACEON	
<i>quinapril hcl 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab</i>	1	ACCUPRIL	
<i>ramipril 1.25 mg cap, 10 mg cap, 2.5 mg cap, 5 mg cap</i>	1	ALTACE	
<i>trandolapril 1 mg tab, 2 mg tab, 4 mg tab</i>	1	MAVIK	
Antiarrhythmics - Heart Regulation Drugs [Antiarrítmicos - Medicamentos Para La Regulación Del Corazón]			
<i>amiodarone hcl 100 mg tab, 200 mg tab, 400 mg tab</i>	1	CORDARONE	
<i>disopyramide phosphate 100 mg cap, 150 mg cap</i>	1	NORPACE	
<i>dofetilide 125 mcg cap, 250 mcg cap, 500 mcg cap</i>	1	TIKOSYN	
<i>flecainide acetate 100 mg tab, 150 mg tab, 50 mg tab</i>	1	TAMBOCOR	
<i>mexiletine hcl 150 mg cap, 200 mg cap, 250 mg cap</i>	1	MEXITIL	
MULTAQ 400 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
NORPACE 100 mg cap, 150 mg cap	3		
NORPACE CR 100 mg cap er 12 hr, 150 mg cap er 12 hr	3		
PACERONE 100 mg tab, 200 mg tab, 400 mg tab	3		
<i>propafenone hcl 150 mg tab, 225 mg tab, 300 mg tab</i>	1	RYTHMOL	
<i>propafenone hcl er 225 mg cap er 12 hr, 325 mg cap er 12 hr, 425 mg cap er 12 hr</i>	1	RYTHMOL SR	
<i>quinidine gluconate er 324 mg tab er</i>	1		
<i>quinidine sulfate 200 mg tab, 300 mg tab</i>	1		
RYTHMOL SR 225 mg cap er 12 hr, 325 mg cap er 12 hr, 425 mg cap er 12 hr	3		
<i>sotalol hcl 120 mg tab, 160 mg tab, 240 mg tab, 80 mg tab</i>	1	BETAPACE	
<i>sotalol hcl (af) 120 mg tab, 160 mg tab, 80 mg tab</i>	1	BETAPACE AF	
TIKOSYN 125 mcg cap, 250 mcg cap, 500 mcg cap	3		
Beta-adrenergic Blocking Agents - Blood Pressure Drugs [Agentes Bloqueadores Beta-Adrenérgicos - Medicamentos Para La Presión Sanguínea]			
<i>acebutolol hcl 200 mg cap, 400 mg cap</i>	1	SECTRAL	
<i>atenolol 100 mg tab, 25 mg tab, 50 mg tab</i>	1	TENORMIN	
<i>betaxolol hcl 10 mg tab, 20 mg tab</i>	1	KERLONE	
<i>bisoprolol fumarate 10 mg tab, 5 mg tab</i>	1	ZEBETA	
BYSTOLIC 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>carvedilol 12.5 mg tab, 25 mg tab, 3.125 mg tab, 6.25 mg tab</i>	1	COREG	
COREG 12.5 mg tab, 25 mg tab, 3.125 mg tab, 6.25 mg tab	3		
<i>labetalol hcl 100 mg tab, 200 mg tab, 300 mg tab</i>	1	NORMODYNE	
<i>metoprolol succinate er 100 mg tab er 24 hr, 200 mg tab er 24 hr, 25 mg tab er 24 hr, 50 mg tab er 24 hr</i>	1	TOPROL XL	
<i>metoprolol tartrate 100 mg tab, 25 mg tab, 50 mg tab</i>	1	LOPRESSOR	
<i>nadolol 20 mg tab, 40 mg tab, 80 mg tab</i>	1	CORGARD	
<i>pindolol 10 mg tab, 5 mg tab</i>	1	VISKEN	
<i>propranolol hcl 10 mg tab, 20 mg tab, 40 mg tab, 60 mg tab, 80 mg tab</i>	1	INDERAL	
<i>propranolol hcl 20 mg/5ml soln, 40 mg/5ml soln</i>	1	INDERAL	
<i>propranolol hcl er 120 mg cap er 24 hr, 160 mg cap er 24 hr, 60 mg cap er 24 hr, 80 mg cap er 24 hr</i>	1	INDERAL LA	
<i>timolol maleate 10 mg tab, 20 mg tab, 5 mg tab</i>	1	BLOCADREN	
Calcium Channel Blocking Agents - Blood Pressure Drugs [Agentes Bloqueadores De Los Canales De Calcio - Medicamentos Para La Presión Sanguínea]			
<i>amlodipine besylate 10 mg tab, 2.5 mg tab, 5 mg tab</i>	1	NORVASC	
CARDIZEM 120 mg tab, 30 mg tab, 60 mg tab	3		
CARDIZEM CD 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
cap er 24 hr, 360 mg cap er 24 hr			
CARDIZEM LA 120 mg tab er 24 hr	3		
CARTIA XT 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr	3		
<i>diltiazem hcl 120 mg tab, 30 mg tab, 60 mg tab, 90 mg tab</i>	1	CARDIZEM	
<i>diltiazem hcl er 120 mg cap er 12 hr, 60 mg cap er 12 hr, 90 mg cap er 12 hr</i>	1	CARDIZEM	
<i>diltiazem hcl er 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr</i>	1	DILACOR XR	
<i>diltiazem hcl er beads 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr, 360 mg cap er 24 hr, 420 mg cap er 24 hr</i>	1	TIAZAC	
<i>diltiazem hcl er coated beads 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr, 360 mg cap er 24 hr</i>	1	CARDIZEM CD	
<i>dilt-xr 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr</i>	1	DILACOR XR	
<i>felodipine er 10 mg tab er 24 hr, 2.5 mg tab er 24 hr, 5 mg tab er 24 hr</i>	1	PLENDIL	
<i>isradipine 2.5 mg cap, 5 mg cap</i>	1	DYNACIRC	
<i>nicardipine hcl 20 mg cap, 30 mg cap</i>	1	CARDENE	
<i>nifedipine 10 mg cap, 20 mg cap</i>	1	PROCARDIA	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>nifedipine er 30 mg tab er 24 hr, 60 mg tab er 24 hr, 90 mg tab er 24 hr</i>	1	ADALAT CC	
<i>nifedipine er osmotic release 30 mg tab er 24 hr, 60 mg tab er 24 hr, 90 mg tab er 24 hr</i>	1	PROCARDIA XL	
<i>nimodipine 30 mg cap</i>	1	NIMOTOP	
<i>nisoldipine er 17 mg tab er 24 hr, 20 mg tab er 24 hr, 25.5 mg tab er 24 hr, 30 mg tab er 24 hr, 34 mg tab er 24 hr, 40 mg tab er 24 hr, 8.5 mg tab er 24 hr</i>	1	SULAR	
NORVASC 10 mg tab, 2.5 mg tab, 5 mg tab	3		
PROCARDIA XL 30 mg tab er 24 hr, 60 mg tab er 24 hr, 90 mg tab er 24 hr	3		
SULAR 17 mg tab er 24 hr, 34 mg tab er 24 hr, 8.5 mg tab er 24 hr	3		
TAZTIA XT 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr, 360 mg cap er 24 hr	3		
TIAZAC 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr, 360 mg cap er 24 hr, 420 mg cap er 24 hr	3		
<i>verapamil hcl 120 mg tab, 40 mg tab, 80 mg tab</i>	1	CALAN	
<i>verapamil hcl er 120 mg tab er, 180 mg tab er, 240 mg tab er</i>	1	CALAN	
<i>verapamil hcl er 100 mg cap er 24 hr, 120 mg cap er 24 hr, 180 mg cap er 24 hr, 200 mg cap er 24 hr, 240 mg cap er</i>	1	VERELAN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
24 hr, 300 mg cap er 24 hr, 360 mg cap er 24 hr			
VERELAN 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 360 mg cap er 24 hr	3		
VERELAN PM 100 mg cap er 24 hr, 200 mg cap er 24 hr, 300 mg cap er 24 hr	3		
Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs [Agentes Cardiovasculares, Otros - Medicamentos Cardiacos Misceláneos]			
ACCURETIC 10-12.5 mg tab, 20-12.5 mg tab	3		
aliskiren fumarate 150 mg tab, 300 mg tab	1	TEKTURNA	
amiloride-hydrochlorothiazide 5-50 mg tab	1	MODURETIC	
amlodipine besy-benazepril hcl 10-20 mg cap, 10-40 mg cap, 2.5-10 mg cap, 5-10 mg cap, 5-20 mg cap, 5-40 mg cap	1	LOTREL	
amlodipine besylate-valsartan 10-160 mg tab, 10-320 mg tab, 5-160 mg tab, 5-320 mg tab	1	EXFORGE	
amlodipine-atorvastatin 10-10 mg tab, 10-20 mg tab, 10-40 mg tab, 10-80 mg tab, 2.5-10 mg tab, 2.5-20 mg tab, 2.5-40 mg tab, 5-10 mg tab, 5-20 mg tab, 5-40 mg tab, 5-80 mg tab	1	CADUET	
amlodipine-olmesartan 10-20 mg tab, 10-40 mg tab, 5-20 mg tab, 5-40 mg tab	1	AZOR	
amlodipine-valsartan-hctz 10-160-12.5 mg tab, 10-160-25 mg tab, 10-320-25 mg tab, 5-160-12.5 mg tab, 5-160-25 mg tab	1	EXFORGE HCT	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ATACAND HCT 16-12.5 mg tab, 32-12.5 mg tab, 32-25 mg tab	3		
<i>atenolol-chlorthalidone 100-25 mg tab, 50-25 mg tab</i>	1	TENORETIC	
AVALIDE 150-12.5 mg tab	3		
AZOR 10-20 mg tab, 10-40 mg tab, 5-20 mg tab, 5-40 mg tab	3		
<i>benazepril-hydrochlorothiazide 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab, 5-6.25 mg tab</i>	1	LOTENSIN HCT	
BENICAR HCT 20-12.5 mg tab, 40-12.5 mg tab, 40-25 mg tab	3		
BIDIL 20-37.5 mg tab	3		
<i>bisoprolol-hydrochlorothiazide 10-6.25 mg tab, 2.5-6.25 mg tab, 5-6.25 mg tab</i>	1	ZIAC	
CADUET 10-10 mg tab, 10-20 mg tab, 10-40 mg tab, 10-80 mg tab, 5-10 mg tab, 5-20 mg tab, 5-40 mg tab, 5-80 mg tab	3		
<i>candesartan cilexetil-hctz 16-12.5 mg tab, 32-12.5 mg tab, 32-25 mg tab</i>	1	ATACAND HCT	
<i>captopril-hydrochlorothiazide 25-15 mg tab, 25-25 mg tab, 50-15 mg tab, 50-25 mg tab</i>	1	CAPOZIDE	
<i>digoxin 125 mcg tab, 250 mcg tab</i>	1	LANOXIN	
<i>digoxin 0.05 mg/ml soln</i>	1	LANOXIN	
DIOVAN HCT 160-12.5 mg tab, 160-25 mg tab, 320-12.5 mg tab, 320-25 mg tab, 80-12.5 mg tab	3		
EDARBYCLOR 40-12.5 mg tab, 40-25 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>enalapril-hydrochlorothiazide</i> 10-25 mg tab, 5-12.5 mg tab	1	VASERETIC	
EXFORGE 10-160 mg tab, 10-320 mg tab, 5-160 mg tab, 5-320 mg tab	3		
EXFORGE HCT 10-160-12.5 mg tab, 10-160-25 mg tab, 10- 320-25 mg tab, 5-160-12.5 mg tab, 5-160-25 mg tab	3		
<i>fosinopril sodium-hctz</i> 10-12.5 mg tab, 20-12.5 mg tab	1	MONOPRIL-HCT	
HYZAAR 100-12.5 mg tab, 100-25 mg tab, 50-12.5 mg tab	3		
<i>irbesartan-hydrochlorothiazide</i> 150-12.5 mg tab, 300-12.5 mg tab	1	AVALIDE	
<i>isosorb dinitrate-hydralazine</i> 20-37.5 mg tab	1	BIDIL	
LANOXIN 125 mcg tab, 250 mcg tab	3		
<i>lisinopril-hydrochlorothiazide</i> 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab	1	ZESTORETIC	
<i>losartan potassium-hctz</i> 100- 12.5 mg tab, 100-25 mg tab, 50-12.5 mg tab	1	HYZAAR	
LOTENSIN HCT 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab	3		
LOTREL 10-20 mg cap, 10-40 mg cap, 5-10 mg cap, 5-20 mg cap	3		
MAXZIDE 75-50 mg tab	3		
MAXZIDE-25 37.5-25 mg tab	3		
<i>metoprolol- hydrochlorothiazide</i> 100-25 mg tab, 100-50 mg tab, 50-25 mg tab	1	LOPRESSOR HCT	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>metyrosine 250 mg cap</i>	1	DEMSER	
MICARDIS HCT 40-12.5 mg tab, 80-12.5 mg tab, 80-25 mg tab	3		
<i>olmesartan medoxomil-hctz 20-12.5 mg tab, 40-12.5 mg tab, 40-25 mg tab</i>	1	BENICAR HCT	
<i>olmesartan-amlodipine-hctz 20-5-12.5 mg tab, 40-10-12.5 mg tab, 40-10-25 mg tab, 40-5-12.5 mg tab, 40-5-25 mg tab</i>	1	TRIBENZOR	
<i>pentoxifylline er 400 mg tab er</i>	1	TRENTAL	
<i>quinapril-hydrochlorothiazide 20-12.5 mg tab, 20-25 mg tab</i>	1	ACCURETIC	
<i>ranolazine er 1000 mg tab er 12 hr, 500 mg tab er 12 hr</i>	1	RANEXA	
<i>spironolactone-hctz 25-25 mg tab</i>	1	ALDACTAZIDE	
TEKTURNA 150 mg tab, 300 mg tab	3		
TEKTURNA HCT 300-12.5 mg tab, 300-25 mg tab	3		
<i>telmisartan-amlodipine 40-10 mg tab, 40-5 mg tab, 80-10 mg tab, 80-5 mg tab</i>	1	TWYNSTA	
<i>telmisartan-hctz 40-12.5 mg tab, 80-12.5 mg tab, 80-25 mg tab</i>	1	MICARDIS-HCT	
<i>trandolapril-verapamil hcl er 1-240 mg tab er, 2-180 mg tab er, 2-240 mg tab er, 4-240 mg tab er</i>	1	TARKA	
<i>triamterene-hctz 37.5-25 mg cap</i>	1	DYAZIDE	
<i>triamterene-hctz 37.5-25 mg tab, 75-50 mg tab</i>	1	MAXZIDE	
TRIBENZOR 20-5-12.5 mg tab, 40-10-12.5 mg tab, 40-	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
10-25 mg tab, 40-5-12.5 mg tab, 40-5-25 mg tab			
<i>valsartan-hydrochlorothiazide</i> 160-12.5 mg tab, 160-25 mg tab, 320-12.5 mg tab, 320-25 mg tab, 80-12.5 mg tab	1	DIOVAN HCT	
VASERETIC 10-25 mg tab	3		
ZESTORETIC 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab	3		
Diuretics, Loop - Cardiac Drugs [Diuréticos, Asa De Henle - Medicamentos Cardiacos]			
<i>bumetanide</i> 0.5 mg tab, 1 mg tab, 2 mg tab	1	BUMEX	
<i>bumetanide</i> 0.25 mg/ml inj soln	1	BUMEX	
EDECRIN 25 mg tab	3		
<i>ethacrynic acid</i> 25 mg tab	1	EDECRIN	
<i>furosemide</i> 20 mg tab, 40 mg tab, 80 mg tab	1	LASIX	
<i>furosemide</i> 10 mg/ml inj soln, 10 mg/ml soln, 8 mg/ml soln	1	LASIX	
LASIX 20 mg tab, 40 mg tab, 80 mg tab	3		
<i>toremide</i> 10 mg tab, 100 mg tab, 20 mg tab, 5 mg tab	1	DEMADEX	
Diuretics, Potassium-sparing - Cardiac Drugs [Diuréticos, Conservadores De Potasio - Medicamentos Cardiacos]			
ALDACTONE 100 mg tab, 25 mg tab, 50 mg tab	3		
<i>amiloride hcl</i> 5 mg tab	1	MIDAMOR	
<i>eplerenone</i> 25 mg tab, 50 mg tab	1	INSPRA	
INSPRA 25 mg tab, 50 mg tab	3		
<i>spironolactone</i> 100 mg tab, 25 mg tab, 50 mg tab	1	ALDACTONE	
<i>triamterene</i> 100 mg cap, 50 mg cap	1	DYRENIUM	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Diuretics, Thiazide - Cardiac Drugs [Diuréticos, Tiazidas - Medicamentos Cardiacos]			
<i>chlorthalidone 25 mg tab, 50 mg tab</i>	1	HYGROTON	
DIURIL 250 mg/5ml susp	3		
<i>hydrochlorothiazide 25 mg tab, 50 mg tab</i>	1	HYDRODIURIL	
<i>hydrochlorothiazide 12.5 mg cap, 12.5 mg tab</i>	1	MICROZIDE	
<i>indapamide 1.25 mg tab, 2.5 mg tab</i>	1	LOZOL	
<i>metolazone 10 mg tab, 2.5 mg tab, 5 mg tab</i>	1	ZAROXOLYN	
THALITONE 15 mg tab	3		
Dyslipidemics, Fibric Acid Derivatives - Cholesterol Control Drugs [Dislipidémicos, Derivados Del Ácido Fíbrico - Medicamentos Para Control Del Colesterol]			
<i>fenofibrate 120 mg tab, 40 mg tab</i>	1	FENOGLIDE	
<i>fenofibrate 150 mg cap, 50 mg cap</i>	1	LIPOFEN	
<i>fenofibrate 145 mg tab, 160 mg tab, 48 mg tab, 54 mg tab</i>	1	TRICOR	
<i>fenofibrate micronized 130 mg cap, 43 mg cap</i>	1	ANTARA	
<i>fenofibrate micronized 134 mg cap, 200 mg cap, 67 mg cap</i>	1	TRICOR	
<i>fenofibric acid 105 mg tab, 35 mg tab</i>	1	FIBRICOR	
<i>fenofibric acid 135 mg cap dr, 45 mg cap dr</i>	1	TRILIPIX	
FENOGLIDE 120 mg tab, 40 mg tab	3		
FIBRICOR 105 mg tab, 35 mg tab	3		
<i>gemfibrozil 600 mg tab</i>	1	LOPID	
LIPOFEN 150 mg cap, 50 mg cap	3		
LOPID 600 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
TRICOR 145 mg tab, 48 mg tab	3		
TRILIPIX 135 mg cap dr, 45 mg cap dr	3		
Dyslipidemics, Hmg Coa Reductase Inhibitors - Cholesterol Control Drugs [Dislipidémicos, Inhibidores De La Hmg Coa Reductasa - Medicamentos Para Control Del Colesterol]			
<i>atorvastatin calcium 10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab</i>	1	LIPITOR	
CRESTOR 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab	3		
<i>fluvastatin sodium 20 mg cap, 40 mg cap</i>	1	LESCOL	
<i>lovastatin 10 mg tab, 20 mg tab, 40 mg tab</i>	1	MEVACOR	
<i>pravastatin sodium 10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab</i>	1	PRAVACHOL	
<i>rosuvastatin calcium 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab</i>	1	CRESTOR	
<i>simvastatin 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab, 80 mg tab</i>	1	ZOCOR	
Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs [Dislipidémicos, Otros - Medicamentos Para Control Del Colesterol Misceláneos]			
<i>cholestyramine 4 gm pckt</i>	1	QUESTRAN	
<i>cholestyramine 4 gm/dose oral pwdr</i>	1	QUESTRAN	
<i>cholestyramine light 4 gm pckt</i>	1	QUESTRAN LIGHT	
<i>cholestyramine light 4 gm/dose oral pwdr</i>	1	QUESTRAN LIGHT	
<i>colesevelam hcl 3.75 gm pckt, 625 mg tab</i>	1	WELCHOL	
COLESTID 1 gm tab, 5 gm pckt	3		
COLESTID 5 gm oral gr	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
COLESTID FLAVORED 5 gm pckt	3		
COLESTID FLAVORED 5 gm oral gr	3		
<i>colestipol hcl 1 gm tab, 5 gm pckt</i>	1	COLESTID	
<i>colestipol hcl 5 gm oral gr</i>	1	COLESTID	
<i>ezetimibe 10 mg tab</i>	1	ZETIA	
<i>icosapent ethyl 1 gm cap</i>	1	VASCEPA	
LOVAZA 1 gm cap	3		
<i>niacin (antihyperlipidemic) 500 mg tab</i>	1	NIACOR	
<i>niacin er (antihyperlipidemic) 1000 mg tab er, 500 mg tab er, 750 mg tab er</i>	1	NIASPAN	
<i>omega-3-acid ethyl esters 1 gm cap</i>	1	LOVAZA	
PREVALITE 4 gm pckt	3		
PREVALITE 4 gm/dose oral pwr	3		
QUESTRAN 4 gm pckt	3		
QUESTRAN 4 gm/dose oral pwr	3		
QUESTRAN LIGHT 4 gm/dose oral pwr	3		
ZETIA 10 mg tab	2		
Vasodilators, Direct-acting Arterial - Chest Pain Drugs [Vasodilatadores Arteriales De Acción Directa - Medicamentos Para Dolor De Pecho]			
<i>hydralazine hcl 10 mg tab, 100 mg tab, 25 mg tab, 50 mg tab</i>	1	APRESOLINE	
Vasodilators, Direct-acting Arterial/venous - Chest Pain Drugs [Vasodilatadores Arteriovenosos De Acción Directa - Medicamentos Para Dolor De Pecho]			
<i>isosorbide dinitrate 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab, 5 mg tab</i>	1	ISORDIL TITRADOSE	
<i>isosorbide mononitrate 10 mg tab, 20 mg tab</i>	1	MONOKET	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>isosorbide mononitrate er 120 mg tab er 24 hr, 30 mg tab er 24 hr, 60 mg tab er 24 hr</i>	1	IMDUR	
NITRO-BID 2 % td oint	3		
NITRO-DUR 0.1 mg/hr td patch 24hr, 0.2 mg/hr td patch 24hr, 0.3 mg/hr td patch 24hr, 0.4 mg/hr td patch 24hr, 0.6 mg/hr td patch 24hr, 0.8 mg/hr td patch 24hr	3		
<i>nitroglycerin 0.1 mg/hr td patch 24hr, 0.2 mg/hr td patch 24hr, 0.4 mg/hr td patch 24hr, 0.6 mg/hr td patch 24hr</i>	1	NITRO-DUR	
<i>nitroglycerin 0.4 mg/spray tl soln</i>	1	NITROLINGUAL	
<i>nitroglycerin 0.3 mg tab subl, 0.4 mg tab subl, 0.6 mg tab subl</i>	1	NITROSTAT	
NITROLINGUAL 0.4 mg/spray tl soln	3		
NITROSTAT 0.3 mg tab subl, 0.4 mg tab subl, 0.6 mg tab subl	2		
NITRO-TIME 2.5 mg cap er, 6.5 mg cap er, 9 mg cap er	3		
CENTRAL NERVOUS SYSTEM AGENTS - DRUGS TO TREAT NERVE CONDITIONS [AGENTES DEL SISTEMA NERVIOSO CENTRAL - MEDICAMENTOS PARA TRATAR CONDICIONES DE LOS NERVIOS]			
Attention Deficit Hyperactivity Disorder Agents, Amphetamines - Adhd Drugs [Agentes Para El Desorden De Déficit De Atención E Hiperactividad, Anfetaminas - Medicamentos Para Adhd]			
ADDERALL 10 mg tab, 12.5 mg tab, 15 mg tab, 20 mg tab, 30 mg tab, 5 mg tab, 7.5 mg tab	3		PA
ADDERALL XR 10 mg cap er 24 hr, 15 mg cap er 24 hr, 20 mg cap er 24 hr, 25 mg cap er	3		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
24 hr, 30 mg cap er 24 hr, 5 mg cap er 24 hr			
<i>amphetamine-dextroamphetamine 10 mg cap er 24 hr, 15 mg cap er 24 hr, 20 mg cap er 24 hr, 25 mg cap er 24 hr, 30 mg cap er 24 hr, 5 mg cap er 24 hr</i>	1	ADDERALL XR	PA
<i>amphetamine-dextroamphetamine 10 mg tab, 12.5 mg tab, 15 mg tab, 20 mg tab, 30 mg tab, 5 mg tab, 7.5 mg tab</i>	1	ADDERALL	PA
DESOXYN 5 mg tab	3		PA
DEXEDRINE 10 mg cap er 24 hr, 15 mg cap er 24 hr	3		PA
<i>dextroamphetamine sulfate 10 mg tab, 5 mg tab</i>	1	DEXTROSTAT	PA
<i>dextroamphetamine sulfate 5 mg/5ml soln</i>	1	PROCENTRA	PA
<i>dextroamphetamine sulfate er 10 mg cap er 24 hr, 15 mg cap er 24 hr, 5 mg cap er 24 hr</i>	1	DEXEDRINE	PA
<i>lisdexamfetamine dimesylate 20 mg cap, 30 mg cap, 40 mg cap, 50 mg cap, 60 mg cap</i>	1		PA
<i>methamphetamine hcl 5 mg tab</i>	1	DESOXYN	PA
PROCENTRA 5 mg/5ml soln	3		PA
VYVANSE 10 mg cap, 10 mg tab chew, 20 mg cap, 20 mg tab chew, 30 mg cap, 30 mg tab chew, 40 mg cap, 40 mg tab chew, 50 mg cap, 50 mg tab chew, 60 mg cap, 60 mg tab chew, 70 mg cap	3		PA
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - Adhd Drugs [Agentes Para El Desorden De Déficit De Atención E Hiperactividad, No-Anfetaminas - Medicamentos Para Adhd]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>atomoxetine hcl 10 mg cap, 100 mg cap, 18 mg cap, 25 mg cap, 40 mg cap, 60 mg cap, 80 mg cap</i>	1	STRATTERA	PA
<i>clonidine hcl er 0.1 mg tab er 12 hr</i>	1	KAPVAY	PA
CONCERTA 18 mg tab er, 27 mg tab er, 36 mg tab er, 54 mg tab er	3		PA
DAYTRANA 10 mg/9hr td patch, 15 mg/9hr td patch, 20 mg/9hr td patch, 30 mg/9hr td patch	3		PA
<i>dexmethylphenidate hcl 10 mg tab, 2.5 mg tab, 5 mg tab</i>	1	FOCALIN	PA
<i>dexmethylphenidate hcl er 10 mg cap er 24 hr, 15 mg cap er 24 hr, 20 mg cap er 24 hr, 25 mg cap er 24 hr, 30 mg cap er 24 hr, 35 mg cap er 24 hr, 40 mg cap er 24 hr, 5 mg cap er 24 hr</i>	1	FOCALIN XR	PA
FOCALIN 10 mg tab, 2.5 mg tab, 5 mg tab	3		PA
FOCALIN XR 10 mg cap er 24 hr, 15 mg cap er 24 hr, 20 mg cap er 24 hr, 25 mg cap er 24 hr, 30 mg cap er 24 hr, 35 mg cap er 24 hr, 40 mg cap er 24 hr, 5 mg cap er 24 hr	3		PA
<i>guanfacine hcl er 1 mg tab er 24 hr, 2 mg tab er 24 hr, 3 mg tab er 24 hr, 4 mg tab er 24 hr</i>	1	INTUNIV	PA
INTUNIV 1 mg tab er 24 hr, 2 mg tab er 24 hr, 3 mg tab er 24 hr, 4 mg tab er 24 hr	3		PA
KAPVAY 0.1 mg tab er 12 hr	3		PA
METHYLIN 10 mg/5ml soln, 5 mg/5ml soln	3		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>methylphenidate hcl 10 mg tab chew, 2.5 mg tab chew, 5 mg tab chew</i>	1	METHYLIN	PA
<i>methylphenidate hcl 10 mg/5ml soln, 5 mg/5ml soln</i>	1	METHYLIN	PA
<i>methylphenidate hcl 10 mg tab, 20 mg tab, 5 mg tab</i>	1	RITALIN	PA
<i>methylphenidate hcl er 18 mg tab er 24 hr, 27 mg tab er 24 hr, 36 mg tab er 24 hr, 54 mg tab er 24 hr</i>	1		PA
<i>methylphenidate hcl er 10 mg tab er, 20 mg tab er</i>	1	RITALIN SR	PA
<i>methylphenidate hcl er (cd) 10 mg cap er, 20 mg cap er, 30 mg cap er, 40 mg cap er, 50 mg cap er, 60 mg cap er</i>	1	METADATE CD	PA
<i>methylphenidate hcl er (la) 10 mg cap er 24 hr, 20 mg cap er 24 hr, 30 mg cap er 24 hr, 40 mg cap er 24 hr</i>	1	RITALIN LA	PA
<i>methylphenidate hcl er (osm) 18 mg tab er, 27 mg tab er, 36 mg tab er, 54 mg tab er</i>	1	CONCERTA	PA
QUILLICHEW ER 20 mg tab chew er, 30 mg tab chew er, 40 mg tab chew er	2		PA
RITALIN 10 mg tab, 20 mg tab, 5 mg tab	3		PA
STRATTERA 10 mg cap, 100 mg cap, 18 mg cap, 25 mg cap, 40 mg cap, 60 mg cap, 80 mg cap	2		PA
Central Nervous System, Other - Miscellaneous Central Nervous System Drugs [Sistema Nervioso Central, Otros - Medicamentos Para El Sistema Nervioso Central Misceláneos]			
GRALISE 300 mg tab, 600 mg tab	3		
HORIZANT 600 mg tab er	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
NUEDEXTA 20-10 mg cap	3		
RILUTEK 50 mg tab	5		PA
<i>riluzole 50 mg tab</i>	4	RILUTEK	PA
<i>tetrabenazine 12.5 mg tab, 25 mg tab</i>	5	XENAZINE	PA
XENAZINE 12.5 mg tab, 25 mg tab	5		PA
Fibromyalgia Agents - Drugs To Treat Muscle And Soft Tissue Pain [Agentes Para Fibromialgia - Medicamentos Para Tratar Dolor Muscular Y De Tejido Blando]			
LYRICA CR 165 mg tab er 24 hr, 330 mg tab er 24 hr, 82.5 mg tab er 24 hr	3		
<i>pregabalin 100 mg cap, 150 mg cap, 200 mg cap, 225 mg cap, 25 mg cap, 300 mg cap, 50 mg cap, 75 mg cap</i>	1	LYRICA	
<i>pregabalin 20 mg/ml soln</i>	1	LYRICA	
<i>pregabalin er 165 mg tab er 24 hr, 330 mg tab er 24 hr, 82.5 mg tab er 24 hr</i>	1	LYRICA CR	
SAVELLA 100 mg tab, 12.5 mg tab, 25 mg tab, 50 mg tab	3		
SAVELLA TITRATION PACK 12.5 & 25 & 50 mg oral misc	3		
Multiple Sclerosis Agents - Multiple Sclerosis Drugs [Agentes Para La Esclerosis Múltiple - Medicamentos Para Esclerosis Múltiple]			
AUBAGIO 14 mg tab, 7 mg tab	4		PA
AVONEX PEN 30 mcg/0.5ml im auto-inj kit	4		PA
AVONEX PREFILLED 30 mcg/0.5ml im pfs kit	4		PA
BETASERON 0.3 mg sc kit	4		PA
<i>dimethyl fumarate 120 mg cap dr, 240 mg cap dr</i>	4	TECFIDERA	PA
<i>dimethyl fumarate starter pack 120 & 240 mg cap dr pack</i>	4	TECFIDERA STARTER PACK	PA
EXTAVIA 0.3 mg sc kit	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>fingolimod hcl 0.5 mg cap</i>	4	GILENYA	PA
GILENYA 0.25 mg cap, 0.5 mg cap	4		PA
<i>glatiramer acetate 20 mg/ml sc soln pfs, 40 mg/ml sc soln pfs</i>	4	COPAXONE	PA
<i>glatopa 20 mg/ml sc soln pfs</i>	4	COPAXONE	PA
MAYZENT 0.25 mg tab, 1 mg tab, 2 mg tab	4		PA
MAYZENT STARTER PACK 0.25 mg tab pack, 12 x 0.25 mg tab pack	4		PA
OCREVUS 300 mg/10ml iv soln	4		PA
PLEGRIDY 125 mcg/0.5ml sc soln pen-inj, 125 mcg/0.5ml sc soln pfs	5		PA
PLEGRIDY STARTER PACK 63 & 94 mcg/0.5ml sc soln pen-inj, 63 & 94 mcg/0.5ml sc soln pfs	5		PA
<i>teriflunomide 14 mg tab, 7 mg tab</i>	4	AUBAGIO	PA
TYSABRI 300 mg/15ml iv conc	4		PA
VUMERITY 231 mg cap dr	4		PA
DENTAL AND ORAL AGENTS - DRUGS TO TREAT MOUTH AND THROAT CONDITIONS [AGENTES DENTALES Y ORALES - MEDICAMENTOS PARA TRATAR CONDICIONES DE LA BOCA Y GARGANTA]			
Dental And Oral Agents - Drugs To Treat Mouth And Throat Conditions [Agentes Dentales Y Orales - Medicamentos Para Tratar Condiciones De La Boca Y Garganta]			
<i>cevimeline hcl 30 mg cap</i>	1	EVOXAC	
DEBACTEROL 30-50 % m/t soln	3		
DEBACTEROL 30-50 % m/t soln	3		
EVOXAC 30 mg cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
FIRST-MOUTHWASH BLM m/t susp	3		
KEPIVANCE 6.25 mg iv soln	4		PA
<i>lidocaine hcl 4 % m/t soln</i>	1	XYLOCAINE	
<i>lidocaine viscous hcl 2 % m/t soln</i>	1	XYLOCAINE	
ORALONE 0.1 % m/t paste	3		
<i>pilocarpine hcl 5 mg tab, 7.5 mg tab</i>	1	SALAGEN	
SALAGEN 5 mg tab, 7.5 mg tab	3		
<i>triamcinolone acetonide 0.1 % m/t paste</i>	1	KENALOG IN ORABASE	
DERMATOLOGICAL AGENTS - DRUGS TO TREAT SKIN CONDITIONS [AGENTES DERMATOLÓGICOS - MEDICAMENTOS PARA TRATAR CONDICIONES DE LA PIEL]			
Dermatological Agents - Drugs To Treat Skin Conditions [Agentes Dermatológicos - Medicamentos Para Tratar Condiciones De La Piel]			
ABSORICA 10 mg cap, 20 mg cap, 25 mg cap, 30 mg cap, 35 mg cap, 40 mg cap	3		
ACCUTANE 10 mg cap, 20 mg cap, 40 mg cap	3		
<i>acitretin 10 mg cap, 17.5 mg cap, 25 mg cap</i>	1	SORIATANE	PA
ACZONE 5 % gel, 7.5 % gel	3		
<i>adapalene 0.1 % crm, 0.1 % gel, 0.3 % gel</i>	1	DIFFERIN	AL
<i>adapalene-benzoyl peroxide 0.1-2.5 % gel</i>	1	EPIDUO	
<i>ammonium lactate 12 % crm, 12 % lot</i>	1	LAC-HYDRIN	
AMNESTEEM 10 mg cap, 20 mg cap, 40 mg cap	3		
ANALPRAM HC 2.5-1 % crm	3		
ANALPRAM HC SINGLES 2.5-1 % crm	3		
ANALPRAM-HC 1-1 % crm	3		
ANALPRAM-HC 2.5-1 % lot	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ATOPICLAIR crm	3		
ATRALIN 0.05 % gel	3		AL
AVAR CLEANSER 10-5 % ext liq	3		AL
AVAR LS CLEANSER 10-2 % ext liq	3		AL
AVAR-E EMOLLIENT 10-5 % crm	3		AL
AVAR-E GREEN 10-5 % crm	3		AL
AVAR-E LS 10-2 % crm	3		AL
AVITA 0.025 % crm	3		AL
<i>azelaic acid 15 % gel</i>	1	FINACEA	
AZELEX 20 % crm	3		
<i>bensal hp 3 % oint</i>	1		
BENZAC AC WASH 5 % ext liq	3		
BENZAMYCIN 5-3 % gel	3		
BENZEPRO 5.3 % foam	3		
BENZEPRO CREAMY WASH 7 % ext liq	3		
BENZEPRO FOAMING CLOTHS 6 % ext misc	3		
<i>benzoyl perox-hydrocortisone 5-0.5 % lot</i>	1		AL
<i>benzoyl peroxide 9.8 % foam</i>	1	BENZEFOAMULTRA	AL
<i>benzoyl peroxide 8 % gel</i>	1	BREVOXYL	AL
<i>benzoyl peroxide-erythromycin 5-3 % gel</i>	1	BENZAMYCIN	AL
<i>bp 10-1 10-1 % ext emul</i>	1		AL
<i>bp cleansing wash 10-4 % ext emul</i>	1		AL
<i>bp wash 2.5 % ext liq</i>	1		AL
<i>brimonidine tartrate 0.33 % gel</i>	1	MIRVASO	
<i>calcipotriene 0.005 % crm, 0.005 % oint</i>	1	DOVONEX	
<i>calcipotriene 0.005 % ext soln</i>	1	DOVONEX	
<i>calcipotriene 0.005 % foam</i>	1	SORILUX	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>calcipotriene-betameth diprop</i> 0.005-0.064 % ext susp, 0.005-0.064 % oint	1	TACLONEX	
CALCITRENE 0.005 % oint	3		
<i>calcitriol 3 mcg/gm oint</i>	1	VECTICAL	
CEM-UREA 45 % ext soln	3		
CEROVEL 40 % lot	3		
CLARAVIS 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap	3		
CLINDACIN ETZ 1 % ext kit	3		
CLINDACIN PAC 1 % ext kit	3		
<i>clindamycin phos-benzoyl perox</i> 1.2-2.5 % gel	1	ACANYA	
<i>clindamycin phos-benzoyl perox</i> 1-5 % gel	1	BENZACLIN	AL
<i>clindamycin phos-benzoyl perox</i> 1.2-5 % gel	1	DUAC	AL
<i>clindamycin-tretinoin</i> 1.2-0.025 % gel	1	ZIANA	
CLINOIN 1.25-0.025-1 % crm	3		
CONDYLOX 0.5 % gel	3		
CORTANE-B 10-10-1 mg/ml lot	3		
<i>dapsone</i> 5 % gel, 7.5 % gel	1	ACZONE	
DEXERYL crm	3		
DIFFERIN 0.1 % crm, 0.3 % gel	3		
DIFFERIN 0.1 % lot	3		
<i>doxepin hcl</i> 5 % crm	1	PRUDOXIN	
<i>doxycycline</i> 40 mg cap dr	1	ORACEA	
ELETONE crm	3		
EPIDUO 0.1-2.5 % gel	3		
EPIDUO FORTE 0.3-2.5 % gel	3		
FABIOR 0.1 % foam	3		
FINACEA 15 % foam	3		
GORDOFILM 16.7-16.7 % ext soln	3		
HPR PLUS crm, foam	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
HPR PLUS HYDROGEL ext kit	3		
HYDRO 40 40 % foam	3		
hydrocortisone ace-pramoxine 1-1 % crm	1	ANALPRAM HC	
hydrocort-pramoxine (perianal) 2.5-1 % crm	1	ANALPRAM HC	
HYLATOPIC PLUS crm	3		
imiquimod 5 % crm	1	ALDARA	
imiquimod 3.75 % crm	1	ZYCLARA	
imiquimod pump 3.75 % crm	1	ZYCLARA	
INOVA 4 & 5 % ext kit, 8 & 5 % ext kit	3		
INOVA 4/1 ACNE CONTROL THERAPY 4 & 1 & 5 % ext kit	3		
INOVA 8/2 ACNE CONTROL THERAPY 8 & 2 & 5 % ext kit	3		
isotretinoin 10 mg cap, 20 mg cap, 25 mg cap, 30 mg cap, 35 mg cap, 40 mg cap	1	ABSORICA	
ivermectin 1 % crm	1	SOOLANTRA	
KERALYT 6 % gel	3		
KERALYT SCALP 6 % ext kit	3		
lactic acid 10 % lot	1	LACTINOL	
lactic acid e 10-3500 %-unt/30gm crm	1		
LEVULAN KERASTICK 20 % ext soln	5		PA
lidocaine-hydrocort (perianal) 3-0.5 % crm	1	ANAMANTLE HC	
lidocaine-hydrocortisone ace 3-0.5 % rect kit, 3-1 % rect kit, 3-2.5 % rect kit	1	ANAMANTLE HC	
lidocaine-hydrocortisone ace 2-2 % rect kit	1	PERANEX HC	
lidocaine-hydrocortisone ace 2.8-0.55 % rect gel	1	RECTAGEL HC	
METROCREAM 0.75 % crm	3		
METROGEL 1 % gel	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
METROLOTION 0.75 % lot	3		
<i>metronidazole 0.75 % crm</i>	1	METROCREAM	
<i>metronidazole 0.75 % gel, 1 % gel</i>	1	METROGEL	
<i>metronidazole 0.75 % lot</i>	1	METROLOTION	
MIRVASO 0.33 % gel	3		
NEOSALUS crm, foam	3		
NEOSALUS lot	3		
NEUAC 1.2-5 % gel	3		
NORITATE 1 % crm	3		
NUTRASEB crm	3		
ONEXTON 1.2-3.75 % gel	3		
ORACEA 40 mg cap dr	3		
PANOXYL 2.5 % ext liq	1		AL
<i>pimecrolimus 1 % crm</i>	1	ELIDEL	
PLEXION 9.8-4.8 % crm, 9.8-4.8 % lot	3		AL
PLEXION CLEANSER 9.8-4.8 % ext liq	3		AL
PLEXION CLEANSING CLOTH 9.8-4.8 % pad	3		AL
PODOCON-25 25 % ext soln	1		
<i>podofilox 0.5 % ext soln</i>	1	CONDYLOX	
PR BENZOYL PEROXIDE WASH 7 % ext liq	3		
PR BENZOYL PEROXIDE WASH 7 % ext liq	3		
PR CREAM ext kit	3		
PRESERA foam	3		
PROCORT 1.85-1.15 % crm	3		
PROCTOFOAM HC 1-1 % foam	3		
PRUCLAIR crm	3		
PRUDOXIN 5 % crm	3		
PRUMYX crm	3		
<i>pyrogalllic acid 25-2 % oint</i>	1		
RECTIV 0.4 % rect oint	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
RETIN-A 0.01 % gel, 0.025 % crm, 0.025 % gel, 0.05 % crm, 0.1 % crm	3		AL
RETIN-A MICRO 0.04 % gel, 0.1 % gel	3		AL
RETIN-A MICRO PUMP 0.04 % gel, 0.08 % gel, 0.1 % gel	3		AL
<i>salicylic acid 6 % foam, 6 % gel</i>	1		
<i>salicylic acid 6 % shampoo</i>	1		
<i>salicylic acid wart remover 27.5 % ext liq</i>	1		
<i>salicylic acid-cleanser 6 % cream ext kit</i>	1		
<i>salimez 6 % crm</i>	1		
SALVAX 6 % foam	3		
SALVAX DUO PLUS 6 & 35 % ext kit	3		
SANTYL 250 unit/gm oint	3		
SCALACORT DK 2 & 2-2 % ext kit	3		
SKYRIZI 150 mg/ml sc soln pfs, 180 mg/1.2ml sc soln cart, 360 mg/2.4ml sc soln cart, 600 mg/10ml iv soln	4		PA
SKYRIZI PEN 150 mg/ml sc soln auto-inj	4		PA
SOOLANTRA 1 % crm	3		
<i>sss 10-5 10-5 % foam</i>	1		AL
<i>sss 10-5 10-5 % crm</i>	1	PLEXION	AL
<i>sulfacetamide sodium-sulfur 10-5 % ext liq, 10-5 % ext susp, 10-5 % lot</i>	1		AL
<i>sulfacetamide sodium-sulfur 10-2 % ext liq</i>	1	AVAR LS CLEANSER	AL
<i>sulfacetamide sodium-sulfur 10-2 % crm</i>	1	AVAR-E LS	AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>sulfacetamide sodium-sulfur 10-5 % crm, 9.8-4.8 % crm, 9.8-4.8 % lot</i>	1	PLEXION	AL
<i>sulfacetamide sodium-sulfur 9.8-4.8 % ext liq</i>	1	PLEXION CLEANSER	AL
<i>sulfacetamide sodium-sulfur 9-4.5 % ext liq</i>	1	SUMADAN WASH	AL
<i>sulfacetamide sodium-sulfur 10-4 % pad</i>	1	SUMAXIN	AL
<i>sulfacetamide sodium-sulfur 8-4 % ext susp</i>	1	SUMAXIN TS	AL
<i>sulfacetamide sodium-sulfur 8-4 % ext susp</i>	1	SUMAXIN TS	AL
<i>sulfacetamide sodium-sulfur 9-4 % ext liq</i>	1	SUMAXIN WASH	AL
<i>sulfacetamide-sulfur in urea 10-5 % ext emul</i>	1	ROSULA CLEANSER	AL
SULFACLEANSE 8/4 8-4 % ext susp	3		AL
SUMADAN 9-4.5 % ext kit	3		
SUMADAN WASH 9-4.5 % ext liq	3		AL
SUMADAN XLT 9-4.5 % ext kit	3		
SUMAXIN 10-4 % pad	3		AL
SUMAXIN CP 10-4 % ext kit	3		
SYNALAR TS 0.01 % ext kit	3		
<i>tacrolimus 0.03 % oint, 0.1 % oint</i>	1	PROTOPIC	
TALTZ 80 mg/ml sc soln auto-inj, 80 mg/ml sc soln pfs	4		PA
<i>tazarotene 0.1 % foam</i>	1	FABIOR	
<i>tazarotene 0.05 % gel, 0.1 % crm, 0.1 % gel</i>	1	TAZORAC	
TAZORAC 0.05 % crm, 0.05 % gel, 0.1 % crm, 0.1 % gel	3		
TETRIX crm	3		
<i>tretinoin 0.05 % gel</i>	1	ATRALIN	AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>tretinoin 0.01 % gel, 0.025 % crm, 0.025 % gel, 0.05 % crm, 0.1 % crm</i>	1	RETIN-A	AL
<i>tretinoin microsphere 0.04 % gel, 0.1 % gel</i>	1	RETIN-A	AL
<i>tretinoin microsphere pump 0.04 % gel, 0.1 % gel</i>	1	RETIN-A	AL
UMECTA MOUSSE 40 % foam	3		
URAMAXIN 45 % gel	3		
<i>urea 39 % crm, 40 % crm, 45 % crm</i>	1		
<i>urea 40 % lot</i>	1	CARMOL 40	
<i>urea hydrating 35 % foam</i>	1		
<i>urea nail 45 % gel</i>	1		
<i>uremez-40 40 % crm</i>	1		
VANOXIDE-HC 5-0.5 % lot	3		
VECTICAL 3 mcg/gm oint	3		
VELTIN 1.2-0.025 % gel	3		
VEREGEN 15 % oint	3		
VIRASAL 27.5 % ext liq	3		
XERALUX crm	3		
ZACARE 4 & 0.2 % ext kit, 8 & 0.2 % ext kit	3		
<i>zaclir cleansing 8 % lot</i>	1		AL
ZENATANE 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap	3		
ZIANA 1.2-0.025 % gel	3		
ZITHRANOL 1 % shampoo	3		
ZONALON 5 % crm	3		
ZYCLARA 3.75 % crm	3		
ZYCLARA PUMP 2.5 % crm, 3.75 % crm	3		
DEVICES [DISPOSITIVOS]			
Medical/surgical Device [Dispositivos Médicos/Quirúrgicos]			
EUFLEXXA 20 mg/2ml i-artic soln pfs	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
GENVISC 850 25 mg/2.5ml i-artic soln pfs	5		PA
HYALGAN 20 mg/2ml i-artic soln, 20 mg/2ml i-artic soln pfs	5		PA
ORTHOVISC 30 mg/2ml i-artic soln pfs	5		PA
SUPARTZ FX 25 mg/2.5ml i-artic soln pfs	5		PA
SYNVISC 16 mg/2ml i-artic soln pfs	5		PA
SYNVISC ONE 48 mg/6ml i-artic soln pfs	5		PA
ELECTROLYTES/MINERALS/METALS/VITAMINS [ELECTROLITOS/MINERALES/METALES/VITAMINAS]			
Electrolyte/mineral Replacement - Vitamin, Mineral And Body Fluid Deficiency Drugs [Reemplazo De Electrolitos/Minerales - Medicamentos Para Deficiencia De Vitaminas, Minerales Y Fluidos Corporales]			
BPROTECTED PEDIA IRON 75 (15 Fe) mg/ml soln	1		AL
CARBAGLU 200 mg tab sol	3		
CENTRATEX 106-1 mg cap	3		
<i>cvs iron 325 (65 Fe) mg tab</i>	1		AL
<i>cytra k crystals 3300-1002 mg pckt</i>	1		
EFFER-K 25 meq tab eff	3		
<i>eql iron supplement therapy 325 mg tab</i>	1		AL
<i>fe tabs 325 (65 Fe) mg tab dr</i>	1		AL
FER-IN-SOL 75 (15 Fe) mg/ml soln	1		AL
<i>ferocon cap</i>	1		
FEROSUL 325 (65 Fe) mg tab	3		AL
<i>ferotrinsic cap</i>	1		
FERREX 150 FORTE PLUS 50-100 mg cap	3		
FERROCITE PLUS 106-1 mg tab	3		
<i>ferrous sulfate 325 (65 Fe) mg tab, 325 (65 Fe) mg tab dr</i>	1		AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>ferrous sulfate 220 (44 Fe) mg/5ml soln, 300 mg/6.8ml soln</i>	1		AL
<i>ferrous sulfate 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL
<i>fe-vite iron 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL
FOLIVANE-F 125-1 mg cap	3		
FOLIVANE-PLUS cap	3		
<i>foltrin cap</i>	1		
GOODSENSE IRON 325 mg tab	3		AL
<i>hematinic plus vit/minerals 106-1 mg tab</i>	1		
<i>hematinic/folic acid 324-1 mg tab</i>	1		
HEMOCYTE PLUS 106-1 mg cap	3		
IFEREX 150 FORTE 150-25-1 mg-mcg-mg cap	3		
INTEGRA F 125-1 mg cap	3		
INTEGRA PLUS cap	3		
<i>iron 325 (65 Fe) mg tab</i>	1		AL
<i>iron (ferrous sulfate) 325 (65 Fe) mg tab</i>	1		AL
<i>iron (ferrous sulfate) 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL
<i>iron high-potency 325 mg tab</i>	1		AL
<i>iron infant & toddler 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL
<i>iron infant/toddler 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL
<i>iron supplement 220 (44 Fe) mg/5ml soln</i>	1		AL
<i>iron supplement 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL
<i>iron supplement childrens 75 (15 Fe) mg/ml soln</i>	1	FER-IN-SOL	AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
KLOR-CON 20 meq pckt, 8 meq tab er	3		
KLOR-CON 10 10 meq tab er	3		
KLOR-CON M10 10 meq tab er	3		
KLOR-CON M15 15 meq tab er	3		
KLOR-CON M20 20 meq tab er	3		
KLOR-CON/EF 25 meq tab eff	3		
<i>kp ferrous sulfate 325 (65 Fe) mg tab</i>	1		AL
K-PHOS NO 2 305-700 mg tab	3		
K-PHOS-NEUTRAL 155-852-130 mg tab	3		
K-PRIME 25 meq tab eff	3		
K-TAB 10 meq tab er	3		
K-TAN PLUS 162-115.2-1 mg cap	3		
<i>meijer ferrous sulfate 325 (65 Fe) mg tab</i>	1		AL
MULTIGEN 70 mg tab	3		
MULTIGEN PLUS 50-101-1 mg tab	3		
<i>nat-rul iron 325 mg tab</i>	1		AL
ONE VITE FERROUS SULFATE 220 (44 Fe) mg/5ml soln	1		AL
ORACIT 490-640 mg/5ml soln	3		
<i>pc pediatric iron drops 15 mg/ml soln</i>	1	FER-IN-SOL	AL
PHOSPHA 250 NEUTRAL 155-852-130 mg tab	3		
PHOSPHO-TRIN 250 NEUTRAL 155-852-130 mg tab	3		
<i>poly-iron 150 forte 150-25-1 mg-mcg-mg cap</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>polysaccharide iron forte 150-25-1 mg-mcg-mg cap</i>	1		
<i>potassium chloride 20 meq pckt</i>	1		
<i>potassium chloride 20 MEQ/15ML (10%) soln, 40 MEQ/15ML (20%) soln</i>	1	K-SOL	
<i>potassium chloride crys er 10 meq tab er</i>	1		
<i>potassium chloride crys er 20 meq tab er</i>	1	KLOR-CON	
<i>potassium chloride er 10 meq tab er, 8 meq tab er</i>	1	KLOR-CON	
<i>potassium chloride er 10 meq cap er, 8 meq cap er</i>	1	MICRO-K	
<i>potassium citrate er 10 MEQ (1080 mg) tab er, 15 MEQ (1620 mg) tab er, 5 MEQ (540 mg) tab er</i>	1	UROKIT-K	
<i>potassium citrate-citric acid 1100-334 mg/5ml soln</i>	1		
PROTECTIRON 60-1 mg tab	3		
<i>purevit dualfe plus 162-115.2-1 mg cap</i>	1		
<i>qc ferrous sulfate 325 (65 Fe) mg tab</i>	1		AL
<i>ra iron 325 (65 Fe) mg tab</i>	1		AL
<i>se-tan plus 162-115.2-1 mg cap</i>	1		
<i>sm iron 325 (65 Fe) mg tab</i>	1		AL
<i>sod citrate-citric acid 500-334 mg/5ml soln</i>	1	SHOHL'S MODIFIED	
<i>sodium fluoride 0.55 (0.25 F) mg tab chew, 1.1 (0.5 F) mg tab chew</i>	1	LURIDE	AL
<i>sv iron 325 mg tab</i>	1		AL
TANDEM PLUS 162-115.2-1 mg cap	3		
TRICON cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
UROCIT-K 10 10 MEQ (1080 mg) tab er	3		
UROCIT-K 15 15 MEQ (1620 mg) tab er	3		
UROCIT-K 5 5 MEQ (540 mg) tab er	3		
Electrolyte/mineral/metal Modifiers [Modificadores De Electrolitos/Minerales/Metales]			
CHEMET 100 mg cap	3		
<i>deferasirox 125 mg tab sol, 250 mg tab sol, 500 mg tab sol</i>	4	EXJADE	PA
<i>deferiprone 500 mg tab</i>	4	FERRIPROX	PA
FERRIPROX 1000 mg tab	5		PA
FERRIPROX 100 mg/ml soln	5		PA
<i>sodium polystyrene sulfonate oral pwdr</i>	1	KAYEXALATE	
SPS 15 gm/60ml susp	3		
<i>tolvaptan 15 mg tab</i>	1	JYNARQUE	
<i>tolvaptan 30 mg tab</i>	1	SAMSCA	
Phosphate Binders - Phosphate-removing Agents [Enlazadores De Fosfato - Agentes Removedores De Fosfato]			
<i>calcium acetate (phos binder) 667 mg cap</i>	1	PHOSLO	
FOSRENOL 1000 mg pckt, 750 mg pckt	2		
<i>lanthanum carbonate 1000 mg tab chew, 500 mg tab chew, 750 mg tab chew</i>	1	FOSRENOL	
<i>sevelamer carbonate 0.8 gm pckt, 2.4 gm pckt, 800 mg tab</i>	1	REVELA	
<i>sevelamer hcl 800 mg tab</i>	1	RENAGEL	
Vitamins [Vitaminas]			
<i>50+ adult eye health cap</i>	3		
<i>actical cap</i>	3		
ACTIVNUTRIENTS cap	3		
ACTIVNUTRIENTS PERFORMANCE cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ACTIVNUTRIENTS W/O IRON cap	3		
<i>advanced eye health cap</i>	3		
AIRAVITE 2.5-25-1 mg tab	3		
ALIVE EVERYDAY IMMUNE HEALTH cap	3		
AMORYN MOOD BOOSTER cap	3		
<i>antioxidant cap</i>	3		
<i>antioxidant formula/minerals cap</i>	3		
APETIBEX cap	3		
APPE-CURB cap	3		
<i>ascorbic acid 500 mg/ml inj soln</i>	1		
ATABEX EC 29-1 mg tab dr	3		
<i>b complex-c-folic acid tab</i>	1		
BACMIN tab	3		
<i>bariatric multivitamins/iron cap</i>	3		
<i>b-complex balanced tab</i>	1		
<i>b-complex/vitamin c tab</i>	1		
<i>b-complex-c (w/folic acid) tab</i>	1		
BIO-35 GLUTEN-FREE cap	3		
BIO-35 IRON FREE cap	3		
<i>biocal cap</i>	3		
<i>biocel tab</i>	1		
<i>body/hair/skin/nails cap</i>	3		
BONEUP cap	3		
BONEUP 3 PER DAY cap	3		
<i>b-plex tab</i>	1		
<i>b-plex plus tab</i>	1		
CELEBRATE MULTI-COMplete 18 cap	3		
CELEBRATE MULTI-COMplete 36 cap	3		
CELEBRATE MULTI-COMplete 45 cap	3		
CELEBRATE MULTI-COMplete 60 cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CHOICEFUL MULTIVITAMIN cap	3		
<i>completenate 29-1 mg tab chew</i>	1		
CO-NATAL FA tab	3		
CONCEPT DHA 53.5-38-1 mg cap	3		
CONCEPT OB 130-92.4-1 mg cap	3		
<i>coral calcium plus cap</i>	3		
CORVITA tab	3		
<i>cvs adult 50+ eye health cap</i>	3		
<i>cvs eye health adult 50+ cap</i>	3		
<i>cvs folic acid 800 mcg tab</i>	1		
<i>cvs vision health cap</i>	3		
<i>cyanocobalamin 1000 mcg/ml inj soln</i>	1		PA
<i>daily multivitamin cap</i>	3		
<i>daily vitamin plus cap</i>	3		
DECUBI-VITE cap	3		
DEKAS PLUS cap	3		
DEKAS PLUS OCEAN cap	3		
DIALYVITE tab	3		
DIALYVITE 3000 3 mg tab	3		
DIALYVITE 5000 5 mg tab	3		
DIALYVITE SUPREME D tab	3		
DIALYVITE/ZINC tab	3		
DRISDOL 1.25 MG (50000 ut) cap	3		
DRY EYE FORMULA cap	3		
<i>eq vision formula 50+ cap</i>	3		
<i>eql super b complex/vitamin c tab</i>	1		
<i>ergocalciferol 1.25 MG (50000 ut) cap</i>	1	DRISDOL	
<i>eye health cap</i>	3		
EYE VITAMINS cap	3		
FA-8 0.8 mg cap	3		AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
FLORIVA PLUS 0.25 mg/ml soln	3		
<i>folate 400 mcg tab</i>	1		AL
<i>folbee 2.5-25-1 mg tab</i>	1		
<i>folbee plus tab</i>	1		
FOLBEE PLUS CZ 5 mg tab	3		
FOLGARD OS 500-1.1 mg tab	3		
<i>folic acid 1 mg tab, 800 mcg tab</i>	1		
<i>folic acid 5 mg/ml inj soln</i>	1		
<i>folic acid 400 mcg tab</i>	1		AL
<i>folic acid 0.8 mg cap</i>	3		AL
FOLIVANE-OB 85-1 mg cap	3		
<i>genadek step 1 cap</i>	3		
<i>genadek step 2 cap</i>	3		
<i>glucoten cap</i>	3		
<i>gnp folic acid 400 mcg tab</i>	1		AL
<i>gnp healthy eyes supervision 2 cap</i>	3		
<i>hair skin nails cap</i>	3		
<i>hair/skin/nails cap</i>	3		
<i>healthy eyes supervision 2 cap</i>	3		
<i>healthy eyes/lutein-zeaxanthin cap</i>	3		
<i>hm folic acid 400 mcg tab</i>	1		AL
<i>hydroxocobalamin acetate 1000 mcg/ml im soln</i>	1		
ICAPS cap	3		
ICAPS LUTEIN & OMEGA-3 cap	3		
IMMUNE ESSENTIALS DAILY cap	3		
INFUVITE ADULT iv inj	3		
INFUVITE PEDIATRIC iv soln	3		
<i>kp b complex-c tab</i>	1		
<i>kp folic acid 800 mcg tab</i>	1		
LYSIPLEX PLUS tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
MACULAR HEALTH FORMULA cap	3		
<i>mens 50+ advanced cap</i>	3		
<i>mens daily formula/lycopene cap</i>	3		
MOOD FOOD cap	3		
MOOD FOOD ES cap	3		
MULTI COMPLETE cap	3		
<i>multi for her cap</i>	3		
<i>multi for her 50+ cap</i>	3		
MULTI FOR HIM cap	3		
<i>multivitamin/fluoride 0.5 mg tab chew</i>	1		
<i>multivitamin/fluoride 0.25 mg/ml soln</i>	1		
<i>multi-vitamin/fluoride 0.25 mg/ml soln</i>	1		
<i>multivitamin/fluoride/iron 0.25-10 mg/ml soln</i>	1		
<i>multi-vitamin/fluoride/iron 0.25-10 mg/ml soln</i>	1		
MVW COMPLETE FORMULATION cap	3		
MVW COMPLETE FORMULATION D3000 cap	3		
MVW COMPLETE FORMULATION D5000 cap	3		
MVW COMPLETE FORMULATION MINIS cap	3		
MVW SOFTGEL MINIS cap	3		
MYNEPHRON 1 mg cap	3		
NATALVIT tab	3		
NEPHPLEX RX tab	3		
NEPHRONEX tab	3		
<i>neurin-sl 600-600 mcg tab subl</i>	1		
<i>niacin powdr</i>	1		
NICADAN tab	3		
NICAZEL tab	3		

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NICAZEL FORTE tab	3		
NIVA-PLUS 27-1 mg tab	3		
NUFOL 2.5-25-1 mg tab	3		
NUTRICAP tab	3		
NUTRIFAC ZX tab	3		
NUTRIVIT liq	3		
OBSTETRIX DHA 29-1 & 350 mg oral misc	3		
OBTREX DHA 29-1 & 350 mg oral misc	3		
OCUVEL cap	3		
OCUVITE ADULT 50+ cap	3		
OCUVITE ADULT FORMULA cap	3		
OCUVITE EYE HEALTH FORMULA cap	3		
OCUVITE-LUTEIN cap	3		
<i>one-daily multi caps cap</i>	3		
<i>phytonadione 1 mg/0.5ml inj soln</i>	1		
<i>phytonadione 5 mg tab</i>	1	MEPHYTON	
POLY-VI-FLOR 0.5 mg tab chew	3		
POLY-VI-FLOR/IRON 0.5-10 mg tab chew	3		
<i>prenatabs fa 29-1 mg tab</i>	1		
PRENATABS RX 29-1 mg tab	3		
<i>prenatal 27-1 mg tab</i>	1		
<i>prenatal 19 tab, tab chew, 29-1 mg tab, 29-1 mg tab chew</i>	1		
<i>prenatal plus 27-1 mg tab</i>	1		
PRENATAL-U 106.5-1 mg cap	3		
PRESERVISION AREDS cap	3		
PRESERVISION AREDS 2 cap	3		
PRESERVISION AREDS 2+MULTI VIT cap	3		
PRESERVISION/LUTEIN cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>prevent cap</i>	3		
PRORENAL + D W/ OMEGA-3 cap	3		
PROTECT CARDIO AF cap	3		
PROTECT PLUS SO cap	3		
PROTEGRA cap	3		
PROVIDA OB 20-20-1.25 mg cap	3		
<i>px b complex/vitamin c tab</i>	1		
<i>px folic acid 400 mcg tab</i>	1		AL
<i>pyridoxine hcl 100 mg/ml inj soln</i>	1		
<i>qc folic acid 800 mcg tab</i>	1		
QC OCUHEALTH VISION SUPPORT 2 cap	3		
QUFLORA PEDIATRIC 0.5 mg tab chew	3		
QUFLORA PEDIATRIC 0.25 mg/ml soln	3		
<i>ra folic acid 800 mcg tab</i>	1		
<i>ra folic acid 400 mcg tab</i>	1		AL
RENAL 1 mg cap	3		
RENATABS 1 mg tab	3		
RENATABS WITH IRON 1 & 100 mg oral misc	3		
<i>reno caps 1 mg cap</i>	1		
<i>se-natal 19 29-1 mg tab, 29-1 mg tab chew</i>	1		
SIDEROL tab	3		
<i>sm b super vitamin complex tab</i>	1		
<i>sm b-complex/vitamin c tab</i>	1		
<i>sm folic acid 400 mcg tab</i>	1		AL
SOFTGELS cap	3		
<i>stress formula (folic acid) tab</i>	1		
STROVITE FORTE syr	3		
STROVITE ONE tab	3		
<i>super antioxidant cap</i>	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>super antioxidants protector cap</i>	3		
<i>super b complex/fa/vit c tab</i>	1		
<i>super b-complex/vit c/fa tab</i>	1		
SUPERVITE liq	3		
<i>support liq</i>	1		
SUPPORT-500 cap	3		
SYSTANE ICAPS AREDS2 cap	3		
TARON-C DHA 35-1 mg cap	3		
THERAMILL FORTE cap	3		
THERANATAL LACTATION ONE cap	3		
<i>thrivite rx 29-1 mg tab</i>	1		
TRICARE tab	3		
<i>trinatal rx 1 60-1 mg tab</i>	1		
<i>triphrocaps 1 mg cap</i>	1		
UDAMIN SP tab	3		
<i>ultra multi formula/iron cap</i>	3		
<i>urosex tab</i>	1		
<i>v-c forte cap</i>	1		
VIC-FORTE cap	3		
VINATE II 29-1 mg tab	3		
VINATE ONE 60-1 mg tab	3		
<i>virt-caps 1 mg cap</i>	1		
<i>vision formula 2 cap</i>	3		
<i>vision health cap</i>	3		
<i>vision plus cap</i>	3		
VISTA ADVANCED AREDS2 FORMULA cap	3		
VISTA ADVANCED DRY EYE FORMULA cap	3		
VITA S FORTE tab	3		
<i>vitabex cap</i>	3		
<i>vitabex plus cap</i>	3		
VITACEL tab	3		
VITAL-D RX 1 mg tab	3		
<i>vita-min cap</i>	3		
<i>vitamin b complex 100 inj</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>vitamin b-complex 100 inj</i>	1		
<i>vitamin d (ergocalciferol) 1.25 MG (50000 ut) cap</i>	1	DRISDOL	
<i>vitamin k1 1 mg/0.5ml inj soln, 10 mg/ml inj soln</i>	1		
<i>vitamins acd-fluoride 0.25 mg/ml soln</i>	1		
VITAROCA PLUS tab	3		
VITEYES CLASSIC ADVANCED cap	3		
VITEYES CLASSIC MACULAR SUPPOR cap	3		
VITEYES CLASSIC+OMEGA-3 cap	3		
VITEYES COMPLETE cap	3		
<i>vp-vite rx 1 mg tab</i>	1		
<i>womens 50+ advanced cap</i>	3		
<i>womens multi cap</i>	3		
<i>yl folic acid 400 mcg tab</i>	1		AL
GASTROINTESTINAL AGENTS - DRUGS TO TREAT BOWEL, INTESTINE AND STOMACH CONDITIONS [AGENTES GASTROINTESTINALES - MEDICAMENTOS PARA TRATAR CONDICIONES INTESTINALES, INTESTINO Y ESTÓMAGO]			
Antispasmodics, Gastrointestinal - Stomach And Intestine Drugs [Antiespasmódicos, Gastrointestinales - Medicamentos Para Estómago E Intestino]			
ANASPAZ 0.125 mg tab disint	3		
ATROPEN 0.25 mg/0.3ml im soln auto-inj, 0.5 mg/0.7ml im soln auto-inj, 1 mg/0.7ml im soln auto-inj, 2 mg/0.7ml im soln auto-inj	3		
BENTYL 10 mg/ml im soln	3		
<i>chlordiazepoxide-clidinium 5-2.5 mg cap</i>	1	LIBRAX	
CUVPOSA 1 mg/5ml soln	3		
<i>dicyclomine hcl 10 mg/5ml soln, 10 mg/ml im soln</i>	1	BENTYL	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>dicyclomine hcl 10 mg cap, 20 mg tab</i>	1	BENTYL	QL(90 / 365)
<i>glycopyrrolate 0.2 mg/ml inj soln, 0.4 mg/2ml inj soln, 1 mg/5ml inj soln</i>	1		
<i>glycopyrrolate 1 mg/5ml soln</i>	1	CUVPOSA	
<i>glycopyrrolate 4 mg/20ml inj soln</i>	1	ROBINUL	
<i>glycopyrrolate 1 mg tab, 2 mg tab</i>	1	ROBINUL	QL(90 / 365)
<i>hyoscyamine sulfate 0.125 mg/5ml oral elix, 0.125 mg/ml soln, 0.5 mg/ml inj soln</i>	1		
<i>hyoscyamine sulfate 0.125 mg tab disint</i>	1	ANASPAZ	
<i>hyoscyamine sulfate 0.125 mg tab</i>	1	LEVSIN	
<i>hyoscyamine sulfate 0.125 mg tab subl</i>	1	LEVSIN/SL	
<i>hyoscyamine sulfate er 0.375 mg tab er 12 hr</i>	1	LEVBID	
<i>hyoscyamine sulfate sl 0.125 mg tab subl</i>	1	LEVSIN/SL	
<i>hyosyne 0.125 mg/5ml oral elix, 0.125 mg/ml soln</i>	1		
LEVBID 0.375 mg tab er 12 hr	3		
LIBRAX 5-2.5 mg cap	3		
<i>methscopolamine bromide 2.5 mg tab, 5 mg tab</i>	1	PAMINE	QL(90 / 365)
NULEV 0.125 mg tab disint	3		
<i>oscimin 0.125 mg tab</i>	1	LEVSIN	
<i>oscimin 0.125 mg tab subl</i>	1	LEVSIN/SL	
ROBINUL 1 mg tab	3		QL(90 / 365)
ROBINUL-FORTE 2 mg tab	3		QL(90 / 365)
Gastrointestinal Agents, Other - Miscellaneous Gastrointestinal Drugs [Agentes Gastrointestinales, Otros - Medicamentos Gastrointestinales Misceláneos]			
<i>alvimopan 12 mg cap</i>	1	ENTEREG	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>amoxicill-clarithro-lansopraz 500 & 500 & 30 mg pack</i>	1		QL(90 / 365)
<i>bismuth/metronidaz/tetracyclin 140-125-125 mg cap</i>	1		
CHENODAL 250 mg tab	3		
<i>cromolyn sodium 100 mg/5ml oral conc</i>	1	GASTROCROM	
<i>diphenoxylate-atropine 2.5-0.025 mg tab</i>	1	LOMOTIL	
<i>diphenoxylate-atropine 2.5-0.025 mg/5ml liq</i>	1	LOMOTIL	
GASTROCROM 100 mg/5ml oral conc	3		
LOMOTIL 2.5-0.025 mg tab	3		
<i>loperamide hcl 2 mg cap</i>	1	IMODIUM	
<i>metoclopramide hcl 5 mg tab disint</i>	1	METOSOLV	QL(90 / 365)
<i>metoclopramide hcl 10 mg tab, 5 mg tab</i>	1	REGLAN	QL(90 / 365)
<i>metoclopramide hcl 10 mg/10ml soln, 5 mg/5ml soln, 5 mg/ml inj soln</i>	1	REGLAN	QL(90 / 365)
MOTOFEN 1-0.025 mg tab	3		
MOVANTIK 12.5 mg tab, 25 mg tab	4		PA
MYTESI 125 mg tab dr	3		
OMECLAMOX-PAK 500-500-20 mg oral misc	3		
PYLERA 140-125-125 mg cap	3		
REGLAN 10 mg tab, 5 mg tab	3		QL(90 / 365)
RELISTOR 12 mg/0.6ml sc soln, 8 mg/0.4ml sc soln	3		
URSO 250 250 mg tab	3		
URSO FORTE 500 mg tab	3		
<i>ursodiol 300 mg cap</i>	1	ACTIGALL	
<i>ursodiol 250 mg tab, 500 mg tab</i>	1	URSO	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Histamine2 (h2) Receptor Antagonists - Ulcer And Stomach Acid Drugs [Antagonistas Del Receptor De Histamina2 (H2) - Medicamentos Para Úlceras Y Ácido Estomacal]			
<i>cimetidine 300 mg tab, 400 mg tab, 800 mg tab</i>	1	TAGAMET	QL(90 / 365)
<i>famotidine 40 mg/5ml susp</i>	1	PEPCID	
<i>famotidine 20 mg tab, 40 mg tab</i>	1	PEPCID	QL(90 / 365)
<i>nizatidine 150 mg cap, 300 mg cap</i>	1	AXID	QL(90 / 365)
PEPCID 20 mg tab, 40 mg tab	3		QL(90 / 365)
Irritable Bowel Syndrome Agents - Bowel Treatment Drugs [Agentes Para El Síndrome Del Colon Irritable - Medicamentos Para Tratamiento Del Intestino]			
<i>alosetron hcl 0.5 mg tab, 1 mg tab</i>	1	LOTROXEX	
AMITIZA 24 mcg cap, 8 mcg cap	2		PA
LINZESS 145 mcg cap, 290 mcg cap, 72 mcg cap	3		PA
LOTROXEX 0.5 mg tab, 1 mg tab	2		
<i>lubiprostone 24 mcg cap, 8 mcg cap</i>	1	AMITIZA	PA
Laxatives - Drugs To Treat Constipation [Laxantes - Medicamentos Para Tratar El Estreñimiento]			
CLENPIQ 10-3.5-12 MG-GM - gm/160ml soln, 10-3.5-12 MG-GM -gm/175ml soln	3		
<i>constulose 10 gm/15ml soln</i>	1	CONSTULOSE	
<i>enulose 10 gm/15ml soln</i>	1	CONSTULOSE	
GAVILYTE-C 240 gm soln	3		
GAVILYTE-G 236 gm soln	3		
<i>generlac 10 gm/15ml soln</i>	1	CONSTULOSE	
GOLYTELY 236 gm soln	3		
<i>lactulose 10 gm/15ml soln, 20 gm/30ml soln</i>	1	CONSTULOSE	
<i>lactulose 10 gm pckt</i>	1	KRISTALOSE	
<i>lactulose encephalopathy 10 gm/15ml soln</i>	1	CONSTULOSE	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
OSMOPREP 1.102-0.398 gm tab	3		
<i>peg 3350-kcl-na bicarb-nacl 420 gm soln</i>	1	NULYTELY	
<i>peg-3350/electrolytes 236 gm soln</i>	1	GOLYTELY	
<i>peg-3350/electrolytes/ascorbat 100 gm soln</i>	1	MOVIPREP	
<i>peg-kcl-nacl-nasulf-na asc-c 100 gm soln</i>	1	MOVIPREP	
PEG-PREP 5-210 mg-gm oral kit	3		
SUPREP BOWEL PREP KIT 17.5-3.13-1.6 gm/177ml soln	3		
Protectants - Ulcer And Stomach Acid Drugs [Protectores - Medicamentos Para Úlceras Y Ácido Estomacal]			
CARAFATE 1 gm/10ml susp	3		
CARAFATE 1 gm tab	3		QL(90 / 365)
CYTOTEC 100 mcg tab, 200 mcg tab	3		QL(90 / 365)
<i>misoprostol 100 mcg tab, 200 mcg tab</i>	1	CYTOTEC	QL(90 / 365)
<i>sucralfate 1 gm/10ml susp</i>	1	CARAFATE	
<i>sucralfate 1 gm tab</i>	1	CARAFATE	QL(90 / 365)
Proton Pump Inhibitors - Ulcer And Stomach Acid Drugs [Inhibidores De La Bomba De Protones - Medicamentos Para Úlceras Y Ácido Estomacal]			
ACIPHEX 20 mg tab dr	3		
DEXILANT 30 mg cap dr, 60 mg cap dr	2		
<i>dexlansoprazole 30 mg cap dr</i>	1		
<i>dexlansoprazole 60 mg cap dr</i>	1	DEXILANT	
<i>esomeprazole magnesium 10 mg pckt, 20 mg cap dr, 20 mg pckt, 40 mg cap dr, 40 mg pckt</i>	1	NEXIUM	QL(90 / 365)
FIRST-LANSOPRAZOLE 3 mg/ml susp	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>lansoprazole 15 mg cap dr, 30 mg cap dr</i>	1	PREVACID	QL(90 / 365)
<i>lansoprazole 15 mg Oral Tablet Delayed Release Disintegrating, 30 mg Oral Tablet Delayed Release Disintegrating</i>	1	PREVACID SOLUTAB	
<i>omeprazole 10 mg cap dr, 20 mg cap dr, 40 mg cap dr</i>	1	PRILOSEC	QL(90 / 365)
OMEPRAZOLE+SYRSPEND SF ALKA 2 mg/ml susp	3		
<i>omeprazole-sodium bicarbonate 20-1680 mg pckt, 40-1680 mg pckt</i>	1	ZEGERID	
<i>omeprazole-sodium bicarbonate 20-1100 mg cap, 40-1100 mg cap</i>	1	ZEGERID	QL(90 / 365)
<i>pantoprazole sodium 40 mg pckt</i>	1	PROTONIX	
<i>pantoprazole sodium 20 mg tab dr, 40 mg tab dr</i>	1	PROTONIX	QL(90 / 365)
PREVACID 30 mg cap dr	3		QL(90 / 365)
PREVACID SOLUTAB 15 mg Oral Tablet Delayed Release Disintegrating, 30 mg Oral Tablet Delayed Release Disintegrating	3		
PRILOSEC 10 mg pckt, 2.5 mg pckt	3		
<i>rabeprazole sodium 20 mg tab dr</i>	1	ACIPHEX	
ZEGERID 20-1100 mg cap, 20-1680 mg pckt, 40-1100 mg cap, 40-1680 mg pckt	3		QL(90 / 365)
GENETIC OR ENZYME DISORDER: REPLACEMENT, MODIFIERS, TREATMENT [TRASTORNOS GENÉTICO O ENZIMÁTICO: REEMPLAZO, MODIFICADORES, TRATAMIENTO]			
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment [Trastornos Genético O Enzimático: Reemplazo, Modificadores, Tratamiento]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ALDURAZYME 2.9 mg/5ml iv soln	5		PA
CREON 12000-38000 unit cap dr prt, 24000-76000 unit cap dr prt, 3000-9500 unit cap dr prt, 36000-114000 unit cap dr prt, 6000-19000 unit cap dr prt	2		
CYSTADANE oral pwdr	5		PA
CYSTAGON 150 mg cap, 50 mg cap	3		
ELELYSO 200 unit iv soln	5		PA
<i>miglustat 100 mg cap</i>	4	ZAVESCA	PA
NAGLAZYME 1 mg/ml iv soln	5		PA
<i>nitisinone 10 mg cap, 2 mg cap, 5 mg cap</i>	4	ORFADIN	PA
<i>sapropterin dihydrochloride 100 mg tab</i>	4	KUVAN	PA
SUCRAID 8500 unit/ml soln	5		PA
VPRIV 400 unit iv soln	5		PA
ZENPEP 10000-32000 unit cap dr prt, 15000-47000 unit cap dr prt, 3000-10000 unit cap dr prt	3		
GENETIC OR ENZYME OR PROTEIN DISORDER: REPLACEMENT, MODIFIERS, TREATMENT [TRASTORNOS GENÉTICO O ENZIMÁTICO: REEMPLAZO, MODIFICADORES, TRATAMIENTO]			
Genetic Or Enzyme Or Protein Disorder: Replacement, Modifiers, Treatment [Trastornos Genético O Enzimático: Reemplazo, Modificadores, Tratamiento]			
PANCREAZE 10500-35500 unit cap dr prt, 16800-56800 unit cap dr prt, 21000-54700 unit cap dr prt, 4200-14200 unit cap dr prt	3		
PERTZYE 16000-57500 unit cap dr prt, 8000-28750 unit cap dr prt	3		
VIOKACE 10440-39150 unit tab, 20880-78300 unit tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ZENPEP 20000-63000 unit cap dr prt, 25000-79000 unit cap dr prt, 40000-126000 unit cap dr prt, 5000-24000 unit cap dr prt	3		
GENITOURINARY AGENTS - DRUGS TO TREAT BLADDER, GENITAL AND KIDNEY CONDITIONS [AGENTES GENITOURINARIOS - MEDICAMENTOS PARA TRATAR CONDICIONES DE LA VEJIGA, GENITALES Y RENALES]			
Antispasmodics, Urinary - Bladder Control Drugs [Antiespasmódicos, Urinarios - Medicamentos Para Control De La Vejiga]			
<i>darifenacin hydrobromide er 15 mg tab er 24 hr, 7.5 mg tab er 24 hr</i>	1	ENABLEX	
DETROL 1 mg tab, 2 mg tab	3		
DETROL LA 2 mg cap er 24 hr, 4 mg cap er 24 hr	3		
DITROPAN XL 5 mg tab er 24 hr	3		
<i>flavoxate hcl 100 mg tab</i>	1		
GELNIQUE 10 % td gel	3		
MYRBETRIQ 25 mg tab er 24 hr, 50 mg tab er 24 hr	3		
<i>oxybutynin chloride 5 mg tab</i>	1	DITROPAN	
<i>oxybutynin chloride 5 mg/5ml soln</i>	1	DITROPAN	
<i>oxybutynin chloride er 10 mg tab er 24 hr, 15 mg tab er 24 hr, 5 mg tab er 24 hr</i>	1	DITROPAN	
OXYTROL 3.9 mg/24hr tdbiw patch	3		
<i>solifenacin succinate 10 mg tab, 5 mg tab</i>	1	VESICARE	
<i>tolterodine tartrate 1 mg tab, 2 mg tab</i>	1	DETROL	
<i>tolterodine tartrate er 2 mg cap er 24 hr, 4 mg cap er 24 hr</i>	1	DETROL LA	
TOVIAZ 4 mg tab er 24 hr, 8 mg tab er 24 hr	2		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>tropium chloride 20 mg tab</i>	1	SANCTURA	
<i>tropium chloride er 60 mg cap er 24 hr</i>	1	SANCTURA XR	
VESICARE 10 mg tab, 5 mg tab	3		
Benign Prostatic Hypertrophy Agents - Prostate Drugs [Agentes Para La Hipertrofia Prostática Benigna - Medicamentos Para Próstata]			
<i>alfuzosin hcl er 10 mg tab er 24 hr</i>	1	UROXATRAL	
AVODART 0.5 mg cap	3		
CARDURA 1 mg tab, 2 mg tab, 4 mg tab, 8 mg tab	3		
CARDURA XL 4 mg tab er 24 hr, 8 mg tab er 24 hr	3		
CIALIS 2.5 mg tab, 5 mg tab	3		QL(6 / 30)
<i>doxazosin mesylate 1 mg tab, 2 mg tab, 4 mg tab, 8 mg tab</i>	1	CARDURA	
<i>dutasteride 0.5 mg cap</i>	1	AVODART	
<i>dutasteride-tamsulosin hcl 0.5-0.4 mg cap</i>	1	JALYN	
<i>finasteride 5 mg tab</i>	1	PROSCAR	
FLOMAX 0.4 mg cap	3		
JALYN 0.5-0.4 mg cap	3		
PROSCAR 5 mg tab	3		
<i>silodosin 4 mg cap, 8 mg cap</i>	1	RAPAFLO	
<i>tadalafil 2.5 mg tab, 5 mg tab</i>	1	CIALIS	QL(6 / 30)
<i>tamsulosin hcl 0.4 mg cap</i>	1	FLOMAX	
<i>terazosin hcl 1 mg cap, 10 mg cap, 2 mg cap, 5 mg cap</i>	1	HYTRIN	
UROXATRAL 10 mg tab er 24 hr	3		
Genitourinary Agents, Other - Miscellaneous Bladder, Genital, And Kidney Conditions Drugs [Agentes Genitourinarios, Otros - Medicamentos Para Condiciones De La Vejiga, Genitales Y Renales Misceláneos]			
<i>bethanechol chloride 10 mg tab, 25 mg tab, 5 mg tab, 50 mg tab</i>	1	URECHOLINE	
CIALIS 10 mg tab, 20 mg tab	3		QL(6 / 30)
ELMIRON 100 mg cap	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
HYOPHEN 81.6 mg tab	3		
LITHOSTAT 250 mg tab	3		
<i>me/naphos/mb/hyo1 81.6 mg tab</i>	1		
PHENAZO 200 mg tab	3		
<i>phenazopyridine hcl 100 mg tab, 200 mg tab</i>	1	PYRIDIUM	
PHOSPHASAL 81.6 mg tab	3		
PYRIDIUM 100 mg tab, 200 mg tab	3		
RIMSO-50 50 % i-vesic soln	3		
<i>sildenafil citrate 100 mg tab, 25 mg tab, 50 mg tab</i>	1	VIAGRA	QL(6 / 30)
STENDRA 100 mg tab, 200 mg tab, 50 mg tab	3		QL(6 / 30)
<i>tadalafil 10 mg tab, 20 mg tab</i>	1	CIALIS	QL(6 / 30)
THIOLA 100 mg tab	3		
<i>tiopronin 100 mg tab</i>	1	THIOLA	
URELLE 81 mg tab	3		
URETRON D/S 81.6 mg tab	3		
URIBEL 118 mg cap	3		
URIMAR-T 120 mg tab	3		
<i>urin ds 81.6 mg tab</i>	1		
<i>uro-458 81 mg tab</i>	1		
<i>uro-mp 118 mg cap</i>	1		
USTELL 120 mg cap	3		
UTIRA-C 81.6 mg tab	3		
<i>vardenafl hcl 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab</i>	1	LEVITRA	QL(6 / 30)
<i>vardenafl hcl 10 mg tab disint</i>	1	STAXYN	QL(6 / 30)
VIAGRA 100 mg tab, 25 mg tab, 50 mg tab	3		QL(6 / 30)
VILAMIT MB 118 mg cap	3		
VILEVEV MB 81 mg tab	3		
Phosphate Binders - Phosphate-removing Agents [Enlazadores De Fosfato - Agentes Removedores De Fosfato]			
<i>calcium acetate (phos binder) 667 mg tab</i>	1	ELIPHOS	
CALPHRON 667 mg tab	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
PHOSLYRA 667 mg/5ml soln	3		
sevelamer hcl 400 mg tab	1	RENAGEL	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL) - DRUGS TO REGULATE HORMONES [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (ADRENALES) - MEDICAMENTOS PARA REGULAR LAS HORMONAS]			
Glucocorticoids / Mineralocorticoids [Glucocorticoides / Mineralocorticoides]			
amcinonide 0.1 % oint	1	CYCLOCORT	
amcinonide 0.1 % lot	1	CYCLOCORT	
clobetasol propionate emulsion 0.05 % foam	1	OLUX-E	
CORDRAN 4 mcg/sqcm tape	3		
desonide 0.05 % gel	1	DESONATE	
dexamethasone 1.5 mg (21) tab pack, 1.5 mg (35) tab pack	1		
dexamethasone 1.5 mg (51) tab pack	1	DEXPAK 13 DAY	
dexamethasone sod phosphate pf 10 mg/ml inj soln	1		
dexamethasone sodium phosphate 100 mg/10ml inj soln, 120 mg/30ml inj soln	1		
KENALOG 0.147 mg/gm ext aer soln	3		
NUCORT 2 % lot	3		
OLUX-E 0.05 % foam	3		
ORAPRED ODT 10 mg tab disint, 15 mg tab disint, 30 mg tab disint	3		
prednisolone sodium phosphate 10 mg/5ml soln	1	MILLIPRED	
prednisolone sodium phosphate 10 mg tab disint, 15 mg tab disint, 30 mg tab disint	1	ORAPRED	
prednisolone sodium phosphate 20 mg/5ml soln	1	VERIPRED	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
RAYOS 1 mg tab dr, 2 mg tab dr, 5 mg tab dr	3		
<i>triamcinolone acetonide 0.147 mg/gm ext aer soln</i>	1	KENALOG	
VERDESO 0.05 % foam	3		
Hormonal Agents, Stimulant/replacement/modifying (adrenal) - Hormone Replacement/modifying Drugs [Agentes Hormonales, Estimulantes/Reemplazo/Modificador (Adrenales) - Medicamentos Para Reemplazo/Modificación De Hormonas]			
ALA SCALP 2 % lot	3		
<i>ala-cort 1 % crm</i>	1	ALA-CORT	
<i>alclometasone dipropionate 0.05 % crm, 0.05 % oint</i>	1	ACLOVATE	
APEXICON E 0.05 % crm	3		
<i>betamethasone dipropionate 0.05 % crm, 0.05 % oint</i>	1	DIPROSONE	
<i>betamethasone dipropionate 0.05 % lot</i>	1	DIPROSONE	
<i>betamethasone dipropionate aug 0.05 % crm, 0.05 % gel, 0.05 % oint</i>	1	DIPROLENE	
<i>betamethasone dipropionate aug 0.05 % lot</i>	1	DIPROLENE	
<i>betamethasone sod phos & acet 6 (3-3) mg/ml inj susp</i>	1	CELESTONE SOLUSPAN	
<i>betamethasone valerate 0.1 % crm, 0.1 % oint</i>	1	BETA-VAL	
<i>betamethasone valerate 0.1 % lot</i>	1	BETA-VAL	
<i>betamethasone valerate 0.12 % foam</i>	1	LUXIQ	
CAPEX 0.01 % shampoo	3		
CELESTONE SOLUSPAN 6 (3-3) mg/ml inj susp	3		
<i>clobetasol prop emollient base 0.05 % crm</i>	1	TEMOVATE-E	
<i>clobetasol propionate 0.05 % ext liq, 0.05 % lot, 0.05 % shampoo</i>	1	CLOBEX	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>clobetasol propionate 0.05 % foam</i>	1	OLUX	
<i>clobetasol propionate 0.05 % gel, 0.05 % oint</i>	1	TEMOVATE	
<i>clobetasol propionate 0.05 % ext soln</i>	1	TEMOVATE	
<i>clobetasol propionate 0.05 % crm</i>	1	TEMOVATE-E	
<i>clobetasol propionate e 0.05 % crm</i>	1	TEMOVATE-E	
CLOBEX 0.05 % lot, 0.05 % shampoo	3		
CLOBEX SPRAY 0.05 % ext liq	3		
<i>clocortolone pivalate 0.1 % crm</i>	1	CLODERM	
CLODAN 0.05 % shampoo	3		
CLODERM 0.1 % crm	3		
CORTEF 10 mg tab, 20 mg tab, 5 mg tab	3		
<i>cortisone acetate 25 mg tab</i>	1	CORTONE	
DEPO-MEDROL 20 mg/ml inj susp, 40 mg/ml inj susp, 80 mg/ml inj susp	3		
DERMA-SMOOTH/FS BODY 0.01 % ext oil	3		
DERMA-SMOOTH/FS SCALP 0.01 % ext oil	3		
<i>desonide 0.05 % crm, 0.05 % oint</i>	1	DESOWEN	
<i>desonide 0.05 % lot</i>	1	DESOWEN	
DESOWEN 0.05 % crm	3		
<i>desoximetasone 0.05 % crm, 0.05 % gel, 0.05 % oint, 0.25 % crm, 0.25 % oint</i>	1	TOPICORT	
<i>dexamethasone 1 mg tab, 2 mg tab</i>	1		
<i>dexamethasone 0.5 mg/5ml soln</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>dexamethasone 0.5 mg/5ml oral elix</i>	1	BAYCADRON	
<i>dexamethasone 0.5 mg tab, 0.75 mg tab, 1.5 mg tab, 4 mg tab, 6 mg tab</i>	1	DECADRON	
DEXAMETHASONE INTENSOL 1 mg/ml oral conc	3		
<i>dexamethasone sodium phosphate 20 mg/5ml inj soln, 4 mg/ml inj soln</i>	1		
<i>dexamethasone sodium phosphate 10 mg/ml inj soln</i>	1	HEXADROL	
<i>diflorasone diacetate 0.05 % crm, 0.05 % oint</i>	1	PSORCON	
DIPROLENE 0.05 % oint	3		
<i>fludrocortisone acetate 0.1 mg tab</i>	1	FLORINEF	
<i>fluocinolone acetonide 0.01 % crm, 0.025 % crm, 0.025 % oint</i>	1	SYNALAR	
<i>fluocinolone acetonide 0.01 % ext soln</i>	1	SYNALAR	
<i>fluocinolone acetonide body 0.01 % ext oil</i>	1	DERMA-SMOOTHIE/FS	
<i>fluocinolone acetonide scalp 0.01 % ext oil</i>	1	DERMA-SMOOTHIE/FS	
<i>fluocinonide 0.05 % crm, 0.05 % gel, 0.05 % oint</i>	1	LIDEX	
<i>fluocinonide 0.05 % ext soln</i>	1	LIDEX	
<i>fluocinonide 0.1 % crm</i>	1	VANOS	
<i>fluocinonide emulsified base 0.05 % crm</i>	1	LIDEX-E	
<i>flurandrenolide 0.05 % crm</i>	1	CORDRAN	
<i>flurandrenolide 0.05 % lot</i>	1	CORDRAN	
<i>fluticasone propionate 0.005 % oint, 0.05 % crm</i>	1	CUTIVATE	
<i>fluticasone propionate 0.05 % lot</i>	1	CUTIVATE	
<i>halcinonide 0.1 % crm</i>	1	HALOG	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>halobetasol propionate 0.05 % crm, 0.05 % oint</i>	1	ULTRAVATE	
<i>hydrocortisone 1 % crm</i>	1	ALA-CORT	
<i>hydrocortisone 10 mg tab, 20 mg tab, 5 mg tab</i>	1	CORTEF	
<i>hydrocortisone 1 % oint, 2.5 % crm, 2.5 % oint</i>	1	HYTONE	
<i>hydrocortisone 2.5 % lot</i>	1	HYTONE	
<i>hydrocortisone butyr lipo base 0.1 % crm</i>	1	LOCOID LIPOCREAM	
<i>hydrocortisone butyrate 0.1 % crm, 0.1 % oint</i>	1	LOCOID	
<i>hydrocortisone butyrate 0.1 % ext soln, 0.1 % lot</i>	1	LOCOID	
<i>hydrocortisone valerate 0.2 % crm, 0.2 % oint</i>	1	WESTCORT	
KENALOG 10 mg/ml inj susp, 40 mg/ml inj susp	3		
LUXIQ 0.12 % foam	3		
MEDROL 16 mg tab, 2 mg tab, 4 mg tab, 4 mg tab pack, 8 mg tab	3		
<i>methylprednisolone 16 mg tab, 32 mg tab, 4 mg tab, 4 mg tab pack, 8 mg tab</i>	1	MEDROL	
<i>methylprednisolone acetate 40 mg/ml inj susp, 80 mg/ml inj susp</i>	1	DEPO-MEDROL	
<i>methylprednisolone sodium succ 1000 mg inj soln, 125 mg inj soln, 40 mg inj soln, 500 mg inj soln</i>	1	SOLU-MEDROL	
MILLIPRED 5 mg tab	3		
<i>mometasone furoate 0.1 % crm, 0.1 % oint</i>	1	ELOCON	
<i>mometasone furoate 0.1 % ext soln</i>	1	ELOCON	
PANDEL 0.1 % crm	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
PEDIAPRED 6.7 (5 Base) mg/5ml soln	3		
<i>prednisolone 15 mg/5ml soln</i>	1	PRELONE	
<i>prednisolone sodium phosphate 25 mg/5ml soln</i>	1		
<i>prednisolone sodium phosphate 15 mg/5ml soln</i>	1	ORAPRED	
<i>prednisolone sodium phosphate 6.7 (5 Base) mg/5ml soln</i>	1	PEDIAPRED	
<i>prednisone 1 mg tab, 10 mg (21) tab pack, 10 mg (48) tab pack, 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg (21) tab pack, 5 mg (48) tab pack, 5 mg tab, 50 mg tab</i>	1		
<i>prednisone 5 mg/5ml soln</i>	1		
PREDNISONO INTENSOL 5 mg/ml oral conc	3		
SOLU-CORTEF 100 mg inj soln, 1000 mg inj soln, 250 mg inj soln, 500 mg inj soln	3		
SOLU-MEDROL 1000 mg inj soln, 2 gm inj soln, 500 mg inj soln	3		
SOLU-MEDROL (PF) 1000 mg inj soln, 125 mg inj soln, 40 mg inj soln, 500 mg inj soln	3		
SYNALAR 0.01 % ext soln	3		
TEXACORT 2.5 % ext soln	3		
TOPICORT 0.05 % crm, 0.05 % gel, 0.05 % oint, 0.25 % crm, 0.25 % oint	3		
<i>triamcinolone acetonide 0.025 % oint, 0.1 % oint, 0.5 % oint</i>	1	KENALOG	
<i>triamcinolone acetonide 0.025 % lot, 0.1 % lot, 40 mg/ml inj susp</i>	1	KENALOG	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>triamcinolone acetonide 0.025 % crm, 0.1 % crm, 0.5 % crm</i>	1	TRIDERM	
<i>triamcinolone in absorbbase 0.05 % oint</i>	1	TRIANEX	
TRIANEX 0.05 % oint	3		
TRIDESILON 0.05 % crm	3		
VANOS 0.1 % crm	3		
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY) [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (PITUITARIA)]			
Hormonal Agents, Stimulant/replacement/modifying (pituitary) [Agentes Hormonales, Estimulantes/Reemplazo/Modificador (Pituitaria)]			
DDAVP PF 4 mcg/ml inj soln	5		PA
<i>desmopressin acetate pf 4 mcg/ml inj soln</i>	1	DDAVP	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY) - DRUGS TO REGULATE HORMONES [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (PITUITARIA) - MEDICAMENTOS PARA REGULAR LAS HORMONAS]			
Hormonal Agents, Stimulant/replacement/modifying (pituitary) - Hormone Replacement/modifying Drugs [Agentes Hormonales, Estimulantes/Reemplazo/Modificador (Pituitaria) - Medicamentos Para Reemplazo/Modificación De Hormonas]			
CORTROPHIN 80 unit/ml inj gel	4		PA
DDAVP 0.1 mg tab, 0.2 mg tab	3		
DDAVP 4 mcg/ml inj soln	5		PA
<i>desmopressin ace spray refrig 0.01 % nasal soln</i>	1	MINIRIN	
<i>desmopressin acetate 0.1 mg tab, 0.2 mg tab</i>	1	DDAVP	
<i>desmopressin acetate 4 mcg/ml inj soln</i>	1	DDAVP	
<i>desmopressin acetate spray 0.01 % nasal soln</i>	1	DDAVP	
GENOTROPIN 12 mg sc cart, 5 mg sc cart	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
GENOTROPIN MINIQUICK 0.2 mg Subcutaneous Prefilled Syringe, 0.4 mg Subcutaneous Prefilled Syringe, 0.6 mg Subcutaneous Prefilled Syringe, 0.8 mg Subcutaneous Prefilled Syringe, 1 mg Subcutaneous Prefilled Syringe, 1.2 mg Subcutaneous Prefilled Syringe, 1.4 mg Subcutaneous Prefilled Syringe, 1.6 mg Subcutaneous Prefilled Syringe, 1.8 mg Subcutaneous Prefilled Syringe, 2 mg Subcutaneous Prefilled Syringe	4		PA
INCRELEX 40 mg/4ml sc soln	5		PA
SANDOSTATIN LAR DEPOT 10 mg im kit, 20 mg im kit, 30 mg im kit	5		PA
SIGNIFOR 0.3 mg/ml sc soln, 0.6 mg/ml sc soln, 0.9 mg/ml sc soln	5		PA
SIGNIFOR LAR 20 mg Intramuscular Suspension Reconstituted ER, 40 mg Intramuscular Suspension Reconstituted ER, 60 mg Intramuscular Suspension Reconstituted ER	5		PA
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PROSTAGLANDINS) - DRUGS TO REGULATE HORMONES [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (PROSTAGLANDINAS) - MEDICAMENTOS PARA REGULAR LAS HORMONAS]			
Hormonal Agents, Stimulant/replacement/modifying (prostaglandins) - Hormone Replacement/modifying Drugs [Agentes Hormonales,			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Estimulantes/Reemplazo/Modificador (Prostaglandinas) - Medicamentos Para Reemplazo/Modificación De Hormonas]			
KORLYM 300 mg tab	3		
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS) [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (HORMONAS SEXUALES/MODIFICADORES)]			
Progestins [Progestinas]			
<i>progesterone 100 mg cap, 200 mg cap</i>	1	PROMETRIUM	PA
PROMETRIUM 100 mg cap, 200 mg cap	3		PA
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS) - DRUGS TO REGULATE HORMONES [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (HORMONAS SEXUALES/MODIFICADORES) - MEDICAMENTOS PARA REGULAR LAS HORMONAS]			
Estrogens - Hormone Replacement/modifying Drugs [Estrógenos - Medicamentos Para Reemplazo/Modificación De Hormonas]			
ACTIVELLA 1-0.5 mg tab	3		
ALORA 0.025 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch	3		
ALTAVERA 0.15-30 mg-mcg tab	3		QL(28 / 28)
<i>alyacen 1/35 1-35 mg-mcg tab</i>	1		QL(28 / 28)
AMABELZ 0.5-0.1 mg tab, 1-0.5 mg tab	3		
ANGELIQ 0.25-0.5 mg tab, 0.5-1 mg tab	3		
AVIANE 0.1-20 mg-mcg tab	3		QL(28 / 28)
CLIMARA 0.025 mg/24hr tdwk patch, 0.0375 mg/24hr tdwk patch, 0.05 mg/24hr tdwk patch, 0.06 mg/24hr tdwk patch, 0.075 mg/24hr tdwk patch, 0.1 mg/24hr tdwk patch	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CLIMARA PRO 0.045-0.015 mg/day tdwk patch	3		
COMBIPATCH 0.05-0.14 mg/day tdbiw patch, 0.05-0.25 mg/day tdbiw patch	3		
COVARYX 1.25-2.5 mg tab	3		
COVARYX HS 0.625-1.25 mg tab	3		
CRYSSELLE-28 0.3-30 mg-mcg tab	3		QL(28 / 28)
DASETTA 1/35 1-35 mg-mcg tab	3		QL(28 / 28)
DELESTROGEN 10 mg/ml im oil, 20 mg/ml im oil, 40 mg/ml im oil	3		
DELYLA 0.1-20 mg-mcg tab	3		QL(28 / 28)
DEPO-ESTRADIOL 5 mg/ml im oil	3		
DIVIGEL 0.25 mg/0.25gm td gel, 0.5 mg/0.5gm td gel, 0.75 mg/0.75gm td gel	3		
DIVIGEL 1 mg/gm td gel	3		
EEMT 1.25-2.5 mg tab	3		
EEMT HS 0.625-1.25 mg tab	3		
ELESTRIN 0.52 MG/0.87 GM (0.06%) td gel	3		
ELINEST 0.3-30 mg-mcg tab	3		QL(28 / 28)
ENPRESSE-28 50-30/75-40/125-30 mcg tab	3		QL(28 / 28)
<i>est estrogens-methyltest 1.25-2.5 mg tab</i>	1	ESTRATEST	
<i>est estrogens-methyltest ds 1.25-2.5 mg tab</i>	1	ESTRATEST	
<i>est estrogens-methyltest hs 0.625-1.25 mg tab</i>	1		
<i>estradiol 0.025 mg/24hr tdwk patch, 0.0375 mg/24hr tdwk patch, 0.05 mg/24hr tdwk patch, 0.06 mg/24hr tdwk</i>	1	CLIMARA	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>patch, 0.075 mg/24hr tdwk</i>			
<i>patch, 0.1 mg/24hr tdwk patch</i>			
<i>estradiol 0.5 mg/0.5gm td gel</i>	1	DIVIGEL	
<i>estradiol 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	ESTRACE	
<i>estradiol 0.1 mg/gm vag crm</i>	1	ESTRACE	
<i>estradiol 10 mcg vag tab</i>	1	VAGIFEM	
<i>estradiol 0.025 mg/24hr tdbiw patch, 0.0375 mg/24hr tdbiw patch, 0.05 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch</i>	1	VIVELLE-DOT	
<i>estradiol valerate 10 mg/ml im oil</i>	1		
<i>estradiol valerate 20 mg/ml im oil, 40 mg/ml im oil</i>	1	DELESTROGEN	
<i>estradiol-norethindrone acet 0.5-0.1 mg tab, 1-0.5 mg tab</i>	1	ACTIVELLA	
ESTRING 2 mg vag ring	3		
ESTROGEL 0.75 MG/1.25 GM (0.06%) td gel	3		
<i>ethynodiol diac-eth estradiol 1-35 mg-mcg tab</i>	1	DEMULEN	QL(28 / 28)
<i>etonogestrel-ethinyl estradiol 0.12-0.015 mg/24hr vag ring</i>	1	NUVARING	QL(1 / 28)
EVAMIST 1.53 mg/spray td soln	3		
FALMINA 0.1-20 mg-mcg tab	3		QL(28 / 28)
FEMRING 0.05 mg/24hr vag ring, 0.1 mg/24hr vag ring	3		
FYAVOLV 0.5-2.5 mg-mcg tab, 1-5 mg-mcg tab	3		
INTROVALE 0.15-0.03 mg tab	3		QL(91 / 91)
JINTELI 1-5 mg-mcg tab	3		
JOLESSA 0.15-0.03 mg tab	3		QL(91 / 91)
KELNOR 1/35 1-35 mg-mcg tab	3		QL(28 / 28)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
KURVELO 0.15-30 mg-mcg tab	3		QL(28 / 28)
LESSINA 0.1-20 mg-mcg tab	3		QL(28 / 28)
LEVONEST 50-30/75-40/ 125-30 mcg tab	3		QL(28 / 28)
<i>levonorgest-eth estrad 91-day 0.15-0.03 mg tab</i>	1	SEASONALE	QL(91 / 91)
<i>levonorgestrel-ethinyl estrad 0.1-20 mg-mcg tab</i>	1	ALESSE	QL(28 / 28)
<i>levonorgestrel-ethinyl estrad 0.15-30 mg-mcg tab</i>	1	NORDETTE	QL(28 / 28)
<i>levonorg-eth estrad triphasic 50-30/75-40/ 125-30 mcg tab</i>	1	ENPRESSE 28 DAY	QL(28 / 28)
LEVORA 0.15/30 (28) 0.15-30 mg-mcg tab	3		QL(28 / 28)
LOW-OGESTREL 0.3-30 mg- mcg tab	3		QL(28 / 28)
LUTERA 0.1-20 mg-mcg tab	3		QL(28 / 28)
<i>marlissa 0.15-30 mg-mcg tab</i>	1	NORDETTE	QL(28 / 28)
MENEST 0.3 mg tab, 0.625 mg tab, 1.25 mg tab, 2.5 mg tab	3		
MENOSTAR 14 mcg/24hr tdwk patch	3		
MIMVEY 1-0.5 mg tab	3		
MINIVELLE 0.025 mg/24hr tdbiw patch, 0.0375 mg/24hr tdbiw patch, 0.05 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch	3		
<i>norethindrone-eth estradiol 0.5-2.5 mg-mcg tab, 1-5 mg- mcg tab</i>	1	FEMHRT	
<i>norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-25 mcg tab, 0.18/0.215/0.25 mg-35 mcg tab</i>	1	ORTHO TRI- CYCLEN	QL(28 / 28)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
NORTREL 1/35 (21) 1-35 mg-mcg tab	3		QL(28 / 28)
NORTREL 1/35 (28) 1-35 mg-mcg tab	3		QL(28 / 28)
PORTIA-28 0.15-30 mg-mcg tab	3		QL(28 / 28)
PREFEST 1/1-0.09 mg (15/15) tab	3		
PREMARIN 0.3 mg tab, 0.45 mg tab, 0.625 mg tab, 0.9 mg tab, 1.25 mg tab	2		
PREMARIN 0.625 mg/gm vag crm	2		
PREMARIN 25 mg inj soln	3		
PREMPHASE 0.625-5 mg tab	2		
PREMPRO 0.3-1.5 mg tab, 0.45-1.5 mg tab, 0.625-2.5 mg tab, 0.625-5 mg tab	2		
SETLAKIN 0.15-0.03 mg tab	3		QL(91 / 91)
SRONYX 0.1-20 mg-mcg tab	3		QL(28 / 28)
TILIA FE 1-20/1-30/1-35 mg-mcg tab	3		QL(28 / 28)
TRI-ESTARYLLA 0.18/0.215/0.25 mg-35 mcg tab	3		QL(28 / 28)
TRI-LEGEST FE 1-20/1-30/1-35 mg-mcg tab	3		QL(28 / 28)
TRI-LINYAH 0.18/0.215/0.25 mg-35 mcg tab	3		QL(28 / 28)
TRI-LO-ESTARYLLA 0.18/0.215/0.25 mg-25 mcg tab	3		QL(28 / 28)
TRI-LO-MARZIA 0.18/0.215/0.25 mg-25 mcg tab	3		QL(28 / 28)
TRI-LO-SPRINTEC 0.18/0.215/0.25 mg-25 mcg tab	3		QL(28 / 28)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
TRI-SPRINTEC 0.18/0.215/0.25 mg-35 mcg tab	3		QL(28 / 28)
TRIVORA (28) 50-30/75-40/ 125-30 mcg tab	3		QL(28 / 28)
VIENVA 0.1-20 mg-mcg tab	3		QL(28 / 28)
VIVELLE-DOT 0.025 mg/24hr tdbiw patch, 0.0375 mg/24hr tdbiw patch, 0.05 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch	3		
XULANE 150-35 mcg/24hr tdwk patch	3		QL(3 / 28)
YUVAFEM 10 mcg vag tab	3		
Progestins - Hormone Replacement/modifying Drugs [Progestinas - Medicamentos Para Reemplazo/Modificación De Hormonas]			
AYGESTIN 5 mg tab	3		
CAMILA 0.35 mg tab	3		QL(28 / 28)
DEBLITANE 0.35 mg tab	3		QL(28 / 28)
DEPO-PROVERA 150 mg/ml im susp, 150 mg/ml im susp pfs	3		QL(1 / 90)
DEPO-SUBQ PROVERA 104 104 mg/0.65ml sc susp pfs	3		QL(1 / 90)
ERRIN 0.35 mg tab	3		QL(28 / 28)
HEATHER 0.35 mg tab	3		QL(28 / 28)
JENCYCLA 0.35 mg tab	3		QL(28 / 28)
LYZA 0.35 mg tab	3		QL(28 / 28)
<i>medroxyprogesterone acetate 150 mg/ml im susp, 150 mg/ml im susp pfs</i>	1	DEPO-PROVERA	QL(1 / 90)
<i>medroxyprogesterone acetate 10 mg tab, 2.5 mg tab, 5 mg tab</i>	1	PROVERA	
<i>megestrol acetate 20 mg tab, 40 mg tab</i>	4	MEGACE	PA
<i>megestrol acetate 40 mg/ml susp, 400 mg/10ml susp</i>	4	MEGACE	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>megestrol acetate 625 mg/5ml susp</i>	5	MEGACE	PA
MIRENA (52 MG) 20 mcg/day iud	4		
NORA-BE 0.35 mg tab	3		QL(28 / 28)
<i>norethindrone 0.35 mg tab</i>	1	NOR-QD	QL(28 / 28)
<i>norethindrone acetate 5 mg tab</i>	1	AYGESTIN	
NORLYROC 0.35 mg tab	3		QL(28 / 28)
<i>progesterone 50 mg/ml im oil</i>	1		PA
PROVERA 10 mg tab, 2.5 mg tab, 5 mg tab	3		
SHAROBEL 0.35 mg tab	3		QL(28 / 28)
Selective Estrogen Receptor Modifying Agents - Hormone Replacement/modifying Drugs [Agentes Modificadores Selectivos Del Receptor De Estrógeno - Medicamentos Para Reemplazo/Modificación De Hormonas]			
EVISTA 60 mg tab	3		
<i>raloxifene hcl 60 mg tab</i>	1	EVISTA	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID) - DRUGS TO REPLACE THYROID HORMONES [AGENTES HORMONALES, ESTIMULANTES/REEMPLAZO/MODIFICADOR (TIROIDES) - MEDICAMENTOS PARA REEMPLAZAR LAS HORMONAS TIROIDEAS]			
Hormonal Agents, Stimulant/replacement/modifying (thyroid) - Thyroid Replacement Drugs [Agentes Hormonales, Estimulantes/Reemplazo/Modificador (Tiroides) - Medicamentos Para Reemplazo De Tiroides]			
ARMOUR THYROID 180 mg tab, 240 mg tab, 300 mg tab	3		
CYTOMEL 25 mcg tab, 5 mcg tab, 50 mcg tab	3		
LEVO-T 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab	3		
<i>levothyroxine sodium 100 mcg tab, 112 mcg tab, 125 mcg</i>	1	SYNTHROID	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab</i>			
<i>levothyroxine sodium 100 mcg cap, 112 mcg cap, 125 mcg cap, 13 mcg cap, 137 mcg cap, 150 mcg cap, 175 mcg cap, 25 mcg cap, 50 mcg cap, 75 mcg cap, 88 mcg cap</i>	1	TIROSINT	
LEVOXYL 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab	3		
<i>liothyronine sodium 25 mcg tab, 5 mcg tab, 50 mcg tab</i>	1	CYTOMEL	
NP THYROID 120 mg tab, 30 mg tab, 60 mg tab, 90 mg tab	1		
SYNTHROID 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab	2		
<i>thyroid 120 mg tab, 30 mg tab, 60 mg tab, 90 mg tab</i>	1		
TIROSINT 100 mcg cap, 112 mcg cap, 125 mcg cap, 13 mcg cap, 137 mcg cap, 150 mcg cap, 175 mcg cap, 25 mcg cap, 37.5 mcg cap, 44 mcg cap, 50 mcg cap, 62.5 mcg cap, 75 mcg cap	3		
TIROSINT-SOL 100 mcg/ml soln, 112 mcg/ml soln, 125 mcg/ml soln, 13 mcg/ml soln, 137 mcg/ml soln, 150 mcg/ml	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
soln, 175 mcg/ml soln, 200 mcg/ml soln, 25 mcg/ml soln, 50 mcg/ml soln, 75 mcg/ml soln, 88 mcg/ml soln			
UNITHROID 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab	3		
HORMONAL AGENTS, SUPPRESSANT (ADRENAL) - DRUGS TO REGULATE HORMONES [AGENTES HORMONALES, SUPRESORES (ADRENALES) - MEDICAMENTOS PARA REGULAR LAS HORMONAS]			
Hormonal Agents, Suppressant (adrenal) - Hormone Suppressants [Agentes Hormonales, Supresores (Adrenales) - Supresores De Hormonas]			
LYSODREN 500 mg tab	4		PA
HORMONAL AGENTS, SUPPRESSANT (PITUITARY) - DRUGS TO REGULATE HORMONES [AGENTES HORMONALES, SUPRESORES (PITUITARIA) - MEDICAMENTOS PARA REGULAR LAS HORMONAS]			
Hormonal Agents, Suppressant (pituitary) - Hormone Suppressants [Agentes Hormonales, Supresores (Pituitaria) - Supresores De Hormonas]			
<i>cabergoline 0.5 mg tab</i>	1	DOSTINEX	
ELIGARD 22.5 mg sc kit, 30 mg sc kit, 45 mg sc kit, 7.5 mg sc kit	4		PA
FIRMAGON 80 mg sc soln	4		PA
FIRMAGON (240 MG DOSE) 120 mg/vial sc soln	4		PA
<i>lanreotide acetate 120 mg/0.5ml sc soln</i>	4		PA
<i>leuprolide acetate 1 mg/0.2ml inj kit</i>	4	LUPRON	PA
LUPRON DEPOT (1-MONTH) 3.75 mg im kit, 7.5 mg im kit	4		PA
LUPRON DEPOT (3-MONTH) 11.25 mg im kit, 22.5 mg im kit	4		PA
LUPRON DEPOT (4-MONTH) 30 mg im kit	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
LUPRON DEPOT (6-MONTH) 45 mg im kit	4		PA
LUPRON DEPOT-PED (1-MONTH) 11.25 mg im kit, 15 mg im kit, 7.5 mg im kit	4		PA
LUPRON DEPOT-PED (3-MONTH) 11.25 mg (ped) im kit, 30 mg (ped) im kit	4		PA
LUPRON DEPOT-PED (6-MONTH) 45 mg im kit	4		PA
<i>octreotide acetate 100 mcg/ml sc soln pfs, 50 mcg/ml sc soln pfs, 500 mcg/ml sc soln pfs</i>	5		PA
<i>octreotide acetate 100 mcg/ml inj soln, 1000 mcg/ml inj soln, 200 mcg/ml inj soln, 50 mcg/ml inj soln, 500 mcg/ml inj soln</i>	5	SANDOSTATIN	PA
SANDOSTATIN 100 mcg/ml inj soln, 50 mcg/ml inj soln, 500 mcg/ml inj soln	5		PA
SOMATULINE DEPOT 120 mg/0.5ml sc soln, 60 mg/0.2ml sc soln, 90 mg/0.3ml sc soln	5		PA
TRELSTAR MIXJECT 11.25 mg im susp, 22.5 mg im susp, 3.75 mg im susp	4		PA
HORMONAL AGENTS, SUPPRESSANT (THYROID) - DRUGS TO SUPPRESS THYROID HORMONES [AGENTES HORMONALES, SUPRESORES (TIROIDE) - MEDICAMENTOS PARA SUPRIMIR LAS HORMONAS TIROIDEAS]			
Antithyroid Agents - Thyroid Suppressing Drugs [Agentes Antitiroideos - Medicamentos Para Supresión De La Tiroides]			
<i>methimazole 10 mg tab, 5 mg tab</i>	1	TAPAZOLE	
<i>propylthiouracil 50 mg tab</i>	1		
IMMUNOLOGICAL AGENTS - DRUGS THAT STIMULATE OR SUPPRESS THE IMMUNE SYSTEM [AGENTES INMUNOLÓGICOS - MEDICAMENTOS QUE ESTIMULAN O SUPRIMEN EL SISTEMA INMUNE]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Angioedema Agents - Drugs To Treat Swelling Underneath The Skin [Agentes De La Angioedema - Medicamentos Para Tratar La Hinchazón Bajo La Piel]			
<i>icatibant acetate 30 mg/3ml sc soln pfs</i>	4		PA
Immune Suppressants - Immune System Drugs [Inmunosupresores - Medicamentos Para El Sistema Inmune]			
<i>adalimumab-adaz 40 mg/0.4ml sc soln auto-inj, 40 mg/0.4ml sc soln pfs</i>	4	HYRIMOZ	PA
ASTAGRAF XL 0.5 mg cap er 24 hr, 1 mg cap er 24 hr, 5 mg cap er 24 hr	5		PA
AZASAN 100 mg tab, 75 mg tab	5		PA
<i>azathioprine 50 mg tab</i>	5	IMURAN	PA
<i>azathioprine sodium 100 mg inj soln</i>	5	IMURAN	PA
BENLYSTA 120 mg iv soln	5		PA
BENLYSTA 200 mg/ml sc soln auto-inj, 200 mg/ml sc soln pfs	5		PA
CELLCEPT 250 mg cap, 500 mg tab	5		PA
CELLCEPT 200 mg/ml susp	5		PA
<i>cyclosporine 100 mg cap, 25 mg cap</i>	5	SANDIMMUNE	PA
<i>cyclosporine 50 mg/ml iv soln</i>	5	SANDIMMUNE	PA
<i>cyclosporine modified 100 mg cap, 25 mg cap, 50 mg cap</i>	5	NEORAL	PA
<i>cyclosporine modified 100 mg/ml soln</i>	5	NEORAL	PA
ENBREL 25 mg/0.5ml sc soln pfs, 50 mg/ml sc soln pfs	4		PA
ENBREL MINI 50 mg/ml sc soln cart	4		PA
ENBREL SURECLICK 50 mg/ml sc soln auto-inj	4		PA
<i>everolimus 0.25 mg tab, 0.5 mg tab, 0.75 mg tab</i>	4	ZORTRESS	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
GENGRAF 100 mg cap, 25 mg cap	5		PA
GENGRAF 100 mg/ml soln	5		PA
HADLIMA 40 mg/0.4ml sc soln pfs, 40 mg/0.8ml sc soln pfs	4		PA
HADLIMA PUSH TOUCH 40 mg/0.4ml sc soln auto-inj, 40 mg/0.8ml sc soln auto-inj	4		PA
HUMIRA 10 mg/0.1ml sc pfs kit, 20 mg/0.2ml sc pfs kit, 40 mg/0.4ml sc pfs kit, 40 mg/0.8ml sc pfs kit	4		PA
HUMIRA PEDIATRIC CROHNS START 80 MG/0.8ML & 40mg/0.4ml sc pfs kit, 80 mg/0.8ml sc pfs kit	4		PA
HUMIRA PEN 40 mg/0.4ml sc pen-inj kit, 40 mg/0.8ml sc pen-inj kit, 80 mg/0.8ml sc pen-inj kit	4		PA
HUMIRA PEN-CD/UC/HS STARTER 40 mg/0.8ml sc pen-inj kit, 80 mg/0.8ml sc pen-inj kit	4		PA
HUMIRA PEN-PEDIATRIC UC START 80 mg/0.8ml sc pen-inj kit	4		PA
HUMIRA PEN-PS/UV/ADOL HS START 40 mg/0.8ml sc pen-inj kit	4		PA
HUMIRA PEN-PSOR/UEVIT STARTER 80 MG/0.8ML & 40mg/0.4ml sc pen-inj kit	4		PA
IMURAN 50 mg tab	5		PA
<i>methotrexate sodium 1 gm inj soln, 2.5 mg tab</i>	4		PA
<i>methotrexate sodium 250 mg/10ml inj soln, 50 mg/2ml inj soln</i>	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>methotrexate sodium (pf) 1 gm/40ml inj soln, 250 mg/10ml inj soln, 50 mg/2ml inj soln</i>	4		PA
<i>mycophenolate mofetil 250 mg cap, 500 mg tab</i>	4	CELLCEPT	PA
<i>mycophenolate mofetil 200 mg/ml susp</i>	4	CELLCEPT	PA
<i>mycophenolate sodium 180 mg tab dr, 360 mg tab dr</i>	4	MYFORTIC	PA
MYFORTIC 180 mg tab dr, 360 mg tab dr	5		PA
NEORAL 100 mg cap, 25 mg cap	5		PA
NEORAL 100 mg/ml soln	5		PA
NULOJIX 250 mg iv soln	5		PA
ORENCIA 250 mg iv soln	4		PA
ORENCIA 125 mg/ml sc soln pfs, 50 mg/0.4ml sc soln pfs, 87.5 mg/0.7ml sc soln pfs	4		PA
ORENCIA CLICKJECT 125 mg/ml sc soln auto-inj	4		PA
PROGRAF 0.5 mg cap, 1 mg cap, 5 mg cap	5		PA
RENFLEXIS 100 mg iv soln	4		PA
RINVOQ 15 mg tab er 24 hr, 30 mg tab er 24 hr, 45 mg tab er 24 hr	4		PA
SANDIMMUNE 100 mg cap, 25 mg cap	5		PA
SANDIMMUNE 100 mg/ml soln, 50 mg/ml iv soln	5		PA
<i>sirolimus 1 mg/ml soln</i>	4	RAPAMUNE	PA
<i>sirolimus 0.5 mg tab, 1 mg tab, 2 mg tab</i>	5	RAPAMUNE	PA
<i>tacrolimus 0.5 mg cap, 1 mg cap, 5 mg cap</i>	5	PROGRAF	PA
<i>temsirolimus 25 mg/ml iv soln</i>	4	TORISEL	PA
TORISEL 25 mg/ml iv soln	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
TREXALL 10 mg tab, 15 mg tab, 5 mg tab, 7.5 mg tab	4		PA
XELJANZ 10 mg tab, 5 mg tab	4		PA
XELJANZ XR 11 mg tab er 24 hr	4		PA
Immunizing Agents, Passive - Immune System Drugs [Agentes Inmunizantes, Pasivos - Medicamentos Para El Sistema Inmune]			
BIVIGAM 10 gm/100ml iv soln, 5 gm/50ml iv soln	5		PA
FLEBOGAMMA DIF 0.5 gm/10ml iv soln, 10 gm/100ml iv soln, 10 gm/200ml iv soln, 2.5 gm/50ml iv soln, 20 gm/200ml iv soln, 20 gm/400ml iv soln, 5 gm/100ml iv soln, 5 gm/50ml iv soln	5		PA
GAMMAGARD 1 gm/10ml inj soln, 10 gm/100ml inj soln, 2.5 gm/25ml inj soln, 20 gm/200ml inj soln, 30 gm/300ml inj soln, 5 gm/50ml inj soln	5		PA
GAMMAGARD S/D LESS IGA 10 gm iv soln, 5 gm iv soln	5		PA
GAMMAKED 1 gm/10ml inj soln, 10 gm/100ml inj soln, 20 gm/200ml inj soln, 5 gm/50ml inj soln	5		PA
GAMMAPLEX 10 gm/100ml iv soln, 10 gm/200ml iv soln, 20 gm/200ml iv soln, 20 gm/400ml iv soln, 5 gm/100ml iv soln, 5 gm/50ml iv soln	5		PA
GAMUNEX-C 1 gm/10ml inj soln, 10 gm/100ml inj soln, 2.5 gm/25ml inj soln, 20 gm/200ml inj soln, 5 gm/50ml inj soln	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
HYPERRHO S/D 1500 unit im soln pfs, 250 unit im soln pfs	4		PA
MICRHOGAM ULTRA-FILTERED PLUS 250 unit im soln pfs	4		PA
OCTAGAM 10 gm/100ml iv soln, 10 gm/200ml iv soln, 2.5 gm/50ml iv soln, 20 gm/200ml iv soln, 5 gm/100ml iv soln, 5 gm/50ml iv soln	5		PA
PRIVIGEN 10 gm/100ml iv soln, 20 gm/200ml iv soln, 5 gm/50ml iv soln	5		PA
RHOGAM ULTRA-FILTERED PLUS 1500 unit im soln pfs	4		PA
RHOPHYLAC 1500 unit/2ml inj soln pfs	4		PA
WINRHO SDF 1500 unit/1.3ml inj soln, 15000 unit/13ml inj soln, 2500 unit/2.2ml inj soln, 5000 unit/4.4ml inj soln	4		PA
Immunomodulators - Immune System Drugs [Inmunomoduladores - Medicamentos Para El Sistema Inmune]			
ACTIMMUNE 2000000 unit/0.5ml sc soln	4		PA
ARAVA 10 mg tab, 20 mg tab	3		
ARCALYST 220 mg sc soln	5		PA
BEYFORTUS 50 mg/0.5ml im soln pfs	5		QL(0.5 / 365), AL
BEYFORTUS 100 mg/ml im soln pfs	5		QL(1 / 365), AL
ILARIS 150 mg/ml sc soln	3		
<i>leflunomide 10 mg tab, 20 mg tab</i>	1	ARAVA	
OTEZLA 10 & 20 & 30 mg tab pack, 30 mg tab	5		PA
PROVENGE 50000000 cells iv susp	4		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
RIDAURA 3 mg cap	3		
SYNAGIS 100 mg/ml im soln, 50 mg/0.5ml im soln	5		PA
Vaccines [Vacunas]			
ABRYSVO 120 mcg/0.5ml im soln	3		QL(1 / 999)
ADACEL 5-2-15.5 lf-mcg/0.5 im susp	3		
AFLURIA QUADRIVALENT im susp, 0.5 ml im susp pfs	3		
AREXVY 120 mcg/0.5ml im susp	3		QL(1 / 999), AL
BOOSTRIX 5-2.5-18.5 lf-mcg/0.5 im susp, 5-2.5-18.5 lf-mcg/0.5 im susp pfs	3		
COMIRNATY 30 mcg/0.3ml im susp, 30 mcg/0.3ml im susp pfs	3		
DAPTACEL 23-15-5 im susp	3		
ENGERIX-B 10 mcg/0.5ml Injection Suspension Prefilled Syringe, 20 mcg/ml inj susp, 20 mcg/ml Injection Suspension Prefilled Syringe	3		
FLUAD QUADRIVALENT 0.5 ml im pfs	3		
FLUARIX QUADRIVALENT 0.5 ml im susp pfs	3		
FLUBLOK QUADRIVALENT 0.5 ml im soln pfs	3		
FLUCELVAX QUADRIVALENT im susp, 0.5 ml im susp pfs	3		
FLULAVAL QUADRIVALENT 0.5 ml im susp pfs	3		
FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ml im susp pfs	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
FLUZONE QUADRIVALENT im susp, 0.5 ml im susp pfs	3		
GARDASIL 9 im susp, im susp pfs	3		
INFANRIX 25-58-10 im susp	3		
KINRIX 0.5 ml im susp pfs	3		
<i>novavax covid-19 vaccine 5 mcg/0.5ml im susp</i>	3		
PEDIARIX im susp pfs	3		
PENTACEL im susp	3		
PNEUMOVAX 23 25 mcg/0.5ml inj	3		
<i>prehevbrio 10 mcg/ml im susp</i>	3		
PREVNAR 13 im susp	3		
PREVNAR 20 0.5 ml im susp pfs	3		
PRIORIX sc susp	3		
QUADRACEL im susp	3		
SHINGRIX 50 mcg/0.5ml im susp	3		
SPIKEVAX 50 mcg/0.5ml im susp, 50 mcg/0.5ml im susp pfs	3		
TDVAX 2-2 lf/0.5ml im susp	1		
TENIVAC 5-2 lfu im inj	3		
<i>tetanus-diphtheria toxoids td 2-2 lf/0.5ml im susp</i>	1		
TWINRIX 720-20 elu-mcg/ml im susp pfs	3		
VARIVAX 1350 pfu/0.5ml sc inj	3		
INFLAMMATORY BOWEL DISEASE AGENTS - DRUGS TO TREAT INFLAMMATORY BOWEL DISEASE [AGENTES PARA LA ENFERMEDAD INFLAMATORIA DEL INTESTINO - MEDICAMENTOS PARA TRATAR LA ENFERMEDAD INFLAMATORIA DEL INTESTINO]			
Aminosalicylates - Inflammatory Bowel Disease Drugs [Aminosalicilatos - Medicamentos Para La Enfermedad Inflamatoria Del Intestino]			
<i>balsalazide disodium 750 mg cap</i>	1	COLAZAL	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CANASA 1000 mg rect supp	2		
COLAZAL 750 mg cap	3		
DIPENTUM 250 mg cap	3		
<i>mesalamine 800 mg tab dr</i>	1	ASACOL HD	
<i>mesalamine 1000 mg rect supp</i>	1	CANASA	
<i>mesalamine 400 mg cap dr</i>	1	DELZICOL	
<i>mesalamine 1.2 gm tab dr</i>	1	LIALDA	
<i>mesalamine 4 gm rect enema</i>	1	ROWASA	
<i>mesalamine er 0.375 gm cap er 24 hr</i>	1	APRISO	
<i>mesalamine er 500 mg cap er</i>	1	PENTASA	
<i>mesalamine-cleanser 4 gm rect kit</i>	1	ROWASA	
PENTASA 250 mg cap er, 500 mg cap er	3		
ROWASA 4 gm rect kit	3		
SFROWASA 4 gm/60ml rect enema	3		
Glucocorticoids - Drugs To Treat Inflammation [Glucocorticoides - Medicamentos Para Tratar Inflamación]			
<i>budesonide 3 mg cap dr prt</i>	4	ENTOCORT	PA
<i>budesonide er 9 mg tab er 24 hr</i>	4	UCERIS	PA
CORTENEMA 100 mg/60ml rect enema	3		
CORTIFOAM 10 % foam	3		
<i>hydrocortisone 100 mg/60ml rect enema</i>	1	CORTENEMA	
Sulfonamides - Antibiotics [Sulfonamidas - Antibióticos]			
AZULFIDINE 500 mg tab	3		
AZULFIDINE EN-TABS 500 mg tab dr	3		
<i>sulfasalazine 500 mg tab, 500 mg tab dr</i>	1	AZULFIDINE	
METABOLIC BONE DISEASE AGENTS - DRUGS TO TREAT BONE CONDITIONS [AGENTES PARA LA ENFERMEDAD METABÓLICA DEL HUESO - MEDICAMENTOS PARA TRATAR CONDICIONES DE LOS HUESOS]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Metabolic Bone Disease Agents - Osteoporosis (bone Loss) Drugs [Agentes Para La Enfermedad Metabólica Del Hueso - Medicamentos Para Osteoporosis (Pérdida De Hueso)]			
ACTONEL 150 mg tab, 35 mg tab	3		
<i>alendronate sodium 10 mg tab, 35 mg tab, 5 mg tab, 70 mg tab</i>	1	FOSAMAX	
AELVIA 35 mg tab dr	3		
BINOSTO 70 mg tab eff	3		
<i>calcitonin (salmon) 200 unit/act nasal soln, 200 unit/ml inj soln</i>	1	MIACALCIN	
<i>calcitriol 0.25 mcg cap, 0.5 mcg cap</i>	1	ROCALTROL	
<i>calcitriol 1 mcg/ml soln</i>	1	ROCALTROL	
<i>cinacalcet hcl 30 mg tab, 60 mg tab, 90 mg tab</i>	1	SENSIPAR	
<i>doxercalciferol 0.5 mcg cap, 1 mcg cap, 2.5 mcg cap</i>	1	HECTOROL	
FORTEO 600 mcg/2.4ml sc soln pen-inj	4		PA
<i>ibandronate sodium 150 mg tab</i>	1	BONIVA	
<i>ibandronate sodium 3 mg/3ml iv soln</i>	4	BONIVA	PA
MIACALCIN 200 unit/ml inj soln	3		
<i>pamidronate disodium 30 mg/10ml iv soln, 6 mg/ml iv soln, 90 mg/10ml iv soln</i>	1		PA
<i>paricalcitol 1 mcg cap, 2 mcg cap, 4 mcg cap</i>	1	ZEMPLAR	
<i>paricalcitol 2 mcg/ml iv soln, 5 mcg/ml iv soln</i>	1	ZEMPLAR	
PROLIA 60 mg/ml sc soln pfs	5		PA
RECLAST 5 mg/100ml iv soln	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>risedronate sodium 150 mg tab, 30 mg tab, 35 mg tab, 5 mg tab</i>	1	ACTONEL	
<i>risedronate sodium 35 mg tab dr</i>	1	ATELVIA	
ROCALTROL 0.25 mcg cap, 0.5 mcg cap	3		
ROCALTROL 1 mcg/ml soln	3		
TYMLOS 3120 mcg/1.56ml sc soln pen-inj	4		PA
XGEVA 120 mg/1.7ml sc soln	5		PA
ZEMPLAR 1 mcg cap, 2 mcg cap	3		
ZEMPLAR 2 mcg/ml iv soln, 5 mcg/ml iv soln	3		
<i>zoledronic acid 5 mg/100ml iv soln</i>	4	RECLAST	PA
<i>zoledronic acid 4 mg/100ml iv soln, 4 mg/5ml iv conc</i>	4	ZOMETA	PA
MISCELLANEOUS THERAPEUTIC AGENTS [MISCELLANEOUS THERAPEUTIC AGENTS]			
Miscellaneous Therapeutic Agents [Miscellaneous Therapeutic Agents]			
CARNITOR 330 mg tab	3		
CARNITOR 1 gm/10ml soln	3		
CARNITOR SF 1 gm/10ml soln	3		
<i>deferoxamine mesylate 2 gm inj soln, 500 mg inj soln</i>	1	DESFERAL	
DESFERAL 500 mg inj soln	3		
<i>dimethyl fumarate pwdr</i>	4		PA
<i>levocarnitine 330 mg tab</i>	1	CARNITOR	
<i>levocarnitine 1 gm/10ml soln</i>	1	CARNITOR	
MITOSOL 0.2 mg ophth kit	3		
PARAGARD INTRAUTERINE COPPER iud	4		
<i>retinoic acid pwdr</i>	1		AL
<i>sodium chloride 0.9 % irrig soln</i>	1		
<i>tretinoin pwdr</i>	1		AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
OPHTHALMIC AGENTS - DRUGS TO TREAT EYE CONDITIONS [AGENTES OFTÁLMICOS - MEDICAMENTOS PARA TRATAR CONDICIONES DE LOS OJOS]			
Ophthalmic Agents, Other - Miscellaneous Eye Drugs [Agentes Oftálmicos, Otros - Medicamentos Misceláneos Para Los Ojos]			
ALTAFRIN 10 % ophth soln, 2.5 % ophth soln	3		
<i>atropine sulfate 1 % ophth oint</i>	1		
<i>atropine sulfate 1 % ophth soln</i>	1	ISOPTO ATROPINE	
<i>atropine sulfate 1 % ophth soln</i>	1	ISOPTO ATROPINE	
<i>bacitracin-polymyxin b 500-10000 unit/gm ophth oint</i>	1	POLYSPORIN	
CYCLOGYL 0.5 % ophth soln, 1 % ophth soln, 2 % ophth soln	3		
<i>cyclopentolate hcl 1 % ophth soln</i>	1	CYCLOGYL	
<i>cyclosporine 0.05 % ophth emul</i>	1	RESTASIS	PA
HOMATROPAIRE 5 % ophth soln	3		
ISOPTO ATROPINE 1 % ophth soln	3		
LACRISERT 5 mg ophth insert	3		
MIOCHOL-E 20 mg i-ocul soln	3		
MYDRIACYL 1 % ophth soln	3		
<i>neomycin-bacitracin zn-polymyx 5-400-10000 ophth oint</i>	1	NEOSPORIN	
<i>neomycin-polymyxin-gramicidin 1.75-10000-.025 ophth soln</i>	1	NEOSPORIN	
<i>phenylephrine hcl 10 % ophth soln, 2.5 % ophth soln</i>	1		
POLYCIN 500-10000 unit/gm ophth oint	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>polymyxin b-trimethoprim 10000-0.1 unit/ml-% ophth soln</i>	1	POLYTRIM	
RESTASIS 0.05 % ophth emul	3		PA
RESTASIS MULTIDOSE 0.05 % ophth emul	3		PA
<i>tropicamide 0.5 % ophth soln</i>	1		
<i>tropicamide 1 % ophth soln</i>	1	MYDRIACYL	
Ophthalmic Anti-allergy Agents - Allergy, Infection And Inflammation Drugs [Agentes Oftálmicos Antialérgicos - Medicamentos Para Alergia, Infección E Inflamación]			
<i>azelastine hcl 0.05 % ophth soln</i>	1	OPTIVAR	
<i>bepotastine besilate 1.5 % ophth soln</i>	1	BEPREVE	
BEPREVE 1.5 % ophth soln	3		
<i>cromolyn sodium 4 % ophth soln</i>	1	OPTICROM	
CYCLOMYDRIL 0.2-1 % ophth soln	3		
<i>epinastine hcl 0.05 % ophth soln</i>	1	ELESTAT	
<i>olopatadine hcl 0.2 % ophth soln</i>	1	PATADAY	
Ophthalmic Antibiotics - Drugs To Treat Eye Infections [Antibióticos Oftálmicos - Medicamentos Para Tratar Infecciones De Los Ojos]			
AZASITE 1 % ophth soln	3		
<i>bacitracin 500 unit/gm ophth oint</i>	1	BACI-IM	
BESIVANCE 0.6 % ophth susp	3		
CILOXAN 0.3 % ophth oint	3		
<i>ciprofloxacin hcl 0.3 % ophth soln</i>	1	CILOXAN	
<i>erythromycin 5 mg/gm ophth oint</i>	1	ILOTYCIN	
<i>gatifloxacin 0.5 % ophth soln</i>	1	ZYMAXID	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>gentamicin sulfate 0.3 % ophthalmic solution</i>	1	GARAMYCIN	
<i>moxifloxacin hcl 0.5 % ophthalmic solution</i>	1	VIGAMOX	
<i>moxifloxacin hcl (2x day) 0.5 % ophthalmic solution</i>	1	MOXEZA	
<i>ofloxacin 0.3 % ophthalmic solution</i>	1	OCUFLOX	
<i>tobramycin 0.3 % ophthalmic solution</i>	1	TOBREX	
TOBREX 0.3 % ophthalmic ointment	3		
ZYMAXID 0.5 % ophthalmic solution	3		
Ophthalmic Antiglaucoma Agents - Glaucoma Drugs [Agentes Oftálmicos Antiglaucoma - Medicamentos Para Glaucoma]			
<i>acetazolamide 125 mg tablet, 250 mg tablet</i>	1	DIAMOX	
<i>acetazolamide extended release 500 mg caplet 12 hr</i>	1	DIAMOX	
<i>acetazolamide sodium 500 mg injection solution</i>	1	DIAMOX	
ALPHAGAN P 0.1 % ophthalmic solution	2		
ALPHAGAN P 0.15 % ophthalmic solution	3		
<i>apraclonidine hcl 0.5 % ophthalmic solution</i>	1	IOPIDINE	
<i>betaxolol hcl 0.5 % ophthalmic solution</i>	1	BETOPTIC	
BETIMOL 0.25 % ophthalmic solution, 0.5 % ophthalmic solution	3		
BETOPTIC-S 0.25 % ophthalmic suspension	3		
<i>brimonidine tartrate 0.1 % ophthalmic solution</i>	1		
<i>brimonidine tartrate 0.15 % ophthalmic solution, 0.2 % ophthalmic solution</i>	1	ALPHAGAN	
<i>brimonidine tartrate-timolol 0.2-0.5 % ophthalmic solution</i>	1	COMBIGAN	
<i>brinzolamide 1 % ophthalmic suspension</i>	1	AZOPT	
<i>carteolol hcl 1 % ophthalmic solution</i>	1	OCUPRESS	
COMBIGAN 0.2-0.5 % ophthalmic solution	2		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>dorzolamide hcl 2 % ophth soln</i>	1	TRUSOPT	
<i>dorzolamide hcl-timolol mal 22.3-6.8 mg/ml ophth soln</i>	1	COSOPT	
IOPIDINE 1 % ophth soln	3		
<i>levobunolol hcl 0.5 % ophth soln</i>	1	BETAGAN	
<i>methazolamide 25 mg tab, 50 mg tab</i>	1	NEPTAZANE	
MIOSTAT 0.01 % i-ocul soln	3		
PHOSPHOLINE IODIDE 0.125 % ophth soln	3		
<i>pilocarpine hcl 1 % ophth soln, 2 % ophth soln, 4 % ophth soln</i>	1	ISOPTO CARPINE	
RETISERT 0.59 mg Intravitreal Implant	3		
SIMBRINZA 1-0.2 % ophth susp	2		
<i>timolol maleate 0.25 % ophth soln, 0.5 % ophth soln</i>	1	TIMOPTIC	
<i>timolol maleate 0.25 % ophth gfs, 0.5 % ophth gfs</i>	1	TIMOPTIC XE	
<i>timolol maleate (once-daily) 0.5 % ophth soln</i>	1	ISTALOL	
Ophthalmic Anti-inflammatories - Allergy, Infection And Inflammation Drugs [Antiinflamatorios Oftálmicos - Medicamentos Para Alergia, Infección E Inflamación]			
ACUVAIL 0.45 % ophth soln	3		
ALOMIDE 0.1 % ophth soln	3		
ALREX 0.2 % ophth susp	3		
<i>bacitra-neomycin-polymyxin-hc 1 % ophth oint</i>	1	CORTISPORIN	
<i>bromfenac sodium (once-daily) 0.09 % ophth soln</i>	1	BROMDAY	
<i>dexamethasone sodium phosphate 0.1 % ophth soln</i>	1	MAXIDEX	
<i>diclofenac sodium 0.1 % ophth soln</i>	1	VOLTAREN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>difluprednate 0.05 % ophth emul</i>	1	DUREZOL	
DUREZOL 0.05 % ophth emul	2		
<i>fluorometholone 0.1 % ophth susp</i>	1	FML	
<i>flurbiprofen sodium 0.03 % ophth soln</i>	1	OCUFEN	
FML LIQUIFILM 0.1 % ophth susp	3		
ILEVRO 0.3 % ophth susp	2		
<i>ketorolac tromethamine 0.4 % ophth soln, 0.5 % ophth soln</i>	1	ACULAR	
LOTEMAX SM 0.38 % ophth gel	3		
<i>loteprednol etabonate 0.5 % ophth gel</i>	1	LOTEMAX	
<i>loteprednol etabonate 0.5 % ophth susp</i>	1	LOTEMAX	
MAXIDEX 0.1 % ophth susp	3		
MAXITROL 3.5-10000-0.1 ophth oint	3		
<i>neomycin-polymyxin-dexameth 3.5-10000-0.1 ophth oint</i>	1	MAXITROL	
<i>neomycin-polymyxin-dexameth 3.5-10000-0.1 ophth susp</i>	1	MAXITROL	
<i>neomycin-polymyxin-hc 3.5-10000-1 ophth susp</i>	1	CORTISPORIN	
PRED FORTE 1 % ophth susp	3		
PRED MILD 0.12 % ophth susp	3		
<i>prednisolone acetate 1 % ophth susp</i>	1	PRED FORTE	
<i>prednisolone sodium phosphate 1 % ophth soln</i>	1		
<i>sulfacetamide-prednisolone 10-0.23 % ophth soln</i>	1	VASOCIDIN	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
TOBRADEX ST 0.3-0.05 % ophth susp	2		
TRIESENCE 40 mg/ml i-ocul susp	3		
Ophthalmic Prostaglandin And Prostanoid Analogs - Glaucoma Drugs [Análogos Oftálmicos De Prostaglandinas Y Prostanoidas - Medicamentos Para Glaucoma]			
<i>bimatoprost 0.03 % ophth soln</i>	1	LUMIGAN	
<i>latanoprost 0.005 % ophth soln</i>	1	XALATAN	
LUMIGAN 0.01 % ophth soln	2		
<i>tafluprost (pf) 0.0015 % ophth soln</i>	1	ZIOPTAN	
TRAVATAN Z 0.004 % ophth soln	2		
<i>travoprost (bak free) 0.004 % ophth soln</i>	1	TRAVATAN	
ZIOPTAN 0.0015 % ophth soln	3		
OTIC AGENTS - DRUGS TO TREAT EAR CONDITIONS [AGENTES ÓTICOS - MEDICAMENTOS PARA TRATAR CONDICIONES DE LOS OÍDOS]			
Otic Agents - Drugs For The Ear [Agentes Óticos - Medicamentos Para El Oído]			
<i>acetic acid 2 % otic soln</i>	1	VOSOL	
CETRAXAL 0.2 % otic soln	3		
CIPRO HC 0.2-1 % otic susp	3		
<i>ciprofloxacin hcl 0.2 % otic soln</i>	1	CETRAXAL	
<i>ciprofloxacin-dexamethasone 0.3-0.1 % otic susp</i>	1	CIPRODEX	
CORTISPORIN-TC 3.3-3-10-0.5 mg/ml otic susp	3		
DERMOTIC 0.01 % otic oil	3		
<i>fluocinolone acetonide 0.01 % otic oil</i>	1	DERMOTIC	
<i>hydrocortisone-acetic acid 1-2 % otic soln</i>	1	VOSOL HC	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>neomycin-polymyxin-hc 1 % otic soln, 3.5-10000-1 otic soln, 3.5-10000-1 otic susp</i>	1	CORTISPORIN	
<i>ofloxacin 0.3 % otic soln</i>	1	FLOXIN	
PRAMOTIC 1-0.1 % otic liq	3		
RESPIRATORY TRACT/PULMONARY AGENTS - DRUGS TO TREAT ALLERGIES, COUGH, COLD AND LUNG CONDITIONS [AGENTES PARA EL TRACTO RESPIRATORIO/PULMONAR - MEDICAMENTOS PARA TRATAR ALERGIAS, TOS, RESFRIADO, Y CONDICIONES DEL PULMÓN]			
Antihistamines - Drugs To Treat Allergies [Antihistamínicos - Medicamentos Para Tratar Alergias]			
<i>azelastine hcl 0.1 % nasal soln, 137 mcg/spray nasal soln</i>	1	ASTELIN	
<i>azelastine hcl 0.15 % nasal soln</i>	1	ASTEPRO	
<i>azelastine-fluticasone 137-50 mcg/act nasal susp</i>	1	DYMISTA	
<i>carbinoxamine maleate 4 mg tab</i>	1	CLISTIN	
<i>carbinoxamine maleate 4 mg/5ml soln</i>	1	CLISTIN	
<i>cetirizine hcl 1 mg/ml soln</i>	1	ZYRTEC	
CLARINEX 5 mg tab	3		
<i>clemastine fumarate 0.67 mg/5ml syr</i>	1		
<i>clemastine fumarate 2.68 mg tab</i>	1	TAVIST	
<i>cyproheptadine hcl 4 mg tab</i>	1	PERIACTIN	
<i>cyproheptadine hcl 2 mg/5ml syr</i>	1	PERIACTIN	
<i>desloratadine 2.5 mg tab disint, 5 mg tab, 5 mg tab disint</i>	1	CLARINEX	
<i>diphenhydramine hcl 12.5 mg/5ml oral elix, 50 mg/ml inj soln</i>	1	BENADRYL	
<i>hydroxyzine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	1	ATARAX	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>hydroxyzine hcl 10 mg/5ml syr</i>	1	ATARAX	
<i>hydroxyzine hcl 25 mg/ml im soln, 50 mg/ml im soln</i>	1	VISTARIL	
<i>hydroxyzine pamoate 100 mg cap, 25 mg cap, 50 mg cap</i>	1	VISTARIL	
<i>levocetirizine dihydrochloride 5 mg tab</i>	1	XYZAL	
<i>levocetirizine dihydrochloride 2.5 mg/5ml soln</i>	1	XYZAL	
<i>olopatadine hcl 0.6 % nasal soln</i>	1	PATANASE	
PATANASE 0.6 % nasal soln	3		
VISTARIL 25 mg cap, 50 mg cap	3		
Anti-inflammatories, Inhaled Corticosteroids - Asthma/lung Drugs [Antiinflamatorios, Corticosteroides Inhalados - Medicamentos Para Asma/Pulmón]			
<i>allergy spray 24 hour 55 mcg/act nasal aer</i>	1	NASACORT	
BECONASE AQ 42 mcg/spray nasal susp	3		
<i>budesonide 0.25 mg/2ml inh susp, 0.5 mg/2ml inh susp</i>	1	PULMICORT	QL(60 / 30), AL
<i>eq nasal allergy 55 mcg/act nasal aer</i>	1	NASACORT	
FLOVENT DISKUS 100 mcg/act inh aer pwdr br act, 250 mcg/act inh aer pwdr br act, 50 mcg/act inh aer pwdr br act	3		QL(60 / 30)
FLOVENT HFA 110 mcg/act inh aer, 44 mcg/act inh aer	3		QL(12 / 30)
FLOVENT HFA 220 mcg/act inh aer	3		QL(24 / 30)
<i>flunisolide 25 MCG/ACT (0.025%) nasal soln</i>	1	NASALIDE	
<i>fluticasone propionate 50 mcg/act nasal susp</i>	1	FLONASE	

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>gnp 24 hour nasal allergy 55 mcg/act nasal aer</i>	1	NASACORT	
<i>goodsense nasal allergy spray 55 mcg/act nasal aer</i>	1	NASACORT	
<i>mometasone furoate 50 mcg/act nasal susp</i>	1	NASONEX	
NASACORT ALLERGY 24HR 55 mcg/act nasal aer	1		
<i>nasal allergy 24 hour 55 mcg/act nasal aer</i>	1	NASACORT	
OMNARIS 50 mcg/act nasal susp	3		
QNASL 80 mcg/act nasal aer soln	3		
QVAR REDHALER 40 mcg/act inh aer br act, 80 mcg/act inh aer br act	2		QL(10.6 / 30)
<i>triamcinolone acetonide 55 mcg/act nasal aer</i>	1	NASACORT	
ZETONNA 37 mcg/act nasal aer soln	3		
Antileukotrienes - Asthma/lung Drugs [Antileucotrienos - Medicamentos Para Asma/Pulmón]			
ACCOLATE 10 mg tab, 20 mg tab	3		
<i>montelukast sodium 10 mg tab, 4 mg pckt, 4 mg tab chew, 5 mg tab chew</i>	1	SINGULAIR	
SINGULAIR 10 mg tab, 4 mg pckt, 4 mg tab chew, 5 mg tab chew	3		
<i>zafirlukast 10 mg tab, 20 mg tab</i>	1	ACCOLATE	
<i>zileuton er 600 mg tab er 12 hr</i>	1	ZYFLO CR	
ZYFLO 600 mg tab	3		
Bronchodilators, Anticholinergic - Asthma/lung Drugs [Broncodilatadores, Anticolinérgicos - Medicamentos Para Asma/Pulmón]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
ATROVENT HFA 17 mcg/act inh aer soln	3		QL(12.9 / 25)
<i>ipratropium bromide 0.02 % inh soln, 0.03 % nasal soln, 0.06 % nasal soln</i>	1	ATROVENT	
<i>ipratropium-albuterol 0.5-2.5 (3) mg/3ml inh soln</i>	1	DUONEB	
SPIRIVA HANDIHALER 18 mcg inh cap	2		QL(5 / 15)
SPIRIVA HANDIHALER 18 mcg inh cap	2		QL(30 / 30)
SPIRIVA HANDIHALER 18 mcg inh cap	2		QL(90 / 90)
SPIRIVA RESPIMAT 1.25 mcg/act inh aer soln, 2.5 mcg/act inh aer soln	2		QL(4 / 30)
<i>tiotropium bromide monohydrate 18 mcg inh cap</i>	1		QL(90 / 90)
TUDORZA PRESSAIR 400 mcg/act inh aer pwr br act	3		QL(1 / 30)
Bronchodilators, Sympathomimetic - Asthma/lung Drugs [Broncodilatadores, Simpatomiméticos - Medicamentos Para Asma/Pulmón]			
<i>albuterol sulfate 0.63 mg/3ml inh neb soln, 1.25 mg/3ml inh neb soln</i>	1	ACCUNEB	
<i>albuterol sulfate 2 mg tab, 2.5 mg/0.5ml inh neb soln, 4 mg tab</i>	1	PROVENTIL	
<i>albuterol sulfate (2.5 MG/3ML) 0.083% inh neb soln, (5 MG/ML) 0.5% inh neb soln, 2 mg/5ml syr</i>	1	PROVENTIL	
<i>albuterol sulfate hfa 108 (90 Base) mcg/act inh aer soln</i>	1	PROAIR HFA	QL(13.4 / 30)
<i>albuterol sulfate hfa 108 (90 Base) mcg/act inh aer soln</i>	1	PROAIR HFA	QL(17 / 30)
<i>albuterol sulfate hfa 108 (90 Base) mcg/act inh aer soln</i>	1	PROAIR HFA	QL(36 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>arformoterol tartrate 15 mcg/2ml inh neb soln</i>	1	BROVANA	
AUVI-Q 0.1 mg/0.1ml inj soln auto-inj, 0.15 mg/0.15ml inj soln auto-inj, 0.3 mg/0.3ml inj soln auto-inj	3		
BROVANA 15 mcg/2ml inh neb soln	3		
<i>epinephrine 0.15 mg/0.15ml inj soln auto-inj, 0.3 mg/0.3ml inj soln auto-inj</i>	1	ADRENALIN	
<i>epinephrine 0.15 mg/0.3ml inj soln auto-inj</i>	1	EPIPEN JR	
EPIPEN 2-PAK 0.3 mg/0.3ml inj soln auto-inj	3		
EPIPEN JR 2-PAK 0.15 mg/0.3ml inj soln auto-inj	3		
<i>formoterol fumarate 20 mcg/2ml inh neb soln</i>	1	PERFOROMIST	
<i>levalbuterol hcl 1.25 mg/0.5ml inh neb soln</i>	1	XOPENEX	
<i>levalbuterol hcl 0.31 mg/3ml inh neb soln, 0.63 mg/3ml inh neb soln, 1.25 mg/3ml inh neb soln</i>	1	XOPENEX	
<i>levalbuterol tartrate 45 mcg/act inh aer</i>	1	XOPENEX HFA	
PERFOROMIST 20 mcg/2ml inh neb soln	3		
PROAIR RESPICLICK 108 (90 Base) mcg/act inh aer pwr br act	3		QL(2 / 30)
PROVENTIL HFA 108 (90 Base) mcg/act inh aer soln	3		QL(13.4 / 30)
<i>terbutaline sulfate 2.5 mg tab, 5 mg tab</i>	1	BRETHINE	
VENTOLIN HFA 108 (90 Base) mcg/act inh aer soln	2		QL(16 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
VENTOLIN HFA 108 (90 Base) mcg/act inh aer soln	2		QL(36 / 30)
XOPENEX HFA 45 mcg/act inh aer	3		
Cystic Fibrosis Agents - Drugs To Treat Cystic Fibrosis [Agentes Para La Fibrosis Quística - Medicamentos Para Tratar La Fibrosis Quística]			
AZACTAM 1 gm inj soln, 2 gm inj soln	3		
<i>aztreonam 1 gm inj soln, 2 gm inj soln</i>	1	AZACTAM	
CAYSTON 75 mg inh soln	5		PA
KALYDECO 13.4 mg pckt, 150 mg tab, 25 mg pckt, 50 mg pckt, 75 mg pckt	5		PA
KITABIS PAK 300 mg/5ml inh neb soln	5		PA
PULMOZYME 2.5 mg/2.5ml inh soln	5		PA
TOBI 300 mg/5ml inh neb soln	5		PA
<i>tobramycin 300 mg/5ml inh neb soln</i>	5	TOBI	PA
<i>tobramycin sulfate 1.2 gm inj soln</i>	1		
<i>tobramycin sulfate 1.2 gm/30ml inj soln, 10 mg/ml inj soln, 2 gm/50ml inj soln, 80 mg/2ml inj soln</i>	1		
Mast Cell Stabilizers - Drugs For The Lungs [Estabilizadores De Los Mastocitos - Medicamentos Para Los Pulmones]			
<i>cromolyn sodium 20 mg/2ml inh neb soln</i>	1	INTAL	
Phosphodiesterase Inhibitors, Airways Disease - Drugs For The Lungs [Inhibidores De La Fosfodiesterasa, Enfermedad De Las Vías Respiratorias - Medicamentos Para Los Pulmones]			
DALIRESP 250 mcg tab, 500 mcg tab	3		
ELIXOPHYLLIN 80 mg/15ml oral elix	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>roflumilast 250 mcg tab, 500 mcg tab</i>	1	DALIRESP	
THEO-24 100 mg cap er 24 hr, 200 mg cap er 24 hr, 300 mg cap er 24 hr, 400 mg cap er 24 hr	3		
<i>theophylline 80 mg/15ml oral elix, 80 mg/15ml soln</i>	1		
<i>theophylline er 100 mg tab er 12 hr, 200 mg tab er 12 hr, 300 mg tab er 12 hr, 450 mg tab er 12 hr</i>	1	THEO-DUR	
<i>theophylline er 400 mg tab er 24 hr, 600 mg tab er 24 hr</i>	1	UNIPHYL	
Pulmonary Antihypertensives - Asthma/lung Drugs [Antihipertensivos Pulmonares - Medicamentos Para Asma/Pulmón]			
ADEMPAS 0.5 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 2.5 mg tab	4		PA
<i>ambrisentan 10 mg tab, 5 mg tab</i>	4	LETAIRIS	PA
<i>bosentan 125 mg tab, 62.5 mg tab</i>	4	TRACLEER	PA
<i>epoprostenol sodium 0.5 mg iv soln, 1.5 mg iv soln</i>	5	FLOLAN	PA
FLOLAN 0.5 mg iv soln, 1.5 mg iv soln	5		PA
LETAIRIS 10 mg tab, 5 mg tab	5		PA
OPSUMIT 10 mg tab	5		PA
ORENITRAM 0.125 mg tab er, 0.25 mg tab er, 1 mg tab er, 2.5 mg tab er	5		PA
REMODULIN 100 mg/20ml inj soln, 20 mg/20ml inj soln, 200 mg/20ml inj soln, 50 mg/20ml inj soln	4		PA
<i>sildenafil citrate 20 mg tab</i>	1	REVATIO	PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>sildenafil citrate 10 mg/ml susp</i>	4	REVATIO	PA
<i>sildenafil citrate 10 mg/12.5ml iv soln</i>	5	REVATIO	PA
<i>tadalafil (pah) 20 mg tab</i>	4	ADCIRCA	PA
<i>treprostinil 100 mg/20ml inj soln, 20 mg/20ml inj soln, 200 mg/20ml inj soln, 50 mg/20ml inj soln</i>	4	REMODULIN	PA
TYVASO 0.6 mg/ml inh soln	5		PA
TYVASO REFILL 0.6 mg/ml inh soln	5		PA
TYVASO STARTER 0.6 mg/ml inh soln	5		PA
VELETRI 0.5 mg iv soln, 1.5 mg iv soln	5		PA
VENTAVIS 10 mcg/ml inh soln, 20 mcg/ml inh soln	5		PA
Respiratory Tract Agents, Other - Asthma/lung Drugs [Agentes Del Tracto Respiratorio, Otros - Medicamentos Para Asma/Pulmón]			
<i>acetylcysteine 10 % inh soln, 20 % inh soln</i>	1	MUCOMYST	
ADRENALIN 0.1 % nasal soln	3		
ADVAIR HFA 115-21 mcg/act inh aer, 230-21 mcg/act inh aer, 45-21 mcg/act inh aer	2		QL(8 / 30)
ADVAIR HFA 115-21 mcg/act inh aer, 230-21 mcg/act inh aer, 45-21 mcg/act inh aer	2		QL(12 / 30)
ARALAST NP 1000 mg iv soln	4		PA
<i>benzonatate 100 mg cap, 200 mg cap</i>	1	TESSALON ZONATUSS	
<i>benzonatate 150 mg cap</i>	1		
BREYNA 160-4.5 mcg/act inh aer, 80-4.5 mcg/act inh aer	1		QL(10.2 / 30)
<i>budesonide-formoterol fumarate 160-4.5 mcg/act inh aer, 80-4.5 mcg/act inh aer</i>	1	SYMBICORT	QL(10.2 / 30)

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
CLARINEX-D 12 HOUR 2.5-120 mg tab er 12 hr	3		
DUAKLIR PRESSAIR 400-12 mcg/act inh aer pwdr br act	2		
FASENRA 30 mg/ml sc soln pfs	4		PA
FASENRA PEN 30 mg/ml sc soln auto-inj	4		PA
<i>fluticasone-salmeterol 100-50 mcg/act inh aer pwdr br act, 250-50 mcg/act inh aer pwdr br act, 500-50 mcg/act inh aer pwdr br act</i>	1	ADVAIR DISKUS	QL(60 / 30)
<i>fluticasone-salmeterol 113-14 mcg/act inh aer pwdr br act</i>	1	AIRDUO	
GILPHEX TR 10-388 mg tab	3		
<i>hydrocodolone polychlorophenol 10-8 mg/5ml susp er</i>	1	TUSSIONEX PENNKINETIC ER	
<i>hydrocodone bit-homatrop mbr 5-1.5 mg tab</i>	1	HYCODAN	
<i>hydrocodone bit-homatrop mbr 5-1.5 mg/5ml soln</i>	1	HYCODAN	
<i>hydromet 5-1.5 mg/5ml soln</i>	1	HYCODAN	
HYPERSAL 3.5 % inh neb soln, 7 % inh neb soln	3		
NEBUSAL 3 % inh neb soln, 6 % inh neb soln	3		
NUCALA 100 mg sc soln	4		PA
NUCALA 100 mg/ml sc soln auto-inj, 100 mg/ml sc soln pfs, 40 mg/0.4ml sc soln pfs	4		PA
PROLASTIN-C 1000 mg iv soln	4		PA
<i>promethazine vc/codeine 6.25-5-10 mg/5ml syr</i>	1		
<i>promethazine-codeine 6.25-10 mg/5ml soln, 6.25-10 mg/5ml syr</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>promethazine-dm 6.25-15 mg/5ml syr</i>	1		
<i>pseudoeph-bromphen-dm 30-2-10 mg/5ml syr</i>	1		
PULMOSAL 7 % inh neb soln	3		
<i>ribavirin 6 gm inh soln</i>	1	VIRAZOLE	
<i>sodium chloride 0.9 % inh neb soln, 10 % inh neb soln, 3 % inh neb soln</i>	1		
<i>sodium chloride 7 % inh neb soln</i>	1	HYPERSAL	
SYMBICORT 160-4.5 mcg/act inh aer, 80-4.5 mcg/act inh aer	2		QL(10.2 / 30)
VIRAZOLE 6 gm inh soln	3		
WIXELA INHUB 100-50 mcg/act inh aer pwdr br act, 250-50 mcg/act inh aer pwdr br act, 500-50 mcg/act inh aer pwdr br act	1		QL(60 / 30)
XOLAIR 150 mg sc soln	5		PA
ZEMAIRA 1000 mg iv soln	4		PA
Respiratory Tract/pulmonary Agents (combination Product) [Agentes Para El Tracto Respiratorio/Pulmonares (Productos En Combinación)]			
<i>g tussin ac 100-10 mg/5ml soln</i>	1		
<i>guaifenesin ac 100-10 mg/5ml syr</i>	1		
<i>guaifenesin-codeine 100-10 mg/5ml soln</i>	1		
<i>maxi-tuss ac 100-10 mg/5ml soln</i>	1		
<i>promethazine vc 6.25-5 mg/5ml syr</i>	1	PHENERGAN VC	
TUSNEL 60-30-400 mg tab	3		
SKELETAL MUSCLE RELAXANTS - DRUGS TO TREAT MUSCLE TENSION AND SPASM [RELAJANTES MUSCULOESQUELÉTICOS - MEDICAMENTOS PARA TRATAR LA TENSIÓN MUSCULAR Y ESPASMO]			

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
Skeletal Muscle Relaxants - Drugs For Muscle Pain And Spasm [Relajantes Musculares - Medicamentos Para Dolor Muscular Y Espasmo]			
AMRIX 15 mg cap er 24 hr, 30 mg cap er 24 hr	3		
carisoprodol 250 mg tab, 350 mg tab	1	SOMA	
chlorzoxazone 375 mg tab, 750 mg tab	1	LORZONE	
chlorzoxazone 500 mg tab	1	PARAFON FORTE	
cyclobenzaprine hcl 7.5 mg tab	1	FEXMID	
cyclobenzaprine hcl 10 mg tab, 5 mg tab	1	FLEXERIL	
cyclobenzaprine hcl er 15 mg cap er 24 hr, 30 mg cap er 24 hr	1	AMRIX	
enovarx-cyclobenzaprine hcl 20 mg/gm td crm	1		
FEXMID 7.5 mg tab	3		
metaxalone 800 mg tab	1	SKELAXIN	
methocarbamol 500 mg tab, 750 mg tab	1	ROBAXIN	
methocarbamol 1000 mg/10ml inj soln	1	ROBAXIN	
orphenadrine citrate 30 mg/ml inj soln	1	NORFLEX	
orphenadrine citrate er 100 mg tab er 12 hr	1	NORFLEX	
ROBAXIN 1000 mg/10ml inj soln	3		
SOMA 250 mg tab, 350 mg tab	3		
SLEEP DISORDER AGENTS - DRUGS FOR SEDATION AND SLEEP [AGENTES PARA TRASTORNOS DEL SUEÑO - MEDICAMENTOS PARA LA SEDACIÓN Y EL SUEÑO]			
Gaba Receptor Modulators - Drugs For Sleeping [Moduladores Del Receptor De Gaba - Medicamentos Para Dormir]			
AMBIEN 10 mg tab, 5 mg tab	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
AMBIEN CR 12.5 mg tab er, 6.25 mg tab er	3		
EDLUAR 10 mg tab subl, 5 mg tab subl	3		
<i>eszopiclone 1 mg tab, 2 mg tab, 3 mg tab</i>	1	LUNESTA	
<i>flurazepam hcl 15 mg cap, 30 mg cap</i>	1	DALMANE	
HALCION 0.25 mg tab	3		
LUNESTA 1 mg tab, 2 mg tab, 3 mg tab	3		
RESTORIL 15 mg cap, 22.5 mg cap, 30 mg cap, 7.5 mg cap	3		
<i>temazepam 15 mg cap, 22.5 mg cap, 30 mg cap, 7.5 mg cap</i>	1	RESTORIL	
<i>triazolam 0.125 mg tab, 0.25 mg tab</i>	1	HALCION	
<i>zaleplon 10 mg cap, 5 mg cap</i>	1	SONATA	
<i>zolpidem tartrate 10 mg tab, 5 mg tab</i>	1	AMBIEN	
<i>zolpidem tartrate 1.75 mg tab subl, 3.5 mg tab subl</i>	1	INTERMEZZO	
<i>zolpidem tartrate er 12.5 mg tab er, 6.25 mg tab er</i>	1	AMBIEN CR	
Sleep Disorders, Other - Drugs For Sleeping [Desórdenes Del Sueño, Otros - Medicamentos Para Dormir]			
<i>armodafinil 150 mg tab, 250 mg tab, 50 mg tab</i>	1	NUVIGIL	
<i>doxepin hcl 3 mg tab, 6 mg tab</i>	1	SILENOR	
<i>modafinil 100 mg tab, 200 mg tab</i>	1	PROVIGIL	
PROVIGIL 100 mg tab, 200 mg tab	3		
<i>ramelteon 8 mg tab</i>	1	ROZEREM	
ROZEREM 8 mg tab	3		
XYREM 500 mg/ml soln	5		PA

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
THERAPEUTIC NUTRIENTS/MINERALS/ELECTROLYTES [NUTRIENTES/MINERALES Y ELECTROLITOS TERAPÉUTICOS]			
Electrolyte/mineral Replacement - Vitamin, Mineral And Body Fluid Deficiency Drugs [Reemplazo De Electrolitos/Minerales - Medicamentos Para Deficiencia De Vitaminas, Minerales Y Fluidos Corporales]			
ADRENAL C FORMULA tab	3		
ASCOR 25000 mg/50ml iv soln	3		
<i>b-6 folic acid 8.333-100-1 mg cap</i>	1		
<i>bp vit 3 1 mg cap</i>	1		
BPROTECTED PEDIA POLY- VITE/FE 10 mg/ml soln	1		AL
CENFOL 2.3-24.5-2 mg tab	3		
CHROMAGEN cap	3		
CITRANATAL 90 DHA 90-1 & 300 mg oral misc	3		
CITRANATAL ASSURE 35-1 & 300 mg oral misc	3		
CITRANATAL B-CALM 20-1 MG & 2 x 25 mg oral misc	3		
CITRANATAL DHA 27-1 & 250 mg oral misc	3		
CITRANATAL HARMONY 27- 1-260 mg cap	3		
<i>c-nate dha 28-1-200 mg cap</i>	1		
<i>cod liver oil oral oil</i>	1		
<i>complete natal dha 29-1-200 & 200 mg oral misc</i>	1		
CORVITA 150 150-1.25 mg tab	3		
CORVITE 150 150-1.25 mg tab	3		
<i>corvite fe tab</i>	1		
DUET DHA 400 25-1 & 400 mg oral misc	3		
DUET DHA BALANCED 25-1 & 267 mg oral misc	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
EFFER-K 10 meq tab eff, 20 meq tab eff	3		
ELITE-OB 50-1.25 mg tab	3		
ENBRACE HR cap	3		
<i>fabb 2.2-25-1 mg tab</i>	1		
<i>fa-vitamin b-6-vitamin b-12 2.2-25-0.5 mg tab</i>	1		
FERRALET 90 90-1 mg tab	3		
FLORIVA 0.25 mg tab chew, 0.5 mg tab chew, 1 mg tab chew	3		
FOLGARD RX 2.2-25-1 mg tab	3		
<i>folplex 2.2 2.2-25-0.5 mg tab</i>	1		
FOLTRATE 500-1 mcg-mg tab	3		
GALZIN 25 mg cap, 50 mg cap	3		
HEMATOGEN FA 200-250-0.01-1 mg cap	3		
ICAR-C PLUS 100-250-0.025-1 mg tab	3		
INATAL GT tab	3		
IROSPAN 24/6 oral misc	3		
K-PHOS 500 mg tab	3		
MULTIGEN FOLIC 70-150-2-1 mg tab	3		
<i>multivitamin drops/iron 11 mg/ml soln</i>	1		AL
<i>multivitamin infant & toddler 11 mg/ml soln</i>	1		AL
<i>multivitamin/fluoride 0.25 mg tab chew, 1 mg tab chew</i>	1		
<i>multivitamin/fluoride 0.5 mg/ml soln</i>	1		
<i>multi-vitamin/fluoride 0.5 mg/ml soln</i>	1		
NASCOBAL 500 mcg/0.1ml nasal soln	3		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
NATACHEW 28-1 mg tab chew	3		
NEEVO DHA 27-1.13 mg cap	3		
NEPHRON FA tab	3		
NESTABS 32-1 mg tab	3		
NESTABS DHA 32-1 mg oral misc	3		
NICOMIDE 750-27-2-0.5 mg tab	3		
<i>nicotinamide 750-27-2-0.5 mg tab</i>	1		
OB COMPLETE 50-1.25 mg tab	3		
OB COMPLETE ONE 50-1- 476 mg cap	3		
OB COMPLETE PETITE 35- 5-1-200 mg cap	3		
OB COMPLETE PREMIER 30-20-1 mg tab	3		
OB COMPLETE/DHA 30-10- 1-200 mg cap	3		
<i>pc pediatric poly-vita/fe drop 10 mg/ml soln</i>	1		AL
<i>pnv-dha 27-0.6-0.4-300 mg cap</i>	1		
<i>pnv-dha+docosate 27-1.25- 300 mg cap</i>	1		
<i>pnv-omega 28-0.6-0.4-340 mg cap</i>	1		
<i>pnv-select 27-0.6-0.4 mg tab</i>	1		
POLY-VI-FLOR 0.25 mg tab chew, 1 mg tab chew	3		
POLY-VI-FLOR 0.25 mg/ml susp	3		
POLY-VI-FLOR/IRON 0.25-7 mg/ml susp	3		
POLY-VI-SOL/IRON 11 mg/ml soln	1		AL
<i>poly-vita/iron 10 mg/ml soln</i>	1		AL

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>poly-vite/iron 11 mg/ml soln</i>	1		AL
<i>pot & sod cit-cit ac 550-500-334 mg/5ml soln</i>	1		
<i>prena1 1.4 mg tab chew</i>	1		
<i>prena1 pearl 30-1.4-200 mg cap er</i>	1		
<i>prenaissance 29-1.25-325 mg cap</i>	1		
<i>prenaissance plus 28-1-250 mg cap</i>	1		
PRENATE 0.6-0.4 mg tab chew	3		
PRENATE AM 1 mg tab	3		
PRENATE DHA 18-0.6-0.4-300 mg cap	3		
PRENATE ELITE 20-0.6-0.4 mg tab	3		
PRENATE ENHANCE 28-0.6-0.4-400 mg cap	3		
PRENATE ESSENTIAL 18-0.6-0.4-300 mg cap	3		
PRENATE MINI 18-0.6-0.4-350 mg cap	3		
PRENATE PIXIE 10-0.6-0.4-200 mg cap	3		
PRENATE RESTORE 27-0.6-0.4-400 mg cap	3		
QUFLORA PEDIATRIC 0.25 mg tab chew, 1 mg tab chew	3		
QUFLORA PEDIATRIC 0.5 mg/ml soln	3		
<i>relnate dha 28-1-200 mg cap</i>	1		
SELECT-OB 29-0.6-0.4 mg tab chew, 29-1 mg tab chew	3		
SELECT-OB+DHA 29-1 & 250 mg oral misc	3		
<i>sodium fluoride 2.2 (1 F) mg tab chew</i>	1		AL
<i>taron forte cap</i>	1		

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Drug Name [Nombre del Medicamento]	Drug Tier [Nivel]	Reference Name [Nombre de Referencia]	Requirements/Limits ¹ [Requisitos/Límites]
<i>tricitrates 550-500-334 mg/5ml soln</i>	1		
<i>trigels-f forte 460-60-0.01-1 mg cap</i>	1		
TRINATE tab	3		
<i>tristart dha 31-0.6-0.4-200 mg cap</i>	1		
TRI-VI-FLOR 0.25 mg/ml susp, 0.5 mg/ml susp	3		
<i>tri-vi-floro 0.25 mg/ml susp, 0.5 mg/ml susp</i>	1		
VINATE CARE 40-1 mg tab chew	3		
VINATE DHA RF 27-1.13 mg cap	3		
VIRT-GARD 2.2-25-1 mg tab	3		
<i>virt-nate dha 28-1-200 mg cap</i>	1		
<i>virt-pn dha 27-0.6-0.4-300 mg cap</i>	1		
VITAFOL ULTRA 29-0.6-0.4-200 mg cap	3		
VITAFOL-NANO 18-0.6-0.4 mg tab	3		
VITAFOL-OB tab	3		
VITAFOL-OB+DHA 65-1 & 250 mg oral misc	3		
VITAFOL-ONE 29-1-200 mg cap	3		
VITAMEDMD ONE RX/QUATREFOLIC 30-0.6-0.4-200 mg cap	3		
VITAMEDMD REDICHEW RX 1.4 mg tab chew	3		
VITAMEZ 1 mg cap	3		
VITAPEARL 30-1.4-200 mg cap er	3		
VIVA DHA 28-1-200 mg cap	3		

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50+ adult eye health..... 104

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<i>acamprosate calcium</i>	25
<i>acarbose</i>	70
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<i>acebutolol hcl</i>	80
<i>acetaminophen-codeine</i>	22
<i>acetazolamide</i>	143
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<i>budesonide-formoterol fumarate</i>	152
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<i>buprenorphine hcl</i>	25
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<i>bupropion hcl er (sr)</i>	38
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<i>ceftazidime</i>	29
<i>ceftriaxone sodium</i>	29
<i>cefuroxime axetil</i>	29
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CELEBRATE MULTI-COMplete 36	105

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<i>chlordiazepoxide-amitriptyline</i>	41
<i>chlordiazepoxide-clidinium</i>	111
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<i>clindamycin phosphate</i>	27
<i>clindamycin-tretinoin</i>	95
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<i>clobazam</i>	34
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<i>clonazepam</i>	34
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<i>clorazepate dipotassium</i>	69
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<i>clotrimazole af</i>	43
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<i>sumatriptan succinate</i>	48
<i>sumatriptan succinate refill</i>	48
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<i>telmisartan-amlodipine</i>	85
<i>telmisartan-hctz</i>	85
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<i>temozolomide</i>	50
<i>temsirolimus</i>	135
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<i>tenofovir disoproxil fumarate</i>	67
<i>terazosin hcl</i>	117
<i>terbinafine hcl</i>	45
<i>terbutaline sulfate</i>	149
<i>terconazole</i>	45
<i>teriflunomide</i>	93
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<i>thiothixene</i>	62
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