



Senior Whole Health of New York NHC (HMO D-SNP)

2025 Pormularyo

(Listahan ng Sinaklaw na Mga Gamot o “Listahan ng Gamot”)

PAKIBASA: ANG DOKUMENTONG AY NAGLALAMAN NG IMPORMASYON TUNGKOL SA MGA GAMOT NA SINASAKLAW NAMIN SA PLANONG ITO

Naaprubahang Pormularyo ng Pagsumite ng File ID 00025316 ng HPMS

Na-update ang pormularyong ito noong 09/01/2025. Para sa higit pang kamakailang impormasyon o iba pang mga tanong, pakikontak ang Mga serbisyo para sa Miyembro ng Senior Whole Health of New York NHC sa (800) 665-3086 (dapat tumawag ang mga gumagamit ng TTY sa 711), Oktubre 1 – Marso 31: 7 araw sa isang linggo, 8 a.m. - 8 p.m., lokal na oras, Abril 1 - Setyembre 30: Lunes – Biyernes, 8 a.m. – 8 p.m., lokal na oras, o bisitahin ang SWHNY.com.

Paalala sa umiiral ng mga miyembro: Nabago ang Pormularyong ito mula noong nakaraang taon. Pakirepaso ang dokumentong ito para matiyak na naglalaman pa rin ito ng mga gamot na ginagamit mo.

Kapag tumutukoy ang Listahan ng Gamot (Pormularyo) na ito sa “kami,” “namin”, o “amin,” nangangahulugan itong Senior Whole Health. Kapag tumutukoy ito sa “plano” o “aming plano”, nangangahulugan itong Senior Whole Health of New York NHC.

Kabilang sa dokumentong ito ang Listahan ng Gamot (pormularyo) para sa plano namin na kasalukuyan mula pa noong 09/01/2025. Para sa na-update na Listahan ng Gamot (pormularyo), pakikontak kami. Ang aming impormasyon sa pakikipag-ugnayan, kasama ang petsa na huli naming na-update ang Listahan ng Gamot (pormularyo), ay makikita sa harapan at likurang mga pahina ng pabalat.

Kailangan mong pangkalahatang gamitin ang mga parmasya ng network para magamit ang benepisyo mong inireresetang gamot. Maaaring magbago ang mga benepisyo, pormularyo, parmasya ng network, at/o mga copayment/coinsurance sa Enero 1, 2025, at paminsan-minsan sa loob ng taon.

Ano ang Pormularyo ng Senior Whole Health of New York NHC?

Sa dokumentong ito, gumagamit kami ng mga terminong Listahan ng Gamot at pormularyo para mangahulugan nang pareho. Ang isang pormularyo ay isang listahan ng nasaklaw na mga gamot na pinili ng plano namin sa pakikipagsanggunian sa isang pangkat ng mga tagapagkaloob ng pangangalaga ng kalusugan, na kumakatawan sa mga naireresetang therapy na pinaniniwalaang kinakailangang bahagi ng kalidad na programa sa paggamot. Pangkalahatang sinasaklaw ng plano namin ang mga gamot na nakalista sa pormularyo namin basta medikal na kinakailangan ang gamot, pinupunan ang reseta sa isang parmasya ng network ng plano, at sinusunod ang iba pang mga tuntunin ng plano. Para sa higit pang impormasyon kung paano punan ang mga reseta mo, pakirepaso ang Ebidensya ng Pagsaklaw mo.

Maaari bang magbago ang pormularyo?

Karamihan nangyayari ang mga pagbabago sa pagsaklaw ng gamot sa Enero 1, ngunit ang maaaring magdagdag o magtanggal ng mga gamot sa pormularyo ang plano namin sa loob ng taon, ilipat ang mga ito sa ibang mga tier ng pagbabahagi sa gastos, o magdagdag ng bagong mga paghihigpit. Kailangan naming sundin ang mga tuntunin ng Medicare sa paggawa ng mga pagbabagong ito. Mga update sa pormularyo na buwanang napo-post sa website namin dito: SWHNY.com.

Mga pagbabago na maaaring makaapekto sa iyo ngayong taon: Sa mga kasu at ibaba, maaapektuhan ka ng mga pagbabago sa pagsaklaw sa loob ng taon:

- **Agarang mga kahalili ng ilang partikular na bagong mga bersyon ng may tatak na mga gamot at oriinal na biyolohikal na mga produkto.** Maaaring agad naming aalisin ang isang gamot sa pormularyo namin kung pinapalitan namin ito ng ilang partikular na bagong bersyon ng gamot na iyon na lilitaw sa pareho o mas mababang tier ng pagbabahagi sa gastos at may pareho o mas kaunting mga paghihigpit. Kung nagdaragdag kami ng bagong bersyon ng gamot sa pormularyo namin, maaaring magdesisyon kami na panatilihin ang may tatak na gamot o oriinal na biyolohikal na produkto sa pormularyo namin, ngunit agarang ililipat ito sa ibang tier ng pagbabahagi sa gastos o magdagdag ng bagong mga paghihigpit.

Maaari lang naming gawin ang agarang mga pagbabagong ito kung nagdaragdag kami ng bagong generic na bersyon ng may tatak na gamot, o nagdaragdag ng ilang partikular na bagong bismolar na mga bersyon ng isang oriinal na biyolohikal na produkto, na dati nang nasa pormularyo (halimbawa, pagdaragdag ng makapagpapalitang biosmolar ng makakapaghahilili sa isang oriinal na biyolohikal na produkto ng isang parmasya nang walang bagong reseta).

Kung kasalukuyan mong ginagamit ang may tatak na gamot o oriinal na biyolohikal na produkto, maaaring hindi namin sabihin sa iyo nang maaga bago namin gawin ang pagbabago kaagad, ngunit bibigyan ka namin ng impormasyon kinalaunan tungkol sa espesipikong (mga) pagbabagong ginawa namin.

Kung gagawa kami ng ganoong pagbabago, maaaring humiling ka o ang tagapagreseta mo sa amin na gumawa ng isang pagbubukod at patuloy na saklawin ang gamot na binabago para sa iyo. Para sa higit pang impormasyon, tingnan ang seksyon sa ibaba na pinamagatang “Paano ako hihiling ng pagbubukod sa Pormularyo ng Senior Whole Health of New York NHC?”

Maaaring bago sa iyo ang ilan sa mga uri ng gamot na ito. Para sa higit pang impormasyon, tingnan ang seksyon sa ibaba na pinamagatang “Ano ang oriinal na biyolohikal na mga produkto at paano nauugnay ang mga ito sa mga biosmolar?”

- **Tinanggal na mga gamot mula sa merkado.** Kung binawi mula sa pagbebenta ang isang gamot ng tagamanupaktura o pinagsayahan ng Administrasyon ng Pagkain at Gamot (FDA) na bawin para sa mga kadahilanang kaligtasan o pagging epektibo, maaari naming agarang aalisin ang gamot mula sa pormularyo namin at magbigay ng abiso kinalaunan sa mga miyembro na gumagamit sa gamot.
- **Iba pang mga pagbabago.** Maaari kaming gumawa ng iba pang mga pagbabago na nakakaapekto sa mga miyembro na kasalukuyang gumagamit ng gamot. Halimbawa, maaari naming alisin ang may tatak na gamot mula sa pormularyo kapag nagdaragdag ng generic na katumbas o alisin ang isang oriinal na biyolohikal na produkto kapag nagdaragdag ng biosimilar. Maaari ding maglapat kami ng bagong mga paghihigpit sa may tatak na gamot o oriinal na biyolohikal na produkto, o ilipat sa ibang tier ng pagbabahagi sa gastos, o pareho. Maaari kaming gumawa ng mga pagbabago batay sa bagong klinikal na mga patnubay. Kung aalisin namin mula sa pormularyo namin, idagdag ang paunang awtorisasyon, mga limitasyon sa dami at/o mga paghihigpit ng step therapy sa gamot, o ilipat ang gamot sa mas mataas na tier ng pagbabahagi sa gastos, dapat naming abisuhan ang apektadong mga miyembro sa pagbabago nang hindi bababa sa 30 araw bago magkakabisa ang pagbabago. Bilang kahalili, kapag humihiling ang miyembro ng muling pagpunan ng gamot, matatanggap nila ang 31-araw na suplay ng gamot at abiso ng pagbabago.

Kung gagawin namin ang iba pang mga pagbabagong ito, maaaring humiling ka o tagapagreseta mo sa amin na gumawa ng isang pagbubukod para sa iyo at patuloy na saklawin ang gamot na matagal mo ng ginagamit. Kabilang din ng abiso na ibibigay namin sa iyo ang impormasyon kung paano humiling ng pagbubukod, at mahahanap mo ang impormasyon sa seksyon sa ibaba na

pinamagatang “Paano ako hihiling ng pagbubukod sa Formularyo ng Senior Whole Health of New York NHC?”

Mga pagbabago na hindi makakaapekto sa iyo kung kasalukuyang ginagamit mo ang gamot. Sa pangkalahanan, kung gumagamit ka ng gamot sa 2025 na formularyo namin na sinaklaw sa simula ng taon, hindi namin ihihintay o bawasan ang pagsaklaw sa gamot sa loob ng 2025 na taon ng pagsaklaw maliban sa inilarawan sa itaas. Nangangahulugan ito na mananatiling handang magamit ang mga gamot na ito sa parehong pagbabahagi sa gastos at walang mga bagong paghihigpit para sa mga miyembreng gumagamit sa mga ito para sa natitirang bahagi ng taon ng pagsaklaw. Hindi ka makakatanggap ng direktang abiso sa taon na ito tungkol sa mga pagbabagong hindi nakakaapekto sa iyo. Gayunpaman, sa Enero 1 ng susunod na taon, maapektuhan ka ng mga naturang pagbabago, at mahalagang suriin ang formularyo para sa bagong taon ng benepisyo para sa anumang mga pagbabago sa mga gamot.

Kasalukuyan ang nakalakip na formularyo mula noong 09/01/2025. Para makatanggap ng na-update na impormasyon tungkol sa mga gamot na nasaklaw ng plano namin, pakikontak kami. Makikita ang impormasyon ng kontak namin sa harapan at likurang mga pahina ng pabalat.

Paano ko gagamitin ang Formularyo?

May dalawang paraan para hanapin ang gamot mo sa formularyo:

Medikal na Kondisyon

Nagsisimula ang formularyo sa pahina 8. Ang mga gamot sa formularyo na ito ay nakapangkat ayon sa mga kategorya depende sa uri ng medikal na kondisyon kung saan ginagamit ang mga ito para gumamot. Halimbawa, nakalista ang mga gamot na ginagamit para gamutin ang kondisyon ng puso sa ilalim ng kategoryang, Cardiovascular. Kung alam mo kung para saan ginagamit ang gamot mo, hanapin ang pangalan ng kategorya sa listahan na nagsisimula sa 8. Pagkatapos tumingin sa ilalim ng pangalan ng kategorya para sa gamot mo.

Alphabetikong Listahan

Kung hindi ka sigurado kung anong kategorya ang hahanapin, dapat mong hanapin ang gamot mo sa Indeks na nagsisimula sa pahina 93. Nagbibigay ang Indeks ng alphabetikong listahan ng lahat ng mga gamot na kabilang sa dokumentong ito. Parehong nakalista sa Indeks ang mga gamot na may tatak at generic na gamot. Tumingin sa Indeks at hanapin ang gamot mo. Sa tabi ng gamot mo, makikita mo ang numero ng pahina kung saan mo mahahanap ang impormasyon sa pagsaklaw. Pumunta sa pahinang nakalista sa Indeks at hanapin ang pangalan ng gamot mo sa unang hanay ng listahan.

Ano ang mga generic na gamot?

Sinasaklaw ng plano namin ang parehong mga gamot na may tatak at mga generic na gamot. Inaprubaan ng FDA ang generic na gamot bilang may parehong aktibong sangkap tulad ng may tatak na gamot. Sa pangkalahanan, gumagana ang generic na mga gamot kagaya ng sa at karaniwang mas mababa ang gastos kaysa sa may tatak na mga gamot. May magagamit na mga kahaliling generic na gamot para sa maraming may tatak na mga gamot. Karaniwang mahahalinhan ang generic na gamot ang may tatak na mga gamot sa parasya nang hindi kinakailangan ng bagong reseta, depende sa mga batas ng estado.

Ano ang mga orihinal na biological na produkto at paano ito nauugnay sa mga biosimilar?

Sa pormularyo, kapag binabanggit namin ang mga gamot, maaari itong mangahulugan ng isang gamot o isang biyolohikal na produkto. Ang mga biological na produkto ay mga gamot na mas kumplikado kaysa sa mga tipikal na gamot. Dahil ang mga biological na produkto ay mas kumplikado kaysa sa mga tipikal na gamot, sa halip na magkaroon ng generic na anyo, mayroon itong mga anyo na tinatawag na mga biosimilar. Sa pangkalahanan, gumagana ang mga biosimilar gaya ng orihinal na biological na produkto at maaaring mas mura. May mga biosimilar na alternatibo para sa ilang orihinal na biological na produkto. Ang ilang mga biosimilar ay maaaring palitan at, depende sa mga batas ng estado, maaaring palitan para sa orihinal na biological na produkto sa parasya nang hindi nangangailangan ng bagong reseta, tulad ng mga generic na gamot na maaaring palitan para sa mga branded na gamot.

- Para sa talakayan ng mga uri ng gamot, pakitingnan ang Ebidensya ng Pagsaklaw, Kabanata 5, Seksyon 3.1, isinasalaysay ng “Ang ‘Listahan ng Gamot’ kung aling mga gamot ng Bahagi D ang nasaklaw.”

Mayroon bang anumang mga paghihigpit sa pagsaklaw ko?

Ang ilang mga nasaklaw na gamot ay maaaring may mga karagdagang kinakailangan o limitasyon sa pagsaklaw. Maaaring kabilang sa mga kinakailangan at limitasyong ito ang:

- Paunang Awtorisasyon:** Ang aming plano ay hinihiling sa iyo o doktor mo na kumuha ng paunang awtorisasyon para sa ilang mga gamot. Nangangahulugan ito na kakailanganin mong kumuha ng pag-apruba mula sa plano namin bago mo punan ang mga reseta mo. Kung hindi ka kukuha ng pag-apruba, maaaring hindi saklawin ng plano namin ang gamot.
- Mga Limitasyon sa Dami:** Para sa ilang mga gamot, nililimitahan ng pano namin ang dami ng gamot na sasaklawin ng plano namin. Halimbawa, nagbibigay ang plano namin ng 30 tableta bawat 30 araw bawat reseta para sa esomeprazole 40 mg. Maaaring karagdagan ito sa karaniwang isang buwan o tatlong buwan na supply.
- Hakbang Therapy:** Sa ilang mga kaso, hinihiling sa iyo ng plano namin na subukan muna ang ilang mga gamot para gamutin ang medikal na kondisyon mo bago namin sasaklawin ang isa pang gamot para sa kondisyong iyon. Halimbawa, kung ang parehong ginagamot ng Gamot A at Gamot B ang medikal na kondisyon mo, maaaring hindi saklawin ng plano namin ang Gamot B maliban kung susubukan mo muna ang Gamot A. Kung hindi gumagana ang Gamot A sa iyo, sasaklawin na ng plano namin ang Gamot B.

Maaari mong alamin kung mayroong karagdagang mga kinakailangan o limitasyon ang gamot mo sa pamamagitan ng pagtingin sa pormularyo na nagsisimula sa pahina 8. Maaari ka ring makakuha ng higit pang impormasyon tungkol sa nalapat na mga paghihigpit sa espesipikong nasaklaw na mga gamot sa pamamagitan ng pagbisita sa website namin. Nag-post kami ng mga online na dokumento na nagpapaliwanag sa paunang pahintulot namin at mga paghihigpit sa step therapy. Pwede rin kayong humiling sa amin na padalhan kayo ng isang kopya. Ang aming impormasyon sa pakikipag-ugnayan, kasama ang petsa na huli naming na-update ang pormularyo, ay makikita sa harapan at likurang mga pahina ng pabalat.

Maaari mong hilingin sa plano namin na gumawa ng pagbubukod sa mga paghihigpit o limitasyon na ito o para sa isang listahan ng ibang, kaparehong mga gamot na maaaring makagamot sa kondisyon ng kalusugan

mo. Tingnan ang seksyon, “Paano ako hihiling ng pagbubukod sa Formularyo ng Senior Whole Health of New York NHC?” sa pahina 5 para sa impormasyon tungkol sa kung paano humiling ng isang pagbubukod.

Paano kung wala sa Formularyo ang gamot ko?

Kung hindi kasama ang gamot mo sa formularyong ito (listahan ng nasaklaw na mga gamot), dapat kontakin mo muna ang Mga Serbisyo sa Miyembro at tanunin kung nasaklaw ang gamot.

Kung nalaman mong hindi sinaklaw ng plano namin ang gamot mo, mayroong kung dalawang mga opsyon:

- Maaari kang humiling sa Mga Serbisyo sa Miyembro para sa isang listahan ng katulad na mga gamot na nasaklaw ng plano namin. Kapag natanggap mo ang listahan, ipakita ito sa doktor mo at hilingin sa kanila na magreseta ng katulad na gamot na nasaklaw ng plano namin.
- Maaari mong hilingin sa plano namin na gumawa ng pagbubukod at saklawin ang gamot mo. Tingnan ang nasa ibaba para sa impormasyon tungkol sa kung paano humiling ng isang pagbubukod.

Paano ako hihiling ng isang pagbubukod sa Formularyo ng Senior Whole Health of New York NHC?

Maaari mong hilingin sa plano namin na gumawa ng pagbubukod sa mga tuntunin ng pagsaklaw namin. Mayroong ilang mga uri ng mga pagbubukod na maaari mong hilingin na gawin namin.

- Maaari mong hilingin sa amin na saklawin ang isang gamot kahit na wala ito sa formularyo namin. Kung inaprubahan, masasaklaw ang gamot na ito sa naunang natukoy na antas ng pagbabahagi sa gastos, at hindi mo mahihiling sa amin na ibigay ang gamot sa mas mababang antas ng pagbabahagi sa gastos.
- Maaari mong hilingin sa amin na i-waive ang paghihigpit ng pagsaklaw kabilang ang paunang awtorisasyon, step therapy, o limitasyon sa dami sa gamot mo. Halimbawa, para sa ilang mga gamot, nilimitahan ng plano namin ang dami ng gamot na sasaklawin namin. Kung may limitasyon sa kung gaano karami ang gamot mo, maaari mong hilingin sa amin na iurong ang limitasyon at saklawin ang mas higit pa.
- Maaari mong hilingin sa amin na saklawin ang gamot ng formularyo at pababawasan ang antas ng pagbabahagi sa gastos maliban kung nasa may espesyalidad na tier ang gamot. Kung naaprubahan, pabababaan nito ang halaga na dapat mong bayaran para sa gamot mo.

Sa pangkalahatan, aaprubahan lamang ng plano namin ang kahilingan mo para sa isang pagbubukod kung ang kahaliling mga gamot na kabilang sa formularyo ng plano, ang mas mababang pagbabahagi sa gastos na gamot, o ang paglapat sa paghihigpit ay hindi magiging kasing epektibo para sa iyo at/o maaaring maging sanhi ng pagkakaroon mo ng mga masamang epekto.

Ikaw at ang tagapagreseta mo ay dapat kontakin kami humiling para sa pagti-tier o, pagbubukod sa formularyo, kabilang ang pagbubukod sa paghihigpit sa pagsaklaw. **Kapag humiling ka ng pagbubukod, kakailanganing ipaliwanag ng tagapagreseta mo ang medikal na mga dahilan kung bakit kailangan mo ng pagbubukod.** Sa pangkalahatan, dapat kaming gumawa ng desisyon namin sa loob ng 72 oras ng pagtanggap sa sumusuportang pahayag ng tagapagreseta mo. Maaari kang humiling ng pinabilis (mabilis) na desisyon kung naniniwala ka, at sumag-ayon kami, na maaaring malubhang mapinsala ang kalusugan mo sa

paghintay ng hanggang sa 72 oras para sa isang desisyon. Kung sasang-ayon kami, o kung humihiling ang tagapagreseta mo para sa mabilis na desisyon, dapat naming ibigay sa ito ang desisyon ng hindi baba sa 24 oras pagkatapos naming makuha ang sumusuportang pahayag ng tagapagreseta mo.

Ano ang magagawa ko kung wala sa pormularyo o may paghihigpit ang gamot ko?

Bilang isang bago o nagpapatuloy na miyembro sa plano namin, maaaring gumagamit ka ng mga gamot na wala sa pormularyo namin. O, maaaring gumagamit ka ng gamot na nasa pormularyo namin ngunit may paghihigpit sa pagsaklaw, gaya ng paunang awtorisasyon. Dapat kausapin mo ang tagapagreseta mo tungkol sa paghiling ng desisyon sa pagsaklaw para ipakita na natutugunan mo ang pamantayan para sa pag-aprubahan, paglipat sa isang kahaliling gamot na sinasaklaw namin, o paghiling ng pagbubukod sa pormularyo para masaklaw namin ang gamot na ginagamit mo. Habang nakikipag-usap ka sa doktor mo para tukuyin ang tamang tatahaking pagkilos para sa iyo, maaari naming saklawin ang gamot mo sa ilang mga kaso sa unang 90 araw sa pagging miyembro mo sa plano namin.

Para sa bawat gamot mo na wala sa pormularyo namin o may paghihigpit sa pagsaklaw, sasaklawin namin ang pansamantalang 31-araw na supply. Kung niresetahan kayo para sa mas kaunting araw, pahihintulutan namin ang maramihang mga refill upang bigyan kayo ng hanggang sa maximum na 31 araw na supply ng paggamot. Kung hindi naaprubahan ang pagsaklaw, pagkatapos ng unang 31-araw na suplay mo, hindi na kami magbabayad para sa mga gamot na ito, kahit na naging miyembro ka ng plano nang mas mababa sa 90 araw.

Kung residente ka ng isang pasilidad ng pangmatagalang pangangalaga at kailangan mo ng isang gamot na wala sa pormularyo namin kung limitado ang kakayahan mong makakuha ng mga gamot mo, ngunit nalampasan mo na ang unang 90 araw ng pagging miyembro sa plano namin, sasaklawin namin ang 31-araw na emerhensiya supply ng gamot habang nagsisikap ka para sa pagbubukod sa pormularyo.

Para sa higit pang impormasyon

Para sa higit pang nakadetalyeng impormasyon tungkol sa pagsaklaw ng naireresetang gamot ng plano, pakirepaso ang Ebidensya ng Pagsaklaw mo at ibang mga materyales ng plano.

Kung mayroon kang mga tanong tungkol sa plano namin, pakikontak kami. Ang aming impormasyon sa pakikipag-ugnayan, kasama ang petsa na huli naming na-update ang pormularyo, ay makikita sa harapan at likurang mga pahina ng pabalat.

Kung mayroon kang pangkalahatang mga tanong tungkol sa pagsaklaw ng naireresetang gamot ng Medicare, pakitawagan ang Medicare sa 1-800-MEDICARE (1-800-633-4227) 24 oras sa isang araw/7 araw sa isang linggo. Dapat tumawag ang mga gumagamit ng TTY sa 1-877-486-2048. O, bisitahin ang <http://www.medicare.gov>.

Pormularyo ng Senior Whole Health of New York NHC

Nagbibigay ang pormularyo sa ibaba ng impormasyon ng pagsaklaw tungkol sa nasaklaw na mga gamot ng plano namin. Kung nahihirapan kang hanapin ang gamot mo sa listahan, pumunta sa Indeks na nagsisimula sa pahina 93.

Nakalista sa unang hanay ng tsart na ito ang pangalan ng gamot. Naisulat sa malaking titik ang mga gamot na may tatak (hal. CIPRO) at nakalista sa italikong maliit na titik ang generic (hal. ciprofloxacin).

Ipinapaalam sa iyo ng impormasyon sa hanay ng Mga Kinakailangan/Limitasyon kung mayroong mga espesyal na kinakailangan ang plano namin para sa pagsaklaw ng gamot mo.

PA = Paunang Awtorisasyon (pag-apruba): dapat mayroon kang pag-apruba bago mo makuha ang gamot na ito.

QL = Mga Limitasyon sa Dami: ang halaga ng gamot na sasaklawin ng plano.

ST = Step Therapy Criteria: kailangan mong sumubok ng ibang gamot bago mo makuha ang isang ito.

NM = Non-Mail Order: ang gamot na ito ay hindi maaaring punan sa pamamagitan ng mail order.

B/D = Ang gamot na ito ay maaaring saklawin sa ilalim ng Medicare Part B o D depende sa mga pangyayari.

LA = Limitadong Access na Gamot: ang gamot na ito ay maaaring makuha lamang sa ilang partikular na parasya.

_ = Non-Part D na Gamot, o OTC na mga bagay na sakop ng Medicaid.

NDS = Non-Extended Days Supply: lilimitahan ka sa kung ilang araw na supply ang matatanggap mo.

MOLINA_CY25_5T_SNP eff 09/01/2025**Drug Name****Drug Tier Requirements/Limits****ANALGESICS****GOUT**

<i>allopurinol</i> TABS 100mg, 300mg	1	
<i>colchicine</i> CAPS .6mg	3	QL (60 caps / 30 days)
<i>colchicine</i> TABS .6mg	2	QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	3	
<i>MITIGARE</i> CAPS .6mg	3	QL (60 caps / 30 days)
<i>probenecid</i> TABS 500mg	3	

MISCELLANEOUS

<i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2%	3	B/D
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NSAIDS

<i>celecoxib</i> CAPS 50mg, 100mg, 200mg	3	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	3	QL (30 caps / 30 days)
<i>diclofenac potassium</i> TABS 50mg	2	QL (120 tabs / 30 days)
<i>diclofenac sodium</i> TB24 100mg	3	
<i>diclofenac sodium</i> TBEC 25mg, 50mg, 75mg	2	
<i>diflunisal</i> TABS 500mg	3	
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	3	
<i>flurbiprofen</i> TABS 100mg	3	
<i>ibu</i> TABS 400mg, 600mg, 800mg	1	
<i>ibuprofen</i> SUSP 100mg/5ml	3	
<i>ibuprofen</i> TABS 400mg, 600mg, 800mg	1	
<i>meloxicam</i> TABS 7.5mg, 15mg	1	
<i>nabumetone</i> TABS 500mg, 750mg	2	
<i>naproxen</i> TABS 250mg, 375mg, 500mg	1	
<i>naproxen</i> TBEC 375mg	2	QL (120 tabs / 30 days)
<i>naproxen dr</i> TBEC 500mg	4	QL (90 tabs / 30 days)
<i>naproxen sodium</i> TABS 275mg, 550mg	3	
<i>piroxicam</i> CAPS 10mg, 20mg	3	
<i>sulindac</i> TABS 150mg, 200mg	2	

OPIOID ANALGESICS, LONG-ACTING

<i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	2	QL (4 patches / 28 days), PA
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	4	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg	4	QL (30 tabs / 30 days), PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name		Drug Tier	Requirements/Limits
hydrocodone bitartrate T24A 100mg, 120mg		5	NDS, QL (30 tabs / 30 days), PA
methadone hcl SOLN 5mg/5ml, 10mg/5ml		3	QL (450 mL / 30 days), PA
methadone hcl TABS 5mg, 10mg		3	QL (90 tabs / 30 days), PA
methadone hydrochloride i CONC 10mg/ml		3	QL (90 mL / 30 days), PA
morphine sulfate TBCR 15mg, 30mg, 60mg, 100mg, 200mg		3	QL (90 tabs / 30 days), PA
OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg, 40mg, 60mg, 80mg		3	QL (60 tabs / 30 days), PA
OPIOID ANALGESICS, SHORT-ACTING			
acetaminophen w/ codeine soln 120-12 mg/5ml		2	QL (2700 mL / 30 days)
acetaminophen w/ codeine tab 300-15 mg		2	QL (400 tabs / 30 days)
acetaminophen w/ codeine tab 300-30 mg		2	QL (360 tabs / 30 days)
acetaminophen w/ codeine tab 300-60 mg		2	QL (180 tabs / 30 days)
butorphanol tartrate SOLN 1mg/ml, 2mg/ml		4	
endocet tab 2.5-325mg		3	QL (360 tabs / 30 days)
endocet tab 5-325mg		3	QL (360 tabs / 30 days)
endocet tab 7.5-325mg		3	QL (240 tabs / 30 days)
endocet tab 10-325mg		3	QL (180 tabs / 30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml		4	QL (2700 mL / 30 days)
hydrocodone-acetaminophen tab 5-325 mg		3	QL (240 tabs / 30 days)
hydrocodone-acetaminophen tab 7.5-325 mg		3	QL (180 tabs / 30 days)
hydrocodone-acetaminophen tab 10-325 mg		3	QL (180 tabs / 30 days)
hydrocodone-ibuprofen tab 7.5-200 mg		3	QL (150 tabs / 30 days)
hydromorphone hcl LIQD 1mg/ml		4	QL (600 mL / 30 days)
hydromorphone hcl TABS 2mg, 4mg, 8mg		3	QL (180 tabs / 30 days)
morphine sulfate SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml		4	B/D
morphine sulfate SOLN 10mg/5ml, 20mg/5ml		3	QL (900 mL / 30 days)
morphine sulfate SOLN 100mg/5ml		3	QL (180 mL / 30 days)
morphine sulfate TABS 15mg, 30mg		3	QL (180 tabs / 30 days)
nalbuphine hcl SOLN 10mg/ml, 20mg/ml		4	
oxycodone hcl CONC 100mg/5ml		4	QL (180 mL / 30 days)
oxycodone hcl SOLN 5mg/5ml		4	QL (900 mL / 30 days)
oxycodone hcl TABS 5mg, 10mg, 15mg, 20mg, 30mg		3	QL (180 tabs / 30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg		3	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 5-325 mg		3	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg		3	QL (240 tabs / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	3	QL (180 tabs / 30 days)
<i>tramadol hcl TABS 50mg</i>	2	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	2	QL (240 tabs / 30 days)

ANTI-INFECTIVES

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole TABS 200mg</i>	5	NDS, QL (672 tabs / year), PA
<i>amikacin sulfate SOLN 1gm/4ml, 500mg/2ml</i>	4	
<i>ARIKAYCE SUSP 590mg/8.4ml</i>	5	NDS, NM, PA
<i>atovaquone SUSP 750mg/5ml</i>	4	QL (300 mL / 30 days), PA
<i>aztreonam SOLR 1gm, 2gm</i>	4	
<i>CAYSTON SOLR 75mg</i>	5	NDS, NM, PA
<i>clindamycin hcl CAPS 75mg, 150mg, 300mg</i>	2	
<i>clindamycin palmitate hydrochloride SOLR 75mg/5ml</i>	4	
<i>clindamycin phosphate SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml</i>	3	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	4	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	4	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	4	
<i>CLINDMYC/NAC INJ 300/50ML</i>	4	
<i>CLINDMYC/NAC INJ 600/50ML</i>	4	
<i>CLINDMYC/NAC INJ 900/50ML</i>	4	
<i>colistimethate sodium SOLR 150mg</i>	4	
<i>dapsone TABS 25mg, 100mg</i>	3	
<i>DAPTOMYCIN SOLR 350mg</i>	5	NDS
<i>daptomycin SOLR 350mg, 500mg</i>	5	NDS
<i>EMVERM CHEW 100mg</i>	5	NDS, QL (12 tabs / year)
<i>ertapenem sodium SOLR 1gm</i>	3	
<i>gentamicin in saline inj 0.8 mg/ml</i>	3	
<i>gentamicin in saline inj 1 mg/ml</i>	3	
<i>gentamicin in saline inj 1.2 mg/ml</i>	3	
<i>gentamicin in saline inj 1.6 mg/ml</i>	3	
<i>gentamicin in saline inj 2 mg/ml</i>	3	
<i>gentamicin sulfate SOLN 10mg/ml, 40mg/ml</i>	3	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	3	
IMPAVIDO CAPS 50mg	5	NDS, PA
<i>ivermectin TABS 3mg</i>	3	QL (12 tabs / 90 days), PA
<i>ivermectin TABS 6mg</i>	3	QL (10 tabs / 90 days), PA
<i>linezolid SOLN 600mg/300ml</i>	4	
<i>linezolid SUSR 100mg/5ml</i>	5	NDS, QL (1800 mL / 30 days)
<i>linezolid TABS 600mg</i>	4	QL (60 tabs / 30 days)
LINEZOLID INJ 2MG/ML	4	
<i>meropenem SOLR 1gm, 2gm, 500mg</i>	4	
<i>methenamine hippurate TABS 1gm</i>	3	
<i>metronidazole SOLN 500mg/100ml</i>	3	
<i>metronidazole TABS 250mg, 500mg</i>	1	
<i>neomycin sulfate TABS 500mg</i>	2	
<i>nitazoxanide TABS 500mg</i>	5	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal CAPS 50mg, 100mg</i>	3	
<i>nitrofurantoin monohyd macro CAPS 100mg</i>	3	
<i>pentamidine isethionate inh SOLR 300mg</i>	4	B/D
<i>pentamidine isethionate inj SOLR 300mg</i>	4	
<i>polymyxin b sulfate SOLR 500000unit</i>	4	
<i>praziquantel TABS 600mg</i>	4	
<i>pyrimethamine TABS 25mg</i>	5	NDS, QL (90 tabs / 30 days), PA
<i>streptomycin sulfate SOLR 1gm</i>	5	NDS
<i>sulfadiazine TABS 500mg</i>	5	NDS
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	4	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	3	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>tinidazole TABS 250mg, 500mg</i>	3	
TOBI PODHALER CAPS 28mg	5	NDS, NM, PA
<i>tobramycin NEBU 300mg/5ml</i>	5	NDS, NM, PA
<i>tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml</i>	3	
<i>trimethoprim TABS 100mg</i>	3	
<i>vancomycin hcl CAPS 125mg</i>	4	QL (80 caps / 180 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl</i> CAPS 250mg	4	QL (160 caps / 180 days)
<i>vancomycin hcl</i> SOLR 1gm, 1.25gm, 1.5gm, 5gm, 10gm, 500mg, 750mg	4	
VANCOMYCIN INJ 1 GM	4	
VANCOMYCIN INJ 500MG	4	
VANCOMYCIN INJ 750MG	4	
ANTIFUNGALS		
ABELCET SUSP 5mg/ml	4	B/D
<i>amphotericin b</i> SOLR 50mg	4	B/D
<i>amphotericin b liposome</i> SUSR 50mg	5	NDS, B/D
<i>caspofungin acetate</i> SOLR 50mg, 70mg	4	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg	3	
<i>fluconazole</i> TABS 100mg, 150mg, 200mg	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	3	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	3	
<i>flucytosine</i> CAPS 250mg, 500mg	5	NDS, PA
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	4	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	4	
<i>itraconazole</i> CAPS 100mg	4	PA
<i>ketoconazole</i> TABS 200mg	3	PA
<i>micafungin sodium</i> SOLR 50mg, 100mg	4	
<i>nystatin</i> TABS 500000unit	3	
<i>posaconazole</i> SUSP 40mg/ml	5	NDS, QL (630 mL / 30 days), PA
<i>posaconazole</i> TBEC 100mg	5	NDS, QL (93 tabs / 30 days), PA
<i>terbinafine hcl</i> TABS 250mg	1	QL (30 tabs / 30 days), PA; PA applies after a 90 day supply in a calendar year
<i>voriconazole</i> SOLR 200mg	4	PA
<i>voriconazole</i> SUSR 40mg/ml	5	NDS, QL (600 mL / 28 days), PA
<i>voriconazole</i> TABS 50mg	4	QL (480 tabs / 30 days)
<i>voriconazole</i> TABS 200mg	4	QL (120 tabs / 30 days)
ANTIMALARIALS		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	4	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	4	
<i>chloroquine phosphate</i> TABS 250mg, 500mg	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
COARTEM TAB 20-120MG	4	
<i>mefloquine hcl</i> TABS 250mg	3	
<i>primaquine phosphate</i> TABS 26.3mg	3	
PRIMAQUINE PHOSPHATE TABS 26.3mg	3	
<i>quinine sulfate</i> CAPS 324mg	4	PA
ANTIRETROVIRAL AGENTS		
<i>abacavir sulfate</i> SOLN 20mg/ml	4	NM
<i>abacavir sulfate</i> TABS 300mg	3	NM
APTIVUS CAPS 250mg	5	NDS, NM
<i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg	4	NM
<i>darunavir</i> TABS 600mg	5	NDS, QL (60 tabs / 30 days), NM
<i>darunavir</i> TABS 800mg	5	NDS, QL (30 tabs / 30 days), NM
EDURANT TABS 25mg	5	NDS, NM
EDURANT PED TBSO 2.5mg	5	NDS, NM
<i>efavirenz</i> TABS 600mg	4	NM
<i>emtricitabine</i> CAPS 200mg	3	NM
EMTRIVA SOLN 10mg/ml	4	NM
<i>etravirine</i> TABS 100mg, 200mg	5	NDS, NM
<i>fosamprenavir calcium</i> TABS 700mg	5	NDS, NM
FUZEON SOLR 90mg	5	NDS, NM
INTELENCE TABS 25mg	4	NM
ISENTRESS CHEW 25mg	4	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	5	NDS, NM
ISENTRESS HD TABS 600mg	5	NDS, NM
<i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg	3	NM
<i>maraviroc</i> TABS 150mg, 300mg	5	NDS, NM
<i>nevirapine</i> SUSP 50mg/5ml; TB24 400mg	4	NM
<i>nevirapine</i> TABS 200mg	2	NM
NORVIR PACK 100mg	4	NM
PIFELTRO TABS 100mg	5	NDS, NM
PREZISTA SUSP 100mg/ml	5	NDS, QL (400 mL / 30 days), NM
PREZISTA TABS 75mg	4	QL (480 tabs / 30 days), NM
PREZISTA TABS 150mg	5	NDS, QL (240 tabs / 30 days), NM
REYATAZ PACK 50mg	5	NDS, NM
<i>ritonavir</i> TABS 100mg	3	NM

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Drug Name	Drug Tier	Requirements/Limits
RUKOBIA TB12 600mg	5	NDS, NM
SELZENTRY SOLN 20mg/ml	5	NDS, NM
SUNLENCA TABS 300mg; TBPK 300mg	5	NDS, NM
<i>tenofovir disoproxil fumarate</i> TABS 300mg	3	NM
TIVICAY TABS 10mg	3	NM
TIVICAY TABS 25mg, 50mg	5	NDS, NM
TIVICAY PD TBSO 5mg	5	NDS, NM
TROGARZO SOLN 200mg/1.33ml	5	NDS, NM
TYBOST TABS 150mg	3	NM
VIRACEPT TABS 250mg, 625mg	5	NDS, NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	5	NDS, NM
<i>zidovudine</i> CAPS 100mg; SYRP 50mg/5ml	4	NM
<i>zidovudine</i> TABS 300mg	3	NM

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	3	NM
BIKTARVY TAB 30-120-15 MG	5	NDS, NM
BIKTARVY TAB 50-200-25 MG	5	NDS, NM
CIMDUO TAB 300-300	5	NDS, NM
COMPLERA TAB	5	NDS, NM
DELSTRIGO TAB	5	NDS, NM
DESCOVY TAB 120-15MG	5	NDS, NM
DESCOVY TAB 200/25MG	5	NDS, NM
DOVATO TAB 50-300MG	5	NDS, NM
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	5	NDS, NM
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	5	NDS, NM
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	5	NDS, NM
<i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	4	NM
EVOTAZ TAB 300-150	5	NDS, NM
GENVOYA TAB	5	NDS, NM
JULUCA TAB 50-25MG	5	NDS, NM

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Drug Name	Drug Tier	Requirements/Limits
KALETRA SOL	4	NM
<i>lamivudine-zidovudine tab 150-300 mg</i>	4	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	4	NM
<i>lopinavir-ritonavir tab 100-25 mg</i>	4	NM
<i>lopinavir-ritonavir tab 200-50 mg</i>	4	NM
ODEFSEY TAB	5	NDS, NM
PREZCOBIX TAB 800-150	5	NDS, NM
STRIBILD TAB	5	NDS, NM
SYMTUZA TAB	5	NDS, NM
TRIUMEQ PD TAB	3	NM
TRIUMEQ TAB	5	NDS, NM
ANTITUBERCULAR AGENTS		
cycloserine CAPS 250mg	5	NDS
<i>ethambutol hcl TABS 100mg, 400mg</i>	3	
<i>isoniazid SYRP 50mg/5ml</i>	4	
<i>isoniazid TABS 100mg, 300mg</i>	1	
PRIFTIN TABS 150mg	4	
<i>pyrazinamide TABS 500mg</i>	4	
<i>rifabutin CAPS 150mg</i>	4	
<i>rifampin CAPS 150mg, 300mg</i>	3	
<i>rifampin SOLR 600mg</i>	4	
SIRTURO TABS 20mg, 100mg	5	NDS, NM, PA
TRECATOR TABS 250mg	4	
ANTIVIRALS		
acyclovir CAPS 200mg; TABS 400mg, 800mg	2	
acyclovir SUSP 200mg/5ml	4	
<i>acyclovir sodium SOLN 50mg/ml</i>	4	B/D
<i>adefovir dipivoxil TABS 10mg</i>	4	NM
BARACLUDE SOLN .05mg/ml	5	NDS, NM, ST
<i>entecavir TABS .5mg, 1mg</i>	4	NM
EPCLUS USA PAK 150-37.5	5	NDS, NM, PA
EPCLUS USA PAK 200-50MG	5	NDS, NM, PA
EPCLUS USA TAB 200-50MG	5	NDS, NM, PA
EPCLUS USA TAB 400-100	5	NDS, NM, PA
<i>famciclovir TABS 125mg, 250mg, 500mg</i>	3	
<i>ganciclovir sodium SOLR 500mg</i>	4	B/D
HARVONI PAK 33.75-150MG	5	NDS, NM, PA
HARVONI PAK 45-200MG	5	NDS, NM, PA
HARVONI TAB 45-200MG	5	NDS, NM, PA
HARVONI TAB 90-400MG	5	NDS, NM, PA
<i>lamivudine (hbv) TABS 100mg</i>	4	NM

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Drug Name	Drug Tier	Requirements/Limits
LIVTENCITY TABS 200mg	5	NDS, QL (336 tabs / 28 days), NM, PA
MAVYRET PAK 50-20MG	5	NDS, NM, PA
MAVYRET TAB 100-40MG	5	NDS, NM, PA
<i>oseltamivir phosphate</i> CAPS 30mg	3	QL (168 caps / year)
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	3	QL (84 caps / year)
<i>oseltamivir phosphate</i> SUSR 6mg/ml	3	QL (1080 mL / year)
PAXLOVID PAK	2	QL (22 tabs / 90 days)
PAXLOVID TAB 150-100	2	QL (40 tabs / 90 days)
PAXLOVID TAB 300-100	2	QL (60 tabs / 90 days)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	5	NDS, NM, PA
PREVYMIS TABS 240mg, 480mg	5	NDS, QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	3	QL (6 inhalers / year)
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	3	NM
<i>rimantadine hydrochloride</i> TABS 100mg	4	
<i>valacyclovir hcl</i> TABS 1gm, 500mg	3	
<i>valganciclovir hcl</i> SOLR 50mg/ml	5	NDS
<i>valganciclovir hcl</i> TABS 450mg	3	
VOSEVI TAB	5	NDS, NM, PA
XOFLUZA TBPK 40mg, 80mg	4	QL (1 tab / 180 days)
CEPHALOSPORINS		
<i>cefaclor</i> CAPS 250mg, 500mg	3	
<i>cefadroxil</i> CAPS 500mg	2	
<i>cefadroxil</i> SUSR 250mg/5ml, 500mg/5ml	3	
CEFAZOLIN SOLR 2gm, 3gm	4	
CEFAZOLIN INJ 1GM/50ML	4	
<i>cefaezolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	3	
CEFAZOLIN SOLN 2GM/100ML-4%	4	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	4	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	4	
CEFAZOLIN/DEX SOL 3GM/50ML-2%	4	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	4	
<i>cefdinir</i> CAPS 300mg	2	
<i>cefdinir</i> SUSR 125mg/5ml, 250mg/5ml	3	
<i>cefepime hcl</i> SOLR 1gm, 2gm	4	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	4	
<i>cefotetan disodium</i> SOLR 1gm, 2gm	4	
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier Requirements/Limits
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml	4
<i>cefpodoxime proxetil</i> TABS 100mg, 200mg	3
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	3
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	4
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	4
<i>cefuroxime axetil</i> TABS 250mg, 500mg	2
<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	3
<i>cephalexin</i> CAPS 250mg, 500mg	1
<i>cephalexin</i> SUSR 125mg/5ml, 250mg/5ml	3
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	4
<i>TEFLARO</i> SOLR 400mg, 600mg	5 NDS
<i>ERYTHROMYCINS/MACROLIDES</i>	
<i>azithromycin</i> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml	3
<i>azithromycin</i> TABS 250mg, 500mg, 600mg	1
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TB24 500mg	4
<i>clarithromycin</i> TABS 250mg, 500mg	3
<i>DIFICID</i> SUSR 40mg/ml; TABS 200mg	5 NDS
<i>e.e.s. 400</i> TABS 400mg	4
<i>ery-tab</i> TBEC 250mg, 333mg, 500mg	4
<i>ERYTHROCIN LACTOBIONATE</i> SOLR 500mg	4
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	4
<i>erythromycin ethylsuccinate</i> TABS 400mg	4
<i>erythromycin lactobionate</i> SOLR 500mg	4
<i>FLUOROQUINOLONES</i>	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	3
<i>ciprofloxacin 400 mg/200ml in d5w</i>	3
<i>ciprofloxacin hcl</i> TABS 250mg, 500mg, 750mg	1
<i>levofloxacin</i> SOLN 25mg/ml	4
<i>levofloxacin</i> TABS 250mg, 500mg, 750mg	1
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	3
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	3
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	3
<i>moxifloxacin hcl</i> TABS 400mg	3
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	4

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier Requirements/Limits
PENICILLINS	
<i>amoxicillin CAPS 250mg, 500mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg</i>	1
<i>amoxicillin CHEW 125mg, 250mg</i>	2
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	3
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	4
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	3
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	3
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	3
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	2
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	2
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	4
<i>ampicillin CAPS 500mg</i>	2
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	4
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	4
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	4
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	4
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	4
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	4
<i>BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i>	4
<i>dicloxacillin sodium CAPS 250mg, 500mg</i>	3
<i>nafcillin sodium SOLR 1gm, 2gm</i>	4
<i>nafcillin sodium SOLR 10gm</i>	5 NDS
<i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>	4
<i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>	4
<i>penicillin g sodium SOLR 5000000unit</i>	4
<i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml</i>	2
<i>penicillin v potassium TABS 250mg, 500mg</i>	1
<i>pfizerpen SOLR 5000000unit, 20000000unit</i>	4

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	4	
TETRACYCLINES		
<i>doxy 100 SOLR 100mg</i>	4	
<i>doxycycline (monohydrate) CAPS 50mg, 100mg</i>	2	
<i>doxycycline (monohydrate) SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg</i>	3	
<i>doxycycline hyclate CAPS 50mg, 100mg; TABS 20mg, 100mg</i>	3	
<i>doxycycline hyclate SOLR 100mg</i>	4	
<i>minocycline hcl CAPS 50mg, 75mg, 100mg</i>	3	
<i>NUZYRA SOLR 100mg</i>	5	NDS, NM
<i>NUZYRA TABS 150mg</i>	5	NDS, QL (30 tabs / 14 days), NM
<i>tetracycline hcl CAPS 250mg, 500mg</i>	4	
<i>tigecycline SOLR 50mg</i>	5	NDS
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
<i>BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml</i>	5	NDS, B/D, NM
<i>BENDEKA SOLN 100mg/4ml</i>	5	NDS, B/D, NM
<i>carboplatin SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml</i>	3	B/D
<i>cisplatin SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml</i>	3	B/D
<i>cyclophosphamide CAPS 25mg, 50mg</i>	3	B/D
<i>CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml</i>	5	NDS, B/D, NM
<i>CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml</i>	5	NDS, B/D
<i>cyclophosphamide SOLR 1gm, 500mg</i>	4	B/D
<i>cyclophosphamide SOLR 2gm</i>	5	NDS, B/D
<i>CYCLOPHOSPHAMIDE TABS 25mg, 50mg</i>	4	B/D

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	5	NDS, B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	5	NDS, B/D, NM
GLEOSTINE CAPS 10mg, 40mg	4	NM
GLEOSTINE CAPS 100mg	5	NDS, NM
LEUKERAN TABS 2mg	5	NDS
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml; SOLR 50mg	4	B/D
<i>oxaliplatin</i> SOLR 100mg	5	NDS, B/D
VIVIMUSTA SOLN 100mg/4ml	5	NDS, B/D, NM
ANTIMETABOLITES		
<i>azacitidine</i> SUSR 100mg	5	NDS, B/D, NM
<i>cytarabine</i> SOLN 20mg/ml	3	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	3	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	4	B/D
INQOVI TAB 35-100MG	5	NDS, QL (5 tabs / 28 days), NM, PA
LONSURF TAB 15-6.14	5	NDS, QL (100 tabs / 28 days), NM, PA
LONSURF TAB 20-8.19	5	NDS, QL (80 tabs / 28 days), NM, PA
<i>mercaptopurine</i> SUSP 2000mg/100ml	5	NDS, NM
<i>mercaptopurine</i> TABS 50mg	3	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	2	B/D
ONUREG TABS 200mg, 300mg	5	NDS, QL (14 tabs / 28 days), NM, PA
<i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg	5	NDS, B/D
PURIXAN SUSP 2000mg/100ml	5	NDS, NM
TABLOID TABS 40mg	5	NDS
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate</i> TABS 250mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>abiraterone acetate</i> TABS 500mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>abirtega</i> TABS 250mg	4	QL (120 tabs / 30 days), NM, PA
AKEEGA TAB 50/500MG	5	NDS, QL (60 tabs / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
AKEEGA TAB 100/500	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>anastrozole</i> TABS 1mg	2	
<i>bicalutamide</i> TABS 50mg	2	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	4	NM, PA
ERLEADA TABS 60mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ERLEADA TABS 240mg	5	NDS, QL (30 tabs / 30 days), NM, PA
EULEXIN CAPS 125mg	5	NDS
<i>exemestane</i> TABS 25mg	4	
FIRMAGON SOLR 80mg	4	NM, PA
FIRMAGON SOLR 120mg/vial	5	NDS, NM, PA
<i>fulvestrant</i> SOSY 250mg/5ml	5	NDS, B/D
<i>letrozole</i> TABS 2.5mg	2	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	4	NM, PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	5	NDS, NM, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	5	NDS, NM, PA
LYSODREN TABS 500mg	5	NDS, NM
<i>megestrol acetate</i> TABS 20mg, 40mg	3	
<i>nilutamide</i> TABS 150mg	5	NDS
NUBEQA TABS 300mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ORGOVYX TABS 120mg	5	NDS, NM, PA
ORSERDU TABS 86mg	5	NDS, QL (90 tabs / 30 days), NM, PA
ORSERDU TABS 345mg	5	NDS, QL (30 tabs / 30 days), NM, PA
SOLTAMOX SOLN 10mg/5ml	5	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	2	
<i>toremifene citrate</i> TABS 60mg	4	PA
XTANDI CAPS 40mg	5	NDS, QL (120 caps / 30 days), NM, PA
XTANDI TABS 40mg	5	NDS, QL (120 tabs / 30 days), NM, PA
XTANDI TABS 80mg	5	NDS, QL (60 tabs / 30 days), NM, PA
YONSA TABS 125mg	5	NDS, QL (120 tabs / 30 days), NM, PA
IMMUNOMODULATORS		
<i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg	5	NDS, QL (28 caps / 28 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name		Drug Tier	Requirements/Limits
<i>lenalidomide</i> CAPS 20mg, 25mg		5	NDS, QL (21 caps / 28 days), NM, PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg		5	NDS, QL (21 caps / 28 days), NM, PA
THALOMID CAPS 50mg		5	NDS, QL (84 caps / 28 days), NM, PA
THALOMID CAPS 100mg		5	NDS, QL (112 caps / 28 days), NM, PA
THALOMID CAPS 150mg, 200mg		5	NDS, QL (56 caps / 28 days), NM, PA
MISCELLANEOUS			
BESREMI SOSY 500mcg/ml		5	NDS, QL (2 syringes / 28 days), NM, PA
bexarotene CAPS 75mg		5	NDS, QL (300 caps / 30 days), NM, PA
<i>doxorubicin hcl</i> SOLN 2mg/ml		4	B/D
<i>doxorubicin hcl liposomal</i> SUSP 2mg/ml		5	NDS, B/D
<i>hydroxyurea</i> CAPS 500mg		2	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml		4	B/D
IWLFIN TABS 192mg		5	NDS, QL (240 tabs / 30 days), NM, PA
MATULANE CAPS 50mg		5	NDS, NM
<i>tretinoin (chemotherapy)</i> CAPS 10mg		5	NDS
WELIREG TABS 40mg		5	NDS, QL (90 tabs / 30 days), NM, PA
MITOTIC INHIBITORS			
<i>docetaxel</i> CONC 20mg/ml		4	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml		5	NDS, B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml		5	NDS, B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml		5	NDS, B/D, NM
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml		3	B/D
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml		4	B/D
<i>paclitaxel inj</i> 100mg		5	NDS, B/D, NM
<i>vincristine sulfate</i> SOLN 1mg/ml		2	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml		4	B/D

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
MOLECULAR TARGET AGENTS		
ALECENSA CAPS 150mg	5	NDS, QL (240 caps / 30 days), NM, PA
ALUNBRIG TABS 30mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ALUNBRIG TABS 90mg, 180mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ALUNBRIG PAK	5	NDS, QL (30 tabs / 30 days), NM, PA
AUGTYRO CAPS 40mg	5	NDS, QL (240 caps / 30 days), NM, PA
AUGTYRO CAPS 160mg	5	NDS, QL (60 caps / 30 days), NM, PA
AVMAPKI PAK FAKZYNJA	5	NDS, QL (1 pack / 28 days), NM, PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
BALVERSA TABS 3mg	5	NDS, QL (84 tabs / 28 days), NM, PA
BALVERSA TABS 4mg	5	NDS, QL (56 tabs / 28 days), NM, PA
BALVERSA TABS 5mg	5	NDS, QL (28 tabs / 28 days), NM, PA
BORTEZOMIB SOLR 1mg, 2.5mg	4	NM, PA
<i>bortezomib</i> SOLR 3.5mg	5	NDS, NM, PA
BOSULIF CAPS 50mg	5	NDS, QL (360 caps / 30 days), NM, PA
BOSULIF CAPS 100mg	5	NDS, QL (150 caps / 25 days), NM, PA
BOSULIF TABS 100mg	5	NDS, QL (180 tabs / 30 days), NM, PA
BOSULIF TABS 400mg, 500mg	5	NDS, QL (30 tabs / 30 days), NM, PA
BRAFTOVI CAPS 75mg	5	NDS, QL (180 caps / 30 days), NM, PA
BRUKINSA CAPS 80mg	5	NDS, QL (120 caps / 30 days), NM, PA
CABOMETYX TABS 20mg, 40mg, 60mg	5	NDS, QL (30 tabs / 30 days), NM, PA
CALQUENCE CAPS 100mg	5	NDS, QL (60 caps / 30 days), NM, PA
CALQUENCE TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
CAPRELSA TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
COMETRIQ (60MG DOSE) KIT 20mg	5	NDS, QL (84 caps / 28 days), NM, PA
COMETRIQ KIT 100MG	5	NDS, QL (56 caps / 28 days), NM, PA
COMETRIQ KIT 140MG	5	NDS, QL (112 caps / 28 days), NM, PA
COPIKTRA CAPS 15mg, 25mg	5	NDS, QL (56 caps / 28 days), NM, PA
COTELLIC TABS 20mg	5	NDS, QL (63 tabs / 28 days), NM, PA
DANZITEN TABS 71mg, 95mg	5	NDS, QL (112 tabs / 28 days), NM, PA
<i>dasatinib</i> TABS 20mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>dasatinib</i> TABS 50mg, 70mg, 80mg, 100mg, 140mg	5	NDS, QL (30 tabs / 30 days), NM, PA
DAURISMO TABS 25mg	5	NDS, QL (60 tabs / 30 days), NM, PA
DAURISMO TABS 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ERIVEDGE CAPS 150mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 25mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 100mg, 150mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 2mg	5	NDS, QL (150 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 3mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 5mg	5	NDS, QL (60 tabs / 30 days), NM, PA
FOTIVDA CAPS .89mg, 1.34mg	5	NDS, QL (21 caps / 28 days), NM, PA
FRUZAQLA CAPS 1mg	5	NDS, QL (84 caps / 28 days), NM, PA
FRUZAQLA CAPS 5mg	5	NDS, QL (21 caps / 28 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
GAVRETO CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
<i>gefitinib</i> TABS 250mg	5	NDS, QL (60 tabs / 30 days), NM, PA
GILOTRIF TABS 20mg, 30mg, 40mg	5	NDS, QL (30 tabs / 30 days), NM, PA
GOMEKLI CAPS 1mg	5	NDS, QL (168 caps / 28 days), NM, PA
GOMEKLI CAPS 2mg	5	NDS, QL (84 caps / 28 days), NM, PA
GOMEKLI TBSO 1mg	5	NDS, QL (168 tabs / 28 days), NM, PA
HERCEP HYLEC SOL 60-10000	5	NDS, NM, PA
HERCEPTIN SOLR 150mg	5	NDS, NM, PA
HERZUMA SOLR 150mg, 420mg	5	NDS, NM, PA
IBRANCE CAPS 75mg, 100mg, 125mg	5	NDS, QL (21 caps / 28 days), NM, PA
IBRANCE TABS 75mg, 100mg, 125mg	5	NDS, QL (21 tabs / 28 days), NM, PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	5	NDS, QL (30 tabs / 30 days), NM, PA
IDHIFA TABS 50mg, 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 100mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	5	NDS, QL (60 tabs / 30 days), NM, PA
IMBRUICA CAPS 70mg	5	NDS, QL (30 caps / 30 days), NM, PA
IMBRUICA CAPS 140mg	5	NDS, QL (120 caps / 30 days), NM, PA
IMBRUICA SUSP 70mg/ml	5	NDS, QL (216 mL / 27 days), NM, PA
IMBRUICA TABS 140mg, 280mg, 420mg	5	NDS, QL (30 tabs / 30 days), NM, PA
IMKELDI SOLN 80mg/ml	5	NDS, QL (280 mL / 28 days), NM, PA
INLYTA TABS 1mg	5	NDS, QL (180 tabs / 30 days), NM, PA
INLYTA TABS 5mg	5	NDS, QL (120 tabs / 30 days), NM, PA
INREBIC CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
ITOVEBI TABS 3mg	5	NDS, QL (56 tabs / 28 days), NM, PA
ITOVEBI TABS 9mg	5	NDS, QL (28 tabs / 28 days), NM, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	5	NDS, QL (60 tabs / 30 days), NM, PA
JAYPIRCA TABS 50mg	5	NDS, QL (30 tabs / 30 days), NM, PA
JAYPIRCA TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
KADCYLA SOLR 100mg, 160mg	5	NDS, B/D, NM
KANJINTI SOLR 150mg, 420mg	5	NDS, NM, PA
KEYTRUDA SOLN 100mg/4ml	5	NDS, NM, PA
KISQALI 200 DOSE TBPK 200mg	5	NDS, QL (21 tabs / 28 days), NM, PA
KISQALI 200 PAK FEMARA	5	NDS, QL (49 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	5	NDS, QL (42 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	5	NDS, QL (70 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	5	NDS, QL (63 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	5	NDS, QL (91 tabs / 28 days), NM, PA
KOSELUGO CAPS 10mg	5	NDS, QL (240 caps / 30 days), NM, PA
KOSELUGO CAPS 25mg	5	NDS, QL (120 caps / 30 days), NM, PA
KRAZATI TABS 200mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>lapatinib ditosylate</i> TABS 250mg	5	NDS, QL (180 tabs / 30 days), NM, PA
LAZCLUZE TABS 80mg	5	NDS, QL (60 tabs / 30 days), NM, PA
LAZCLUZE TABS 240mg	5	NDS, QL (30 tabs / 30 days), NM, PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg	5	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg	5	NDS, QL (30 caps / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 12MG DAILY DOSE CPPK 4mg	5	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 14 MG	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 18 MG	5	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA CAP 24 MG	5	NDS, QL (90 caps / 30 days), NM, PA
LORBRENA TABS 25mg	5	NDS, QL (90 tabs / 30 days), NM, PA
LORBRENA TABS 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
LUMAKRAS TABS 120mg	5	NDS, QL (240 tabs / 30 days), NM, PA
LUMAKRAS TABS 240mg	5	NDS, QL (120 tabs / 30 days), NM, PA
LUMAKRAS TABS 320mg	5	NDS, QL (90 tabs / 30 days), NM, PA
LYNPARZA TABS 100mg, 150mg	5	NDS, QL (120 tabs / 30 days), NM, PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (84 tabs / 28 days), NM, PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (112 tabs / 28 days), NM, PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (140 tabs / 28 days), NM, PA
MEKINIST SOLR .05mg/ml	5	NDS, QL (1260 mL / 30 days), NM, PA
MEKINIST TABS 2mg	5	NDS, QL (30 tabs / 30 days), NM, PA
MEKINIST TABS .5mg	5	NDS, QL (90 tabs / 30 days), NM, PA
MEKTOVI TABS 15mg	5	NDS, QL (180 tabs / 30 days), NM, PA
MONJUVI SOLR 200mg	5	NDS, NM, PA
NERLYNX TABS 40mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>nilotinib hcl</i> CAPS 50mg	5	NDS, QL (120 caps / 30 days), NM, PA
<i>nilotinib hcl</i> CAPS 150mg, 200mg	5	NDS, QL (112 caps / 28 days), NM, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	5	NDS, QL (3 caps / 28 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
ODOMZO CAPS 200mg	5	NDS, QL (30 caps / 30 days), NM, PA
OGIVRI SOLR 150mg, 420mg	5	NDS, NM, PA
OGSIVEO TABS 50mg	5	NDS, QL (180 tabs / 30 days), NM, PA
OGSIVEO TABS 100mg, 150mg	5	NDS, QL (56 tabs / 28 days), NM, PA
OJEMDA SUSR 25mg/ml	5	NDS, QL (96 mL / 28 days), NM, PA
OJEMDA TABS 100mg	5	NDS, QL (24 tabs / 28 days), NM, PA
OJJAARA TABS 100mg, 150mg, 200mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ONTRUZANT SOLR 150mg, 420mg	5	NDS, NM, PA
<i>pazopanib hcl</i> TABS 200mg	5	NDS, QL (120 tabs / 30 days), NM, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	5	NDS, QL (28 tabs / 28 days), NM, PA
PHESGO SOL	5	NDS, NM, PA
PIQRAY 200MG DAILY DOSE TBPK 200mg	5	NDS, QL (28 tabs / 28 days), NM, PA
PIQRAY 250MG TAB DOSE	5	NDS, QL (56 tabs / 28 days), NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	5	NDS, QL (56 tabs / 28 days), NM, PA
QINLOCK TABS 50mg	5	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO CAPS 40mg	5	NDS, QL (240 caps / 30 days), NM, PA
RETEVMO CAPS 80mg	5	NDS, QL (120 caps / 30 days), NM, PA
RETEVMO TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 80mg, 120mg, 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA
REVUFORJ TABS 25mg	5	NDS, QL (240 tabs / 30 days), NM, PA
REVUFORJ TABS 110mg	5	NDS, QL (120 tabs / 30 days), NM, PA
REVUFORJ TABS 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA
REZLIDHIA CAPS 150mg	5	NDS, QL (60 caps / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
ROMVIMZA CAPS 14mg, 20mg, 30mg	5	NDS, QL (8 caps / 28 days), NM, PA
ROZLYTREK CAPS 100mg	5	NDS, QL (180 caps / 30 days), NM, PA
ROZLYTREK CAPS 200mg	5	NDS, QL (90 caps / 30 days), NM, PA
ROZLYTREK PACK 50mg	5	NDS, QL (336 packets / 28 days), NM, PA
RUBRACA TABS 200mg, 250mg, 300mg	5	NDS, QL (120 tabs / 30 days), NM, PA
RYDAPT CAPS 25mg	5	NDS, QL (224 caps / 28 days), NM, PA
SCEMBLIX TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
SCEMBLIX TABS 40mg	5	NDS, QL (300 tabs / 30 days), NM, PA
SCEMBLIX TABS 100mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>sorafenib tosylate</i> TABS 200mg	5	NDS, QL (120 tabs / 30 days), NM, PA
STIVARGA TABS 40mg	5	NDS, QL (84 tabs / 28 days), NM, PA
<i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg	5	NDS, QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	5	NDS, QL (112 tabs / 28 days), NM, PA
TAFINLAR CAPS 50mg, 75mg	5	NDS, QL (120 caps / 30 days), NM, PA
TAFINLAR TBSO 10mg	5	NDS, QL (900 tabs / 30 days), NM, PA
TAGRISSO TABS 40mg, 80mg	5	NDS, QL (30 tabs / 30 days), NM, PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg	5	NDS, QL (30 caps / 30 days), NM, PA
TALZENNA CAPS .25mg	5	NDS, QL (90 caps / 30 days), NM, PA
TASIGNA CAPS 50mg	5	NDS, QL (120 caps / 30 days), NM, PA
TASIGNA CAPS 150mg, 200mg	5	NDS, QL (112 caps / 28 days), NM, PA
TAZVERIK TABS 200mg	5	NDS, QL (240 tabs / 30 days), NM, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	5	NDS, NM, PA
TECENTRIQ INJ HYBREZA	5	NDS, QL (1 vial / 21 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
TEPMETKO TABS 225mg	5	NDS, QL (60 tabs / 30 days), NM, PA
TIBSOVO TABS 250mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>torpenz</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
TRAZIMERA SOLR 150mg, 420mg	5	NDS, NM, PA
TRUQAP TABS 160mg, 200mg	5	NDS, QL (64 tabs / 28 days), NM, PA
TRUQAP TBPK 160mg, 200mg	5	NDS, QL (4 packs / 28 days), NM, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	5	NDS, NM, PA
TUKYSA TABS 50mg, 150mg	5	NDS, QL (120 tabs / 30 days), NM, PA
TURALIO CAPS 125mg	5	NDS, QL (120 caps / 30 days), NM, PA
VANFLYTA TABS 17.7mg, 26.5mg	5	NDS, QL (56 tabs / 28 days), NM, PA
VENCLEXTA TABS 10mg	3	QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 50mg	5	NDS, QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 100mg	5	NDS, QL (180 tabs / 30 days), NM, PA
VENCLEXTA TAB START PK	5	NDS, QL (42 tabs / 28 days), NM, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	5	NDS, QL (56 tabs / 28 days), NM, PA
VITRAKVI CAPS 25mg	5	NDS, QL (180 caps / 30 days), NM, PA
VITRAKVI CAPS 100mg	5	NDS, QL (60 caps / 30 days), NM, PA
VITRAKVI SOLN 20mg/ml	5	NDS, QL (300 mL / 30 days), NM, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	5	NDS, QL (30 tabs / 30 days), NM, PA
VONJO CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
VORANIGO TABS 10mg	5	NDS, QL (60 tabs / 30 days), NM, PA
VORANIGO TABS 40mg	5	NDS, QL (30 tabs / 30 days), NM, PA
XALKORI CAPS 200mg, 250mg; CPSP 50mg	5	NDS, QL (120 caps / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
XALKORI CPSP 20mg	5	NDS, QL (240 caps / 30 days), NM, PA
XALKORI CPSP 150mg	5	NDS, QL (180 caps / 30 days), NM, PA
XOSPATA TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 10mg	5	NDS, QL (16 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 40mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPK 40mg	5	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPK 60mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPK 20mg	5	NDS, QL (24 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 40mg	5	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPK 20mg	5	NDS, QL (32 tabs / 28 days), NM, PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPK 50mg	5	NDS, QL (8 tabs / 28 days), NM, PA
ZEJULA TABS 100mg, 200mg, 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ZELBORAF TABS 240mg	5	NDS, QL (240 tabs / 30 days), NM, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	5	NDS, NM, PA
ZOLINZA CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
ZYDELIG TABS 100mg, 150mg	5	NDS, QL (60 tabs / 30 days), NM, PA
ZYKADIA TABS 150mg	5	NDS, QL (84 tabs / 28 days), NM, PA

PROTECTIVE AGENTS

<i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	4	B/D
<i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg	3	
mesna TABS 400mg	5	NDS
MESNEX TABS 400mg	5	NDS

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	QL (30 caps / 30 days)
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Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	QL (30 caps / 30 days)
<i>benazepril & hydrochlorothiazide tab 5-6.25mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
ACE INHIBITORS		
<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	1	
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	1	
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	1	
<i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>	1	
<i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i>	1	
<i>moexipril hcl TABS 7.5mg, 15mg</i>	1	
<i>perindopril erbumine TABS 2mg, 4mg, 8mg</i>	1	
<i>quinapril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	1	
<i>ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg</i>	1	
<i>trandolapril TABS 1mg, 2mg, 4mg</i>	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone TABS 25mg, 50mg</i>	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
KERENDIA TABS 10mg, 20mg	3	QL (30 tabs / 30 days)
spironolactone TABS 25mg, 50mg, 100mg	1	
ALPHA BLOCKERS		
doxazosin mesylate TABS 1mg, 2mg, 4mg, 8mg	2	
prazosin hcl CAPS 1mg, 2mg, 5mg	3	
terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg	1	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 5-160 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 5-320 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 10-160 mg	1	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 10-320 mg	1	QL (30 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	1	QL (60 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	1	QL (30 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	1	QL (30 tabs / 30 days)
ENTRESTO CAP 6-6MG	3	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	3	QL (240 caps / 30 days)
ENTRESTO TAB 24-26MG	3	QL (60 tabs / 30 days)
ENTRESTO TAB 49-51MG	3	QL (60 tabs / 30 days)
ENTRESTO TAB 97-103MG	3	QL (60 tabs / 30 days)
irbesartan-hydrochlorothiazide tab 150-12.5 mg	1	QL (60 tabs / 30 days)
irbesartan-hydrochlorothiazide tab 300-12.5 mg	1	QL (30 tabs / 30 days)
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	1	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	1	
losartan potassium & hydrochlorothiazide tab 100-25 mg	1	
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	1	QL (30 tabs / 30 days)
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	1	QL (30 tabs / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	QL (30 tabs / 30 days)

ANGIOTENSIN II RECEPTOR ANTAGONISTS

<i>candesartan cilexetil TABS 4mg, 8mg, 16mg</i>	1	QL (60 tabs / 30 days)
<i>candesartan cilexetil TABS 32mg</i>	1	QL (30 tabs / 30 days)
<i>irbesartan TABS 75mg, 150mg, 300mg</i>	1	QL (30 tabs / 30 days)
<i>losartan potassium TABS 25mg, 50mg, 100mg</i>	1	
<i>olmesartan medoxomil TABS 5mg</i>	1	QL (60 tabs / 30 days)
<i>olmesartan medoxomil TABS 20mg, 40mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan TABS 20mg, 40mg, 80mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan TABS 40mg, 80mg, 160mg</i>	1	QL (60 tabs / 30 days)
<i>valsartan TABS 320mg</i>	1	QL (30 tabs / 30 days)

ANTIARRHYTHMICS

<i>amiodarone hcl SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 400mg</i>	4	
<i>amiodarone hcl TABS 200mg</i>	1	
<i>disopyramide phosphate CAPS 100mg, 150mg</i>	4	
<i>dofetilide CAPS 125mcg, 250mcg, 500mcg</i>	4	NM
<i>flecainide acetate TABS 50mg, 100mg, 150mg</i>	3	
<i>MULTAQ TABS 400mg</i>	4	QL (60 tabs / 30 days)
<i>pacerone TABS 100mg, 400mg</i>	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
pacerone TABS 200mg	1	
propafenone hcl CP12 225mg, 325mg, 425mg	4	
propafenone hcl TABS 150mg, 225mg, 300mg	3	
quinidine sulfate TABS 200mg, 300mg	4	
sotalol hcl TABS 80mg, 120mg, 160mg, 240mg	2	
sotalol hcl (afib/afl) TABS 80mg, 120mg, 160mg	3	
ANTILIPEMICS, FIBRATES		
fenofibrate TABS 48mg, 54mg, 145mg, 160mg	2	
fenofibrate micronized CAPS 67mg, 134mg, 200mg	3	
gemfibrozil TABS 600mg	1	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
atorvastatin calcium TABS 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
lovastatin TABS 10mg, 20mg, 40mg	1	QL (60 tabs / 30 days)
pravastatin sodium TABS 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
rosuvastatin calcium TABS 5mg, 10mg, 20mg, 40mg	1	QL (30 tabs / 30 days)
simvastatin TABS 5mg, 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
ANTILIPEMICS, MISCELLANEOUS		
cholestyramine PACK 4gm; POWD 4gm/dose	3	
cholestyramine light PACK 4gm; POWD 4gm/dose	3	
colesevelam hcl PACK 3.75gm; TABS 625mg	4	
colestipol hcl GRAN 5gm; PACK 5gm	4	
colestipol hcl TABS 1gm	3	
ezetimibe TABS 10mg	3	
ezetimibe-simvastatin tab 10-10 mg	1	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-20 mg	1	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-40 mg	1	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-80 mg	1	QL (30 tabs / 30 days)
NEXLETOL TABS 180mg	3	QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	3	QL (30 tabs / 30 days)
niacin (antihyperlipidemic) TBCR 500mg, 750mg, 1000mg	3	QL (60 tabs / 30 days)
omega-3-acid ethyl esters cap 1 gm	3	PA
prevalite PACK 4gm; POWD 4gm/dose	3	
REPATHA SOSY 140mg/ml	3	NM, PA
REPATHA PUSHTRONEX SYSTEM SOCT 420mg/3.5ml	3	NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
REPATHA SURECLICK SOAJ 140mg/ml	3	NM, PA
VASCEPA CAPS .5gm, 1gm	3	
BETA-BLOCKER/DIURETIC COMBINATIONS		
atenolol & chlorthalidone tab 50-25 mg	2	
atenolol & chlorthalidone tab 100-25 mg	2	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	2	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	2	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	2	
metoprolol & hydrochlorothiazide tab 50-25 mg	3	
metoprolol & hydrochlorothiazide tab 100-25 mg	3	
metoprolol & hydrochlorothiazide tab 100-50 mg	3	
BETA-BLOCKERS		
acebutolol hcl CAPS 200mg, 400mg	3	
atenolol TABS 25mg, 50mg, 100mg	1	
betaxolol hcl TABS 10mg, 20mg	3	
bisoprolol fumarate TABS 5mg, 10mg	2	
carvedilol TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	
labetalol hcl TABS 100mg, 200mg, 300mg	3	
metoprolol succinate TB24 25mg, 50mg, 100mg, 200mg	1	
metoprolol tartrate SOLN 5mg/5ml	4	
metoprolol tartrate TABS 25mg, 50mg, 100mg	1	
nadolol TABS 20mg, 40mg, 80mg	3	
nebivolol hcl TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days)
nebivolol hcl TABS 20mg	3	QL (60 tabs / 30 days)
pindolol TABS 5mg, 10mg	3	
propranolol hcl CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml	3	
propranolol hcl TABS 10mg, 20mg, 40mg, 60mg, 80mg	2	
timolol maleate TABS 5mg, 10mg, 20mg	3	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate TABS 2.5mg, 5mg, 10mg	1	
cartia xt CP24 120mg, 180mg, 240mg, 300mg	2	
dilt-xr CP24 120mg, 180mg, 240mg	2	
diltiazem hcl CP12 60mg, 90mg, 120mg	4	
diltiazem hcl SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier Requirements/Limits
<i>diltiazem hcl</i> TABS 30mg, 60mg, 90mg, 120mg	2
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg	2
<i>diltiazem hcl coated beads</i> CP24 360mg	4
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	2
<i>isradipine</i> CAPS 2.5mg, 5mg	4
<i>nicardipine hcl</i> CAPS 20mg, 30mg	4
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	3
<i>nimodipine</i> CAPS 30mg	4
<i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2
<i>verapamil hcl</i> CP24 100mg, 200mg, 300mg, 360mg; SOLN 2.5mg/ml	4
<i>verapamil hcl</i> CP24 120mg, 180mg, 240mg	3
<i>verapamil hcl</i> TABS 40mg, 80mg, 120mg	1
<i>verapamil hcl</i> TBCR 120mg, 180mg, 240mg	2
DIURETICS	
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	3
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	2
<i>amiloride hcl</i> TABS 5mg	2
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	3
<i>chlorthalidone</i> TABS 25mg, 50mg	2
<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml	2
<i>furosemide</i> TABS 20mg, 40mg, 80mg	1
<i>furosemide inj</i> SOLN 10mg/ml	3
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1
<i>indapamide</i> TABS 1.25mg, 2.5mg	1
<i>methazolamide</i> TABS 25mg, 50mg	4
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	2
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	2
<i>torsemide</i> TABS 5mg, 10mg, 20mg, 100mg	2
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name		Drug Tier Requirements/Limits
<i>triامترن & hidروكلوروثیازاید tab 75-50 mg</i>		1
MISCELLANEOUS		
<i>الیسکیرن فومارات TABS 150mg, 300mg</i>	1	
<i>کلودینید PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr</i>	3	
<i>کلودینید hcl TABS .1mg, .2mg, .3mg</i>	1	
<i>کورلانور SOLN 5mg/5ml</i>	4	QL (450 mL / 30 days)
<i>دیگوکسین SOLN .05mg/ml, .25mg/ml</i>	4	
<i>دیگوکسین TABS 125mcg, 250mcg</i>	2	QL (30 tabs / 30 days)
<i>دروکسیدوپا CAPS 100mg</i>	5	NDS, QL (90 caps / 30 days), NM, PA
<i>دروکسیدوپا CAPS 200mg, 300mg</i>	5	NDS, QL (180 caps / 30 days), NM, PA
<i>اپینفیرین (انافیلاکسیز) SOLN 1mg/ml</i>	4	
<i>گوانفاسین hcl TABS 1mg, 2mg</i>	3	PA; PA applies if 70 years and older
<i>هیدرالازین hcl SOLN 20mg/ml</i>	4	
<i>هیدرالازین hcl TABS 10mg, 25mg, 50mg, 100mg</i>	1	
<i>ایبرابرادین hcl TABS 5mg, 7.5mg</i>	4	QL (60 tabs / 30 days)
<i>میتیروزین CAPS 250mg</i>	5	NDS, NM, PA
<i>میدودرین hcl TABS 2.5mg, 5mg</i>	3	
<i>میدودرین hcl TABS 10mg</i>	4	
<i>مینوکسیدیل TABS 2.5mg, 10mg</i>	2	
<i>رانولازین TB12 500mg, 1000mg</i>	4	
<i>ویرکووو TABS 2.5mg, 5mg, 10mg</i>	3	QL (30 tabs / 30 days), PA
NITRATES		
<i>ایزوسوربید دینیتریٹ TABS 5mg, 10mg, 20mg, 30mg</i>	3	
<i>ایزوسوربید مونونیتریٹ TB24 30mg, 60mg, 120mg</i>	1	
<i>نیترو-بید OINT 2%</i>	3	
<i>نیتروگلیسرین PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr</i>	3	
<i>نیتروگلیسرین SOLN .4mg/spray</i>	4	
<i>نیتروگلیسرین SUBL .3mg, .4mg, .6mg</i>	2	
PULMONARY ARTERIAL HYPERTENSION		
<i>الیکیپ TABS 20mg</i>	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>امبریسنتان TABS 5mg, 10mg</i>	5	NDS, QL (30 tabs / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>bosentan</i> TABS 62.5mg, 125mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>OPSUMIT</i> TABS 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	3	QL (360 tabs / 30 days), NM, PA
<i>tadalafil (pulmonary hypertension)</i> TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	5	NDS, NM, PA
<i>YUTREPIA</i> CAPS 26.5mcg, 53mcg, 79.5mcg	5	NDS, QL (140 caps / 28 days), NM, PA
<i>YUTREPIA</i> CAPS 106mcg	5	NDS, QL (224 caps / 28 days), NM, PA

CENTRAL NERVOUS SYSTEM

ANTIANXIETY

<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
<i>buspirone hcl</i> TABS 5mg, 10mg, 15mg	1	
<i>buspirone hcl</i> TABS 7.5mg, 30mg	3	
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	3	
<i>lorazepam</i> CONC 2mg/ml	3	QL (150 mL / 30 days)
<i>lorazepam</i> SOLN 4mg/ml, 20mg/10ml	2	
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
<i>lorazepam intensol</i> CONC 2mg/ml	3	QL (150 mL / 30 days)

ANTIDEMENTIA

<i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg	2	QL (30 tabs / 30 days)
<i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg	2	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg	3	QL (30 caps / 30 days)
<i>galantamine hydrobromide</i> SOLN 4mg/ml	4	QL (200 mL / 30 days)
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg	3	QL (60 tabs / 30 days)
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml	4	PA; PA applies if 29 years and younger
<i>memantine hcl</i> TABS 5mg, 10mg	3	PA; PA applies if 29 years and younger
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	4	PA; PA applies if 29 years and younger
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	4	
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	4	
NAMZARIC CAP 7-10MG	4	
NAMZARIC CAP 14-10MG	4	
NAMZARIC CAP 21-10MG	4	
NAMZARIC CAP 28-10MG	4	
NAMZARIC CAP PACK	4	
<i>rivastigmine PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr</i>	4	QL (30 patches / 30 days)
<i>rivastigmine tartrate CAPS 1.5mg, 3mg, 4.5mg, 6mg</i>	3	QL (60 caps / 30 days)
ANTIDEPRESSANTS		
<i>amitriptyline hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg</i>	3	
<i>amoxapine TABS 25mg, 50mg, 100mg, 150mg</i>	3	
AUVELITY TAB 45-105MG	4	QL (60 tabs / 30 days), PA
<i>bupropion hcl TABS 75mg, 100mg</i>	2	
<i>bupropion hcl TB12 100mg, 150mg, 200mg; TB24 150mg</i>	2	QL (60 tabs / 30 days)
<i>bupropion hcl TB24 300mg</i>	2	QL (30 tabs / 30 days)
<i>citalopram hydrobromide SOLN 10mg/5ml</i>	3	
<i>citalopram hydrobromide TABS 10mg, 20mg, 40mg</i>	1	
<i>clomipramine hcl CAPS 25mg, 50mg, 75mg</i>	4	PA
<i>desipramine hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg</i>	4	
<i>desvenlafaxine succinate TB24 25mg, 50mg, 100mg</i>	3	QL (30 tabs / 30 days)
<i>doxepin hcl CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml</i>	3	
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg	4	QL (60 caps / 30 days), PA
<i>duloxetine hcl CPEP 20mg, 30mg, 60mg</i>	3	QL (60 caps / 30 days)
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	5	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate SOLN 5mg/5ml</i>	4	
<i>escitalopram oxalate TABS 5mg, 10mg, 20mg</i>	1	
FETZIMA CP24 20mg, 40mg	4	QL (60 caps / 30 days), PA
FETZIMA CP24 80mg, 120mg	4	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	4	QL (2 packs / year), PA
<i>fluoxetine hcl CAPS 10mg, 20mg, 40mg</i>	1	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>fluoxetine hcl</i> SOLN 20mg/5ml	3	
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg	2	
<i>MARPLAN</i> TABS 10mg	4	QL (180 tabs / 30 days)
<i>mirtazapine</i> TABS 7.5mg; TBDP 15mg, 30mg, 45mg	3	
<i>mirtazapine</i> TABS 15mg, 30mg, 45mg	2	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	4	
<i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg	2	
<i>nortriptyline hcl</i> SOLN 10mg/5ml	4	
<i>paroxetine hcl</i> SUSP 10mg/5ml	4	QL (900 mL / 30 days), PA
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	2	
<i>phenelzine sulfate</i> TABS 15mg	3	
<i>protriptyline hcl</i> TABS 5mg, 10mg	4	
<i>RALDESY</i> SOLN 10mg/ml	4	QL (1800 mL / 30 days), PA
<i>sertraline hcl</i> CONC 20mg/ml	3	
<i>sertraline hcl</i> TABS 25mg, 50mg, 100mg	1	
<i>tranylcypromine sulfate</i> TABS 10mg	4	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	1	
<i>trimipramine maleate</i> CAPS 25mg, 50mg	4	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	4	QL (60 caps / 30 days)
<i>TRINTELLIX</i> TABS 5mg, 10mg, 20mg	4	QL (30 tabs / 30 days), PA
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg	2	
<i>venlafaxine hcl</i> TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	3	
<i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg	4	QL (30 tabs / 30 days)
<i>ZURZUVAE</i> CAPS 20mg, 25mg	5	NDS, QL (28 caps / 14 days), NM, PA
<i>ZURZUVAE</i> CAPS 30mg	5	NDS, QL (14 caps / 14 days), NM, PA
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl</i> CAPS 100mg	3	QL (120 caps / 30 days)
<i>amantadine hcl</i> SOLN 50mg/5ml	3	
<i>amantadine hcl</i> TABS 100mg	4	
<i>benztropine mesylate</i> SOLN 1mg/ml	4	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg	2	PA; PA applies if 70 years and older

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
bromocriptine mesylate CAPS 5mg; TABS 2.5mg	4	
carb/levo orally disintegrating tab 10-100mg	3	
carb/levo orally disintegrating tab 25-100mg	3	
carb/levo orally disintegrating tab 25-250mg	3	
carbidopa & levodopa tab 10-100 mg	2	
carbidopa & levodopa tab 25-100 mg	2	
carbidopa & levodopa tab 25-250 mg	2	
carbidopa & levodopa tab er 25-100 mg	3	
carbidopa & levodopa tab er 50-200 mg	3	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	4	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	4	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	4	
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	4	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	4	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	4	
entacapone TABS 200mg	4	
INBRIJA CAPS 42mg	5	NDS, QL (300 caps / 30 days), NM, PA
pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg	2	
rasagiline mesylate TABS .5mg, 1mg	4	QL (30 tabs / 30 days)
ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg	2	
selegiline hcl CAPS 5mg; TABS 5mg	3	
trihexyphenidyl hcl SOLN .4mg/ml	3	PA; PA applies if 70 years and older
trihexyphenidyl hcl TABS 2mg, 5mg	2	PA; PA applies if 70 years and older
ANTIPSYCHOTICS		
ABILIFY ASIMTUFI PRSY 720mg/2.4ml, 960mg/3.2ml	5	NDS, QL (1 syringe / 56 days)
ABILIFY MAINTENA PRSY 300mg, 400mg	5	NDS, QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	5	NDS, QL (1 injection / 28 days)
ariPIPRAZOLE SOLN 1mg/ml	4	QL (900 mL / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>aripiprazole</i> TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	4	QL (30 tabs / 30 days)
<i>aripiprazole</i> TBDP 10mg, 15mg	4	QL (60 tabs / 30 days), ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	5	NDS, QL (1 syringe / 28 days)
ARISTADA PRSY 1064mg/3.9ml	5	NDS, QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	5	NDS
<i>asenapine maleate</i> SUBL 2.5mg, 5mg, 10mg	4	QL (60 tabs / 30 days)
CAPLYTA CAPS 10.5mg, 21mg, 42mg	5	NDS, QL (30 caps / 30 days)
<i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	4	
<i>clozapine</i> TABS 25mg, 50mg	3	
<i>clozapine</i> TABS 100mg	3	QL (270 tabs / 30 days)
<i>clozapine</i> TABS 200mg	3	QL (120 tabs / 30 days)
<i>clozapine</i> TBDP 12.5mg, 25mg	4	PA
<i>clozapine</i> TBDP 100mg	4	QL (270 tabs / 30 days), PA
<i>clozapine</i> TBDP 150mg	4	QL (180 tabs / 30 days), PA
<i>clozapine</i> TBDP 200mg	4	QL (120 tabs / 30 days), PA
COBENFY CAP 50-20MG	5	NDS, QL (60 caps / 30 days), PA
COBENFY CAP 100-20MG	5	NDS, QL (60 caps / 30 days), PA
COBENFY CAP 125-30MG	5	NDS, QL (60 caps / 30 days), PA
COBENFY STRT CAP PACK	5	NDS, QL (2 packs / year), PA
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	5	NDS, QL (60 tabs / 30 days), PA
FANAPT PAK PACK A	4	QL (2 packs / year), PA
FANAPT PAK PACK C	4	QL (2 packs / year), PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	4	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	4	
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name		Drug Tier	Requirements/Limits
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml		3	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml		3	
<i>INVEGA HAFYERA</i> SUSY 1092mg/3.5ml, 1560mg/5ml	5	NDS, QL (1 injection / 180 days)	
<i>INVEGA SUSTENNA</i> SUSY 39mg/0.25ml	4	QL (1 syringe / 28 days)	
<i>INVEGA SUSTENNA</i> SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	5	NDS, QL (1 syringe / 28 days)	
<i>INVEGA TRINZA</i> SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml	5	NDS, QL (1 syringe / 90 days)	
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	3		
<i>lurasidone hcl</i> TABS 20mg, 40mg, 60mg, 120mg	4	QL (30 tabs / 30 days)	
<i>lurasidone hcl</i> TABS 80mg	4	QL (60 tabs / 30 days)	
<i>LYBALVI</i> TAB 5-10MG	5	NDS, QL (30 tabs / 30 days)	
<i>LYBALVI</i> TAB 10-10MG	5	NDS, QL (30 tabs / 30 days)	
<i>LYBALVI</i> TAB 15-10MG	5	NDS, QL (30 tabs / 30 days)	
<i>LYBALVI</i> TAB 20-10MG	5	NDS, QL (30 tabs / 30 days)	
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	4		
<i>NUPLAZID</i> CAPS 34mg	5	NDS, QL (30 caps / 30 days), NM, PA	
<i>NUPLAZID</i> TABS 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA	
<i>olanzapine</i> SOLR 10mg	4	QL (3 vials / 1 day)	
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg	2	QL (60 tabs / 30 days)	
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg	2	QL (30 tabs / 30 days)	
<i>olanzapine</i> TBDP 5mg, 15mg, 20mg	4	QL (30 tabs / 30 days), ST	
<i>olanzapine</i> TBDP 10mg	4	QL (60 tabs / 30 days), ST	
<i>OPIPZA</i> FILM 2mg, 5mg	5	NDS, QL (30 films / 30 days), PA	
<i>OPIPZA</i> FILM 10mg	5	NDS, QL (90 films / 30 days), PA	
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	4	QL (30 tabs / 30 days)	
<i>paliperidone</i> TB24 6mg	4	QL (60 tabs / 30 days)	
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	3		
<i>pimozide</i> TABS 1mg, 2mg	4		

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate</i> TABS 25mg	2	QL (180 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 50mg, 100mg, 150mg, 200mg	2	QL (90 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 300mg, 400mg	2	QL (60 tabs / 30 days)
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	4	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	4	QL (30 tabs / 30 days), PA
<i>REXULTI</i> TABS 3mg, 4mg	5	NDS, QL (30 tabs / 30 days)
<i>REXULTI</i> TABS .25mg, .5mg, 1mg, 2mg	5	NDS, QL (60 tabs / 30 days)
<i>risperidone</i> SOLN 1mg/ml	3	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	2	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg	4	QL (60 tabs / 30 days), ST
<i>risperidone</i> TBDP 4mg	4	QL (120 tabs / 30 days), ST
<i>risperidone</i> TBDP .25mg, .5mg	4	QL (90 tabs / 30 days), ST
<i>risperidone microspheres</i> SRER 12.5mg, 25mg	4	QL (2 injections / 28 days)
<i>risperidone microspheres</i> SRER 37.5mg, 50mg	5	NDS, QL (2 injections / 28 days)
<i>SECUADO</i> PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	5	NDS, QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	3	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	4	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	3	
<i>VERSACLOZ</i> SUSP 50mg/ml	5	NDS, QL (600 mL / 30 days), PA
<i>VRAYLAR</i> CAPS 1.5mg	5	NDS, QL (60 caps / 30 days)
<i>VRAYLAR</i> CAPS 3mg, 4.5mg, 6mg	5	NDS, QL (30 caps / 30 days)
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	4	QL (60 caps / 30 days)
<i>ziprasidone mesylate</i> SOLR 20mg	4	QL (6 injections / 3 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
ANTISEIZURE AGENTS		
APTIOM TABS 200mg, 400mg	5	NDS, QL (30 tabs / 30 days)
APTIOM TABS 600mg, 800mg	5	NDS, QL (60 tabs / 30 days)
BRIVIACT SOLN 10mg/ml	5	NDS, QL (600 mL / 30 days), PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	5	NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine</i> CHEW 100mg; TABS 200mg	3	
<i>carbamazepine</i> CHEW 200mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TB12 100mg, 200mg, 400mg	4	
<i>clobazam</i> SUSP 2.5mg/ml	4	QL (480 mL / 30 days), PA
<i>clobazam</i> TABS 10mg, 20mg	4	QL (60 tabs / 30 days), PA
<i>clonazepam</i> TABS 2mg	2	QL (300 tabs / 30 days)
<i>clonazepam</i> TABS .5mg, 1mg	2	QL (90 tabs / 30 days)
<i>clonazepam</i> TBDP 2mg	3	QL (300 tabs / 30 days)
<i>clonazepam</i> TBDP .125mg, .25mg, .5mg, 1mg	3	QL (90 tabs / 30 days)
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	4	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
DIACOMIT CAPS 250mg	5	NDS, QL (360 caps / 30 days), NM, PA
DIACOMIT CAPS 500mg	5	NDS, QL (180 caps / 30 days), NM, PA
DIACOMIT PACK 250mg	5	NDS, QL (360 packets / 30 days), NM, PA
DIACOMIT PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
<i>diazepam</i> SOLN 5mg/5ml	3	QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam</i> TABS 2mg, 5mg, 10mg	2	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>diazepam inj</i> SOLN 5mg/ml	4	
<i>diazepam intensol</i> CONC 5mg/ml	3	QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
DILANTIN CAPS 30mg	4	
<i>divalproex sodium</i> CSDR 125mg	4	
<i>divalproex sodium</i> TB24 250mg, 500mg	3	
<i>divalproex sodium</i> TBEC 125mg, 250mg, 500mg	2	
EPIDIOLEX SOLN 100mg/ml	5	NDS, QL (600 mL / 30 days), NM, PA
<i>epitol</i> TABS 200mg	3	
EPRONTIA SOLN 25mg/ml	4	QL (480 mL / 30 days), PA
<i>eslicarbazepine acetate</i> TABS 200mg, 400mg	4	QL (30 tabs / 30 days)
<i>eslicarbazepine acetate</i> TABS 600mg, 800mg	4	QL (60 tabs / 30 days)
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	3	
<i>felbamate</i> SUSP 600mg/5ml; TABS 400mg, 600mg	4	
FINTEPLA SOLN 2.2mg/ml	5	NDS, QL (360 mL / 30 days), NM, PA
FYCOMPA SUSP .5mg/ml	5	NDS, QL (720 mL / 30 days), PA
FYCOMPA TABS 2mg	4	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg	5	NDS, QL (30 tabs / 30 days), PA
<i>gabapentin</i> CAPS 100mg, 300mg	2	QL (360 caps / 30 days)
<i>gabapentin</i> CAPS 400mg	2	QL (270 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml, 300mg/6ml	3	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	2	QL (180 tabs / 30 days)
<i>gabapentin</i> TABS 800mg	2	QL (120 tabs / 30 days)
<i>lacosamide</i> SOLN 200mg/20ml	4	
<i>lacosamide</i> TABS 50mg	4	QL (120 tabs / 30 days)
<i>lacosamide</i> TABS 100mg, 150mg, 200mg	4	QL (60 tabs / 30 days)
<i>lacosamide oral</i> SOLN 10mg/ml	4	QL (1200 mL / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg	3	
<i>lamotrigine</i> TABS 25mg, 100mg, 150mg, 200mg	1	
<i>lamotrigine</i> TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	4	ST

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name		Drug Tier	Requirements/Limits
<i>levetiracetam</i> SOLN 100mg/ml; TB24 500mg, 750mg		3	
<i>levetiracetam</i> SOLN 500mg/5ml		4	
<i>levetiracetam</i> TABS 250mg, 500mg, 750mg, 1000mg		2	
LEVETIRACETAM TB3D 250mg	4		QL (360 tabs / 30 days)
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>		4	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>		4	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>		4	
<i>methylsuximide</i> CAPS 300mg		4	
NAYZILAM SOLN 5mg/0.1ml	4		QL (10 nasal units per 30 days)
<i>oxcarbazepine</i> SUSP 300mg/5ml		4	
<i>oxcarbazepine</i> TABS 150mg, 300mg, 600mg		3	
<i>perampanel</i> TABS 2mg	4		QL (60 tabs / 30 days), PA
<i>perampanel</i> TABS 4mg, 6mg, 8mg, 10mg, 12mg	5		NDS, QL (30 tabs / 30 days), PA
<i>phenobarbital</i> ELIX 20mg/5ml	4		QL (1500 mL / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	3		QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	4		PA; PA applies if 70 years and older
<i>phenytek</i> CAPS 200mg, 300mg	3		
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	3		
<i>phenytoin sodium</i> SOLN 50mg/ml	3		
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	3		
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	3		QL (120 caps / 30 days), PA
<i>pregabalin</i> CAPS 200mg	3		QL (90 caps / 30 days), PA
<i>pregabalin</i> CAPS 225mg, 300mg	3		QL (60 caps / 30 days), PA
<i>pregabalin</i> SOLN 20mg/ml	4		QL (900 mL / 30 days), PA
<i>primidone</i> TABS 50mg, 125mg, 250mg	2		
<i>roweepra</i> TABS 500mg	2		

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
rufinamide SUSP 40mg/ml	5	NDS, QL (2400 mL / 30 days), PA
rufinamide TABS 200mg	4	QL (480 tabs / 30 days), PA
rufinamide TABS 400mg	5	NDS, QL (240 tabs / 30 days), PA
SPRITAM TB3D 250mg	4	QL (360 tabs / 30 days)
SPRITAM TB3D 500mg	4	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	4	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	4	QL (90 tabs / 30 days)
subvenite TABS 25mg, 100mg, 150mg, 200mg	1	
SYMPAZAN FILM 5mg, 10mg, 20mg	5	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	4	
topiramate CPSP 15mg, 25mg	3	
topiramate CPSP 50mg	4	
topiramate SOLN 25mg/ml	4	QL (480 mL / 30 days), PA
topiramate TABS 25mg, 50mg, 100mg, 200mg	2	
valproate sodium SOLN 100mg/ml	4	
valproate sodium SOLN 250mg/5ml	3	
valproic acid CAPS 250mg	3	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml	4	QL (10 blister packs per 30 days)
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml	4	QL (10 blister packs per 30 days)
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml	4	QL (10 blister packs per 30 days)
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml	4	QL (10 blister packs per 30 days)
vigabatrin PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
vigabatrin TABS 500mg	5	NDS, QL (180 tabs / 30 days), NM, PA
vigadroneret PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
vigadroneret TABS 500mg	5	NDS, QL (180 tabs / 30 days), NM, PA
VIGAFYDE SOLN 100mg/ml	5	NDS, QL (900 mL / 30 days), NM, PA
vigpoderet PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
XCOPRI TABS 25mg, 50mg, 100mg	5	NDS, QL (30 tabs / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
XCOPRI TABS 150mg, 200mg	5	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	4	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	5	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	5	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	5	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	5	NDS, QL (28 tabs / 28 days)
ZONISADE SUSP 100mg/5ml	5	NDS, QL (900 mL / 30 days), PA
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	2	
ZTALMY SUSP 50mg/ml	5	NDS, QL (1100 mL / 30 days), NM, PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine tab 5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 10 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 15 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 20 mg</i>	3	QL (90 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 30 mg</i>	3	QL (60 tabs / 30 days), PA
<i>atomoxetine hcl</i> CAPS 10mg, 18mg, 25mg	4	QL (120 caps / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>atomoxetine hcl</i> CAPS 40mg	4	QL (60 caps / 30 days)
<i>atomoxetine hcl</i> CAPS 60mg, 80mg, 100mg	4	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl</i> TABS 2.5mg, 5mg	3	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl</i> TABS 10mg	3	QL (60 tabs / 30 days), PA
<i>guanfacine hcl (adhd)</i> TB24 1mg, 2mg, 4mg	3	QL (30 tabs / 30 days), PA; PA applies if 70 years and older
<i>guanfacine hcl (adhd)</i> TB24 3mg	3	QL (60 tabs / 30 days), PA; PA applies if 70 years and older
<i>methylphenidate hcl</i> CHEW 2.5mg, 5mg, 10mg	4	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl</i> SOLN 5mg/5ml	4	QL (1800 mL / 30 days), PA
<i>methylphenidate hcl</i> SOLN 10mg/5ml	4	QL (900 mL / 30 days), PA
<i>methylphenidate hcl</i> TABS 5mg, 10mg	3	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl</i> TABS 20mg	3	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl</i> TBCR 10mg, 20mg	4	QL (90 tabs / 30 days), PA

HYPNOTICS

<i>DAYVIGO</i> TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep)</i> TABS 3mg, 6mg	3	QL (30 tabs / 30 days)
<i>eszopiclone</i> TABS 1mg, 2mg, 3mg	4	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>tasimelteon</i> CAPS 20mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>temazepam</i> CAPS 7.5mg, 30mg	4	QL (30 caps / 30 days), PA; PA applies if 65 years and older
<i>temazepam</i> CAPS 15mg	4	QL (60 caps / 30 days), PA; PA applies if 65 years and older

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>zaleplon</i> CAPS 5mg	3	QL (30 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zaleplon</i> CAPS 10mg	3	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate</i> TABS 5mg, 10mg	2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE

<i>AIMOVIG</i> SOAJ 70mg/ml, 140mg/ml	3	QL (1 pen / 30 days), NM, PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	5	NDS
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml	5	NDS, QL (8 mL / 30 days), PA
<i>EMGALITY</i> SOAJ 120mg/ml	3	QL (2 pens / 30 days), NM, PA
<i>EMGALITY</i> SOSY 100mg/ml	3	QL (3 syringes / 30 days), NM, PA
<i>EMGALITY</i> SOSY 120mg/ml	3	QL (2 syringes / 30 days), NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	3	QL (40 tabs / 28 days), PA
<i>naratriptan hcl</i> TABS 1mg, 2.5mg	3	QL (12 tabs / 30 days)
<i>NURTEC</i> TBDP 75mg	3	QL (16 tabs / 30 days), PA
<i>QULIPTA</i> TABS 10mg, 30mg, 60mg	3	QL (30 tabs / 30 days), PA
<i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg	3	QL (18 tabs / 30 days)
<i>sumatriptan</i> SOLN 5mg/act	4	QL (24 units / 30 days)
<i>sumatriptan</i> SOLN 20mg/act	4	QL (12 units / 30 days)
<i>sumatriptan succinate</i> SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	4	QL (18 injections / 30 days)
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	4	QL (12 injections / 30 days)
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	2	QL (12 tabs / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
UBRELVY TABS 50mg, 100mg	3	QL (16 tabs / 30 days), PA
MISCELLANEOUS		
AUSTEDO TABS 6mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	5	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 6mg	5	NDS, QL (90 tabs / 30 days), NM, PA
AUSTEDO XR TB24 12mg	5	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 18mg, 24mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO XR TB24 30mg, 36mg, 42mg, 48mg	5	NDS, QL (30 tabs / 30 days), NM, PA
AUSTEDO XR TAB TITR KIT	5	NDS, QL (2 packs / year), NM, PA
<i>lithium</i> SOLN 8meq/5ml	4	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg	1	
<i>lithium carbonate</i> TBCR 300mg, 450mg	2	
NUEDEXTA CAP 20-10MG	5	NDS, QL (60 caps / 30 days), PA
<i>pyridostigmine bromide</i> TABS 60mg	3	
<i>riluzole</i> TABS 50mg	4	
<i>tetrabenazine</i> TABS 12.5mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	5	NDS, QL (120 tabs / 30 days), NM, PA
MULTIPLE SCLEROSIS AGENTS		
BAFIERTAM CPDR 95mg	5	NDS, QL (120 caps / 30 days), NM, PA
BETASERON KIT .3mg	5	NDS, QL (14 syringes / 28 days), NM, PA
COPAXONE SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
COPAXONE SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
<i>dalfampridine</i> TB12 10mg	3	QL (60 tabs / 30 days), NM, PA
<i>fingolimod hcl</i> CAPS .5mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>glatiramer acetate</i> SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
<i>glatopa</i> SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
KESIMPTA SOAJ 20mg/0.4ml	5	NDS, QL (16 pens / 365 days), NM, PA

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen</i> TABS 5mg	2	QL (90 tabs / 30 days)
<i>baclofen</i> TABS 10mg, 20mg	2	
<i>carisoprodol</i> TABS 350mg	3	QL (120 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	4	
<i>methocarbamol</i> TABS 500mg	3	QL (360 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>methocarbamol</i> TABS 750mg	3	QL (240 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>tizanidine hcl</i> TABS 2mg, 4mg	2	

NARCOLEPSY/CATAPLEXY

<i>armodafinil</i> TABS 50mg	4	QL (60 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	4	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 100mg	3	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 200mg	3	QL (60 tabs / 30 days), PA
SODIUM OXYBATE SOLN 500mg/ml	5	NDS, QL (540 mL / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
PSYCHOTHERAPEUTIC-MISC		
<i>acamprosate calcium TBEC 333mg</i>	4	
<i>buprenorphine hcl SUBL 2mg, 8mg</i>	3	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	4	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) TB12 150mg</i>	2	QL (60 tabs / 30 days)
<i>disulfiram TABS 250mg, 500mg</i>	3	
<i>naloxone hcl LIQD 4mg/0.1ml</i>	3	
<i>naloxone hcl SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml</i>	2	
<i>naltrexone hcl TABS 50mg</i>	3	
<i>NICOTROL INHALER INHA 10mg</i>	4	
<i>NICOTROL NS SOLN 10mg/ml</i>	4	
<i>varenicline tartrate TABS .5mg, 1mg</i>	4	QL (56 tabs / 28 days)
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	4	QL (2 packs / year)
<i>VIVITROL SUSR 380mg</i>	5	NDS, NM
ENDOCRINE AND METABOLIC		
ANDROGENS		
<i>danazol CAPS 50mg, 100mg, 200mg</i>	4	
<i>depo-testosterone SOLN 100mg/ml, 200mg/ml</i>	3	PA
<i>methyltestosterone CAPS 10mg</i>	5	NDS, QL (600 caps / 30 days), PA
<i>testosterone GEL 1%, 25mg/2.5gm, 50mg/5gm</i>	4	QL (300 gm / 30 days), PA
<i>testosterone cypionate SOLN 100mg/ml, 200mg/ml</i>	3	PA
<i>testosterone enanthate SOLN 200mg/ml</i>	3	PA
<i>testosterone pump GEL 1.62%</i>	4	QL (150 gm / 30 days), PA
ANTIDIABETICS		
<i>acarbose TABS 25mg, 50mg, 100mg</i>	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
FARXIGA TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
<i>glimepiride</i> TABS 1mg, 2mg	1	QL (90 tabs / 30 days)
<i>glimepiride</i> TABS 4mg	1	QL (60 tabs / 30 days)
<i>glipizide</i> TABS 5mg	1	QL (240 tabs / 30 days)
<i>glipizide</i> TABS 10mg	1	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	1	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	1	QL (60 tabs / 30 days)
<i>glipizide xl</i> TB24 2.5mg, 5mg	1	QL (90 tabs / 30 days)
<i>glipizide xl</i> TB24 10mg	1	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg, 25mg	3	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	3	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	1	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	1	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	1	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	1	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	1	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	3	QL (4 pens / 28 days), PA
<i>nateglinide</i> TABS 60mg, 120mg	1	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN 2mg/1.5ml	3	QL (1 pen / 28 days), PA
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	3	QL (1 pen / 28 days), PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	3	QL (1 pen / 28 days), PA
pioglitazone hcl TABS 15mg, 30mg, 45mg	1	QL (30 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-500 mg	1	QL (90 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-850 mg	1	QL (90 tabs / 30 days)
repaglinide TABS 2mg	1	QL (240 tabs / 30 days)
repaglinide TABS .5mg, 1mg	1	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	3	QL (30 tabs / 30 days), PA
SYNJARDY TAB 5-500MG	3	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	3	QL (30 tabs / 30 days)
TRADJENTA TABS 5mg	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	3	QL (30 tabs / 30 days)
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	3	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)

ANTIDIABETICS, INSULINS

ADMELOG SOLN 100unit/ml	3	
ADMELOG SOLOSTAR SOPN 100unit/ml	3	
ALCOHOL SWABS: BD-EMBECTA/MHC/RUGBY	3	PA
BASAGLAR KWIKPEN SOPN 100unit/ml	3	
CEQUR SIMPL KIT PATCH 2U (3-DAY)	4	QL (10 patches / 30 days), PA
CEQUR SIMPL KIT PATCH 2U (4-DAY)	4	QL (8 patches / 24 days), PA
CEQUR SIMPL MIS INSERTER	4	QL (2 inserters / year), PA
FIASP SOLN 100unit/ml	3	
FIASP FLEXTOUCH SOPN 100unit/ml	3	
FIASP PENFILL SOCT 100unit/ml	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
FIASP PUMPCART SOCT 100unit/ml	3	B/D
GAUZE PADS 2" X 2"	3	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	5	NDS, B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	5	NDS
INSULIN PEN NEEDLES: BD-EMBECTA	3	PA
INSULIN SAFETY NEEDLES: BD-EMBECTA	3	PA
INSULIN SYRINGES: BD-EMBECTA	3	PA
NOVOLIN INJ 70/30	3	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	3	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	3	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	3	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	3	(brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	3	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	3	(brand RELION not covered)
NOVOLOG FLEXPEN SOPN 100unit/ml	3	(brand RELION not covered)
NOVOLOG MIX INJ 70/30	3	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	3	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	3	(brand RELION not covered)
OMNIPOD 5 DX KIT INT G7G6	4	QL (1 kit / year), PA
OMNIPOD 5 DX MIS POD G7G6	4	QL (15 pods / 30 days), PA
OMNIPOD 5 G7 KIT INTRO	4	QL (1 kit / year), PA
OMNIPOD 5 G7 MIS PODS	4	QL (15 pods / 30 days), PA
OMNIPOD 5 L2 KIT INTRO G6	4	QL (1 kit / year), PA
OMNIPOD 5 L2 MIS PODS G6	4	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	4	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 10UNT/DY	4	QL (15 pods / 30 days), PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
OMNIPOD GO KIT 15UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 20UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 25UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 30UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 35UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 40UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD MIS CLASSIC	4	QL (15 pods / 30 days), PA
SOLIQUA INJ 100/33	3	QL (5 pens / 25 days)
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	3	
TOUJEO SOLOSTAR SOPN 300unit/ml	3	
TRESIBA SOLN 100unit/ml	3	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	3	
XULTOPHY INJ 100/3.6	3	QL (5 pens / 30 days)

CALCIUM REGULATORS

alendronate sodium SOLN 70mg/75ml	4	ST
alendronate sodium TABS 10mg, 35mg, 70mg	1	
BONSITY SOPN 560mcg/2.24ml	5	NDS, NM, PA
calcitonin (salmon) spray SOLN 200unit/act	3	B/D
ibandronate sodium TABS 150mg	2	B/D
PAMIDRONATE DISODIUM SOLN 6mg/ml	3	B/D
pamidronate disodium SOLN 30mg/10ml, 90mg/10ml	3	B/D
PROLIA SOSY 60mg/ml	4	QL (1 syringe / 180 days), NM
risedronate sodium TABS 5mg, 35mg, 150mg	3	
risedronate sodium TBEC 35mg	4	ST
TERIPARATIDE SOPN 560mcg/2.24ml	5	NDS, NM, PA; (ALVOGEN product)
WYOST SOLN 120mg/1.7ml	5	NDS, NM, PA
XGEVA SOLN 120mg/1.7ml	5	NDS, NM, PA
zoledronic acid CONC 4mg/5ml; SOLN 5mg/100ml	4	B/D, NM

CHELATING AGENTS

CHEMET CAPS 100mg	5	NDS
deferasirox TABS 90mg	3	NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>deferasirox</i> TABS 180mg, 360mg; TBSO 125mg	4	NM, PA
<i>deferasirox</i> TBSO 250mg, 500mg	5	NDS, NM, PA
<i>kionex</i> SUSP 15gm/60ml	3	
<i>LOKELMA</i> PACK 5gm, 10gm	3	
<i>penicillamine</i> TABS 250mg	5	NDS, NM
<i>sodium polystyrene sulfonate powder</i>	3	
<i>sps</i> SUSP 15gm/60ml	3	
<i>sps rectal</i> SUSP 15gm/60ml	3	
<i>trientine hcl</i> CAPS 250mg	5	NDS, NM, PA
CONTRACEPTIVES		
<i>afirmelle</i>	2	
<i>altavera</i>	3	
<i>alyacen 1/35</i>	3	
<i>alyacen 7/7/7</i>	3	
<i>amethia</i>	3	
<i>amethyst</i>	3	
<i>apri</i>	2	
<i>aranelle</i>	3	
<i>ashlyna</i>	3	
<i>aubra eq</i>	2	
<i>aurovela 1/20</i>	3	
<i>aurovela 24 fe</i>	3	
<i>aurovela fe 1.5/30</i>	2	
<i>aurovela fe 1/20</i>	2	
<i>aviane</i>	2	
<i>ayuna</i>	3	
<i>azurette</i>	3	
<i>balziva</i>	3	
<i>blisovi 24 fe</i>	3	
<i>blisovi fe 1.5/30</i>	2	
<i>briellyn</i>	3	
<i>camila</i> TABS .35mg	2	
<i>camrese</i>	3	
<i>camrese lo</i>	3	
<i>chateal eq</i>	3	
<i>cryselle-28</i>	3	
<i>cyred eq</i>	2	
<i>dasetta 1/35</i>	3	
<i>dasetta 7/7/7</i>	3	
<i>daysee</i>	3	
<i>deblitane</i> TABS .35mg	2	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier Requirements/Limits
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	3
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	3
<i>dolishale</i>	3
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	3
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	3
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	3
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	3
<i>elinest</i>	3
<i>eluryng</i>	3
<i>emzahh TABS .35mg</i>	2
<i>enilloring</i>	3
<i>enpresse-28</i>	2
<i>enskyce</i>	2
<i>errin TABS .35mg</i>	2
<i>estarrylla</i>	2
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	2
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	3
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	3
<i>falmina</i>	2
<i>feirza 1.5/30</i>	2
<i>feirza 1/20</i>	2
<i>finzala</i>	3
<i>galbriela</i>	3
<i>hailey 1.5/30</i>	3
<i>hailey 24 fe</i>	3
<i>haloette</i>	3
<i>heather TABS .35mg</i>	2
<i>iclevia</i>	3
<i>incassia TABS .35mg</i>	2
<i>introvale</i>	3
<i>isibloom</i>	2
<i>jaimiess</i>	3
<i>jasmiel</i>	3
<i>jolessa</i>	3
<i>juleber</i>	2
<i>junel 1.5/30</i>	3

Mahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>junel 1/20</i>	3	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	
<i>junel fe 24</i>	3	
<i>kaitlib fe</i>	3	
<i>kariva</i>	3	
<i>kelnor 1/35</i>	2	
<i>kelnor 1/50</i>	3	
<i>kurvelo</i>	3	
<i>larin 1.5/30</i>	3	
<i>larin 1/20</i>	3	
<i>larin 24 fe</i>	3	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>layolis fe</i>	3	
<i>lessina</i>	2	
<i>levonest</i>	2	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	3	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	3	
<i>levonorgestrel & ethynodiolide (91-day) tab 0.15-0.03 mg</i>	3	
<i>levonorgestrel & ethynodiolide tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel & ethynodiolide tab 0.15 mg-30 mcg</i>	3	
<i>levonorgestrel-ethynodiolide tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorgestrel-ethynodiolide (continuous) tab 90-20 mcg</i>	3	
<i>levora 0.15/30-28</i>	3	
<i>LILETTA IUD 20.1mcg/day</i>	3	NM
<i>loestrin 1.5/30-21</i>	3	
<i>loestrin 1/20-21</i>	3	
<i>loestrin fe 1.5/30</i>	2	
<i>loestrin fe 1/20</i>	2	
<i>lojaimiess</i>	3	
<i>loryna</i>	3	
<i>low-ogestrel</i>	3	
<i>lutera</i>	2	
<i>lyleq TABS .35mg</i>	2	
<i>lyza TABS .35mg</i>	2	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>marlissa</i>	3	
<i>medroxyprogesterone acetate (contraceptive)</i>	3	
<i>SUSP 150mg/ml; SUSY 150mg/ml</i>		
<i>meleya TABS .35mg</i>	2	
<i>mibelas 24 fe</i>	3	
<i>microgestin 1.5/30</i>	3	
<i>microgestin 1/20</i>	3	
<i>microgestin fe 1.5/30</i>	2	
<i>microgestin fe 1/20</i>	2	
<i>milli</i>	2	
<i>mono-linyah</i>	2	
<i>necon 0.5/35-28</i>	3	
<i>NEXPLANON IMPL 68mg</i>	3	NM
<i>nikki</i>	3	
<i>nora-be TABS .35mg</i>	2	
<i>norelgestromin-ethynodiol-17α-estradiol tab 150-35 mcg/24hr</i>	3	
<i>norethindrone & ethynodiol-17α-estradiol-fe chew tab 0.4 mg-35 mcg</i>	3	
<i>norethindrone (contraceptive) TABS .35mg</i>	2	
<i>norethindrone ac-ethynodiol-17α-estradiol tab 1-20/1-30/1-35 mg-mcg</i>	3	
<i>norethindrone ace & ethynodiol-17α-estradiol tab 1 mg-20 mcg</i>	3	
<i>norethindrone ace & ethynodiol-17α-estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace-ethynodiol-17α-estradiol-fe chew tab 1 mg-20 mcg (24)</i>	3	
<i>norgestimate & ethynodiol-17α-estradiol tab 0.25 mg-35 mcg</i>	2	
<i>norgestimate-ethynodiol-17α-estradiol tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	3	
<i>norgestimate-ethynodiol-17α-estradiol tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	3	
<i>norlyroc TABS .35mg</i>	2	
<i>nortrel 0.5/35 (28)</i>	3	
<i>nortrel 1/35 (21)</i>	3	
<i>nortrel 1/35 (28)</i>	3	
<i>nortrel 7/7/7</i>	3	
<i>nylia 1/35</i>	3	
<i>nylia 7/7/7</i>	3	
<i>ocella</i>	3	
<i>orquidea TABS .35mg</i>	2	

Mahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier Requirements/Limits
<i>philith</i>	3
<i>pimtrea</i>	3
<i>portia-28</i>	3
<i>reclipsen</i>	2
<i>rivelsa</i>	3
<i>rosyrah</i>	3
<i>setlakin</i>	3
<i>sharobel TABS .35mg</i>	2
<i>simliya</i>	3
<i>simpesse</i>	3
<i>sprintec 28</i>	2
<i>sronyx</i>	2
<i>syeda</i>	3
<i>tarina 24 fe</i>	3
<i>tarina fe 1/20 eq</i>	2
<i>tilia fe</i>	3
<i>tri-estarylla</i>	3
<i>tri-legest fe</i>	3
<i>tri-linyah</i>	3
<i>tri-lo-estarylla</i>	3
<i>tri-lo-marzia</i>	3
<i>tri-lo-mili</i>	3
<i>tri-lo-sprintec</i>	3
<i>tri-mili</i>	3
<i>tri-nymyo</i>	3
<i>tri-sprintec</i>	3
<i>tri-vylitra</i>	3
<i>tri-vylitra lo</i>	3
<i>turqoz</i>	3
<i>tydemy</i>	3
<i>valtya 1/50</i>	3
<i>velivet</i>	3
<i>vestura</i>	3
<i>vienva</i>	2
<i>viorele</i>	3
<i>vyfemla</i>	3
<i>vylitra</i>	2
<i>wera</i>	3
<i>wymzya fe</i>	3
<i>xarah fe</i>	3
<i>xelria fe</i>	3
<i>xulane</i>	3

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier Requirements/Limits
<i>zafemy</i>	3
<i>zovia 1/35</i>	2
<i>zumandimine</i>	3
<i>ESTROGENS</i>	
<i>abigale</i>	3
<i>abigale lo</i>	3
<i>dotti PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr</i>	3
<i>estradiol PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr</i>	3
<i>estradiol TABS .5mg, 1mg, 2mg</i>	2
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	3
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	3
<i>estradiol vaginal CREA .1mg/gm</i>	3
<i>estradiol vaginal TABS 10mcg</i>	4
<i>estradiol valerate OIL 10mg/ml, 20mg/ml, 40mg/ml</i>	4
<i>fyavolv tab 0.5mg-2.5mcg</i>	3
<i>fyavolv tab 1mg-5mcg</i>	3
<i>jinteli</i>	3
<i>lyllana PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr</i>	3
<i>mimvey</i>	3
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	3
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	3
<i>yuvafem TABS 10mcg</i>	4
<i>GLUCOCORTICOIDS</i>	
<i>dexamethasone ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg</i>	3
<i>DEXAMETHASONE INTENSOL CONC 1mg/ml</i>	4
<i>dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml</i>	3
<i>fludrocortisone acetate TABS .1mg</i>	2
<i>hydrocortisone TABS 5mg, 10mg, 20mg</i>	3
<i>hydrocortisone sod succinate SOLR 100mg</i>	4

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name		Drug Tier	Requirements/Limits
<i>methylprednisolone</i> TABS 4mg, 8mg, 16mg, 32mg		3	B/D
<i>methylprednisolone</i> TBPK 4mg		2	
<i>methylprednisolone acetate</i> SUSP 40mg/ml, 80mg/ml		3	B/D
<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg, 1000mg		3	B/D
<i>prednisolone</i> SOLN 15mg/5ml		2	B/D
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 25mg/5ml		4	B/D
<i>prednisolone sodium phosphate</i> SOLN 15mg/5ml		2	B/D
<i>prednisone</i> SOLN 5mg/5ml		4	B/D
<i>prednisone</i> TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg		1	B/D
<i>prednisone</i> TBPK 5mg, 10mg		3	
PREDNISONE INTENSOL CONC 5mg/ml		4	B/D
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg		4	
GLUCOSE ELEVATING AGENTS			
<i>diazoxide</i> SUSP 50mg/ml		5	NDS
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml		3	
MISCELLANEOUS			
ALDURAZYME SOLN 2.9mg/5ml		5	NDS, NM, PA
<i>betaine powder for oral solution</i>		5	NDS, NM
<i>cabergoline</i> TABS .5mg		3	
<i>carglumic acid</i> TBSO 200mg		5	NDS, NM, PA
CERDELGA CAPS 84mg		5	NDS, NM, PA
CEREZYME SOLR 400unit		5	NDS, NM, PA
<i>cinacalcet hcl</i> TABS 30mg, 60mg		4	B/D, QL (60 tabs / 30 days), NM
<i>cinacalcet hcl</i> TABS 90mg		5	NDS, B/D, QL (120 tabs / 30 days), NM
CYSTAGON CAPS 50mg, 150mg		4	NM, PA
<i>desmopressin acetate</i> SOLN 4mcg/ml		5	NDS
<i>desmopressin acetate</i> TABS .1mg, .2mg		3	
<i>desmopressin acetate spray</i> SOLN .01%		4	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%		4	
FABRAZYME SOLR 5mg, 35mg		5	NDS, NM, PA
GENOTROPIN CART 5mg, 12mg		5	NDS, NM, PA
GENOTROPIN MINIQUICK PRSY .2mg		3	NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	5	NDS, NM, PA
INCRELEX SOLN 40mg/4ml	5	NDS, NM, PA
javygtor PACK 100mg, 500mg; TABS 100mg	5	NDS, NM, PA
lanreotide acetate SOLN 120mg/0.5ml	5	NDS, NM, PA
levocarnitine (metabolic modifiers) SOLN 1gm/10ml; TABS 330mg	4	B/D
LUMIZYME SOLR 50mg	5	NDS, NM, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	5	NDS, NM, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	5	NDS, NM, PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg	5	NDS, NM, PA
mifepristone (hyperglycemia) TABS 300mg	5	NDS, NM, PA
NAGLAZYME SOLN 1mg/ml	5	NDS, NM, PA
nitisinone CAPS 2mg, 5mg, 10mg, 20mg	5	NDS, NM, PA
octreotide acetate SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	4	NM, PA
octreotide acetate SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml	5	NDS, NM, PA
raloxifene hcl TABS 60mg	3	
sapropterin dihydrochloride PACK 100mg, 500mg; TABS 100mg	5	NDS, NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	5	NDS, NM, PA
sodium phenylbutyrate POWD 3gm/tsp; TABS 500mg	5	NDS, NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	5	NDS, NM, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	5	NDS, NM, PA
SYNAREL SOLN 2mg/ml	5	NDS, PA
VEOZAH TABS 45mg	4	PA
PROGESTINS		
gallifrey TABS 5mg	3	
medroxyprogesterone acetate TABS 2.5mg, 5mg, 10mg	1	
megestrol acetate SUSP 40mg/ml	3	
megestrol acetate (appetite) SUSP 625mg/5ml	4	PA
norethindrone acetate TABS 5mg	3	
progesterone CAPS 100mg, 200mg	3	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
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THYROID AGENTS

<i>levo-t</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1
<i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1
<i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1
<i>liothyronine sodium</i> TABS 5mcg, 25mcg, 50mcg	3
<i>methimazole</i> TABS 5mg, 10mg	1
<i>propylthiouracil</i> TABS 50mg	3
<i>SYNTHROID</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	4
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1

VITAMIN D ANALOGS

<i>calcitriol</i> CAPS .25mcg, .5mcg	2	B/D
<i>calcitriol (oral)</i> SOLN 1mcg/ml	4	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	4	B/D

GASTROINTESTINAL

ANTIEMETICS

<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	4	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	4	B/D
<i>compro</i> SUPP 25mg	4	
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	4	B/D, QL (60 caps / 30 days)
<i>gransetron hcl</i> SOLN 1mg/ml, 4mg/4ml	4	
<i>gransetron hcl</i> TABS 1mg	4	B/D
<i>meclizine hcl</i> TABS 12.5mg, 25mg	2	
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml	3	
<i>metoclopramide hcl</i> TABS 5mg, 10mg	1	
<i>ondansetron</i> TBDP 4mg, 8mg	3	B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	3	
<i>ondansetron hcl</i> SOLN 4mg/5ml	4	B/D
<i>ondansetron hcl</i> TABS 4mg, 8mg	3	B/D
<i>prochlorperazine</i> SUPP 25mg	4	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	2	
<i>promethazine hcl</i> SOLN 6.25mg/5ml, 25mg/ml, 50mg/ml; TABS 12.5mg, 25mg, 50mg	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>scopolamine</i> PT72 1mg/3days	4	QL (10 patches / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year

ANTISPASMODICS

<i>dicyclomine hcl</i> CAPS 10mg; TABS 20mg	3
<i>dicyclomine hcl</i> SOLN 10mg/5ml	4
<i>glycopyrrolate</i> TABS 1mg	3
<i>glycopyrrolate</i> TABS 2mg	3

H2-RECEPTOR ANTAGONISTS

<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	3
<i>famotidine</i> SUSR 40mg/5ml	4
<i>famotidine</i> TABS 20mg, 40mg	1
<i>famotidine in nacl 0.9% iv soln</i> 20 mg/50ml	3
<i>nizatidine</i> CAPS 150mg, 300mg	4

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium</i> CAPS 750mg	3
<i>budesonide</i> CPEP 3mg	4
<i>budesonide</i> TB24 9mg	5
<i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml	4
<i>mesalamine</i> CP24 .375gm	4
<i>mesalamine</i> CPDR 400mg	4
<i>mesalamine</i> ENEM 4gm	4
<i>mesalamine</i> SUPP 1000mg	4
<i>mesalamine</i> TBEC 1.2gm	4
<i>mesalamine w/ cleanser</i> KIT 4gm	4
<i>sulfasalazine</i> TABS 500mg	2
<i>sulfasalazine</i> TBEC 500mg	3

LAXATIVES

<i>constulose</i> SOLN 10gm/15ml	3
<i>enulose</i> SOLN 10gm/15ml	3
<i>gavilyte-c</i>	2

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>gavilyte-g</i>	2	
<i>gavilyte-n/flavor pack</i>	2	
<i>generlac SOLN 10gm/15ml</i>	3	
<i>lactulose SOLN 10gm/15ml</i>	3	
<i>lactulose (encephalopathy) SOLN 10gm/15ml</i>	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	
<i>PLENVU SOL</i>	4	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	3	
MISCELLANEOUS		
<i>alosetron hcl TABS 1mg</i>	5	NDS, QL (60 tabs / 30 days), PA
<i>alosetron hcl TABS .5mg</i>	4	QL (60 tabs / 30 days), PA
<i>CREON CAP 3000UNIT</i>	3	
<i>CREON CAP 6000UNIT</i>	3	
<i>CREON CAP 12000UNT</i>	3	
<i>CREON CAP 24000UNT</i>	3	
<i>CREON CAP 36000UNT</i>	3	
<i>cromolyn sodium (mastocytosis) CONC 100mg/5ml</i>	4	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	4	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	3	
<i>GATTEX KIT 5mg</i>	5	NDS, NM, PA
<i>LINZESS CAPS 72mcg, 145mcg, 290mcg</i>	3	QL (30 caps / 30 days)
<i>loperamide hcl CAPS 2mg</i>	3	
<i>misoprostol TABS 100mcg, 200mcg</i>	3	
<i>MOVANTIK TABS 12.5mg, 25mg</i>	3	QL (30 tabs / 30 days)
<i>RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml</i>	5	NDS, QL (28 syringes / 28 days), PA
<i>sucralfate TABS 1gm</i>	3	
<i>ursodiol CAPS 300mg</i>	3	
<i>ursodiol TABS 250mg, 500mg</i>	4	
<i>VOWST CAP</i>	5	NDS, QL (12 caps / 30 days), NM, PA
<i>XERMELO TABS 250mg</i>	5	NDS, QL (84 tabs / 28 days), NM, PA
<i>XIFAXAN TABS 550mg</i>	5	NDS, PA
<i>ZENPEP CAP 3000UNIT</i>	4	
<i>ZENPEP CAP 5000UNIT</i>	4	
<i>ZENPEP CAP 10000UNT</i>	4	

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 15000UNT	4	
ZENPEP CAP 20000UNT	4	
ZENPEP CAP 25000UNT	4	
ZENPEP CAP 40000UNT	4	
ZENPEP CAP 60000UNT	4	
PROTON PUMP INHIBITORS		
<i>esomeprazole magnesium</i> CPDR 20mg, 40mg	3	QL (30 caps / 30 days), ST
<i>lansoprazole</i> CPDR 15mg, 30mg	3	QL (60 caps / 30 days)
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1	
<i>pantoprazole sodium</i> SOLR 40mg	4	
<i>pantoprazole sodium</i> TBEC 20mg, 40mg	1	
<i>rabeprazole sodium</i> TBEC 20mg	3	QL (30 tabs / 30 days)
GENITOURINARY		
BENIGN PROSTATIC HYPERPLASIA		
<i>alfuzosin hcl</i> TB24 10mg	2	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	3	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	3	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	1	QL (30 tabs / 30 days)
<i>tadalafil</i> TABS 5mg	3	QL (30 tabs / 30 days), PA
<i>tamsulosin hcl</i> CAPS .4mg	1	QL (60 caps / 30 days)
MISCELLANEOUS		
<i>acetic acid</i> SOLN .25%	2	
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	3	
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	3	
URINARY ANTISPASMODICS		
<i>fesoterodine fumarate</i> TB24 4mg, 8mg	4	QL (30 tabs / 30 days)
<i>GEMTESA</i> TABS 75mg	4	QL (30 tabs / 30 days)
<i>MYRBETRIQ</i> SRER 8mg/ml	4	QL (300 mL / 28 days)
<i>MYRBETRIQ</i> TB24 25mg, 50mg	4	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SOLN 5mg/5ml	3	QL (600 mL / 30 days)
<i>oxybutynin chloride</i> TABS 5mg	3	QL (120 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 5mg	3	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	3	QL (60 tabs / 30 days)
<i>solifenacin succinate</i> TABS 5mg, 10mg	4	QL (30 tabs / 30 days)
<i>tolterodine tartrate</i> CP24 2mg, 4mg	4	QL (30 caps / 30 days), ST
<i>tolterodine tartrate</i> TABS 1mg, 2mg	4	QL (60 tabs / 30 days)
<i>trospium chloride</i> TABS 20mg	3	QL (60 tabs / 30 days)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
VAGINAL ANTI-INFECTIVES		
<i>clindamycin phosphate vaginal CREA 2%</i>	3	
<i>metronidazole vaginal GEL .75%</i>	3	
<i>terconazole vaginal CREA .4%, .8%; SUPP 80mg</i>	3	
HEMATOLOGIC		
ANTICOAGULANTS		
<i>dabigatran etexilate mesylate CAPS 75mg, 150mg</i>	4	QL (60 caps / 30 days)
<i>dabigatran etexilate mesylate CAPS 110mg</i>	4	QL (120 caps / 30 days)
<i>ELIQUIS TABS 2.5mg</i>	3	QL (60 tabs / 30 days)
<i>ELIQUIS TABS 5mg</i>	3	QL (74 tabs / 30 days)
<i>ELIQUIS STARTER PACK TBPK 5mg</i>	3	QL (74 tabs / 30 days)
<i>enoxaparin sodium SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml</i>	4	
<i>fondaparinux sodium SOLN 2.5mg/0.5ml</i>	4	
<i>fondaparinux sodium SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml</i>	5	NDS
<i>HEP SOD/NACL INJ 25000UNT</i>	3	
<i>heparin sodium (porcine) SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml</i>	3	B/D
<i>jantoven TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg</i>	1	
<i>rivaroxaban TABS 2.5mg</i>	3	QL (60 tabs / 30 days)
<i>warfarin sodium TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg</i>	1	
<i>XARELTO SUSR 1mg/ml</i>	3	QL (620 mL / 30 days)
<i>XARELTO TABS 2.5mg</i>	3	QL (60 tabs / 30 days)
<i>XARELTO TABS 10mg, 15mg, 20mg</i>	3	QL (30 tabs / 30 days)
<i>XARELTO STAR TAB 15/20MG</i>	3	QL (51 tabs / 30 days)
HEMATOPOIETIC GROWTH FACTORS		
<i>FULPHILA SOSY 6mg/0.6ml</i>	5	NDS, QL (2 syringes / 28 days), NM, PA
<i>PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml</i>	3	NM, PA
<i>PROCRIT SOLN 20000unit/ml, 40000unit/ml</i>	5	NDS, NM, PA
<i>ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml</i>	5	NDS, NM, PA
MISCELLANEOUS		
<i>ALVAIZ TABS 9mg, 54mg</i>	5	NDS, QL (60 tabs / 30 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
ALVAIZ TABS 18mg, 36mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>anagrelide hcl</i> CAPS .5mg, 1mg	4	
BERINERT KIT 500unit	5	NDS, QL (24 boxes / 30 days), NM, PA
<i>cilostazol</i> TABS 50mg, 100mg	2	
DOPTELET TABS 20mg	5	NDS, NM, PA
HAEGARDA SOLR 2000unit	5	NDS, QL (30 vials / 30 days), NM, PA
HAEGARDA SOLR 3000unit	5	NDS, QL (20 vials / 30 days), NM, PA
<i>icatibant acetate</i> SOSY 30mg/3ml	5	NDS, QL (9 syringes / 30 days), NM, PA
<i>L-glutamine (sickle cell)</i> PACK 5gm	5	NDS, NM, PA
<i>pentoxifylline</i> TBCR 400mg	2	
<i>sajazir</i> SOSY 30mg/3ml	5	NDS, QL (9 syringes / 30 days), NM, PA
SIKLOS TABS 100mg	4	
SIKLOS TABS 1000mg	5	NDS
TAVNEOS CAPS 10mg	5	NDS, QL (180 caps / 30 days), NM, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml	4	
<i>tranexamic acid</i> TABS 650mg	3	
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	4	
BRILINTA TABS 60mg, 90mg	3	
<i>clopidogrel bisulfate</i> TABS 75mg	1	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg	3	PA; PA applies if 70 years and older
<i>prasugrel hcl</i> TABS 5mg, 10mg	3	
<i>ticagrelor</i> TABS 60mg, 90mg	3	
IMMUNOLOGIC AGENTS		
AUTOIMMUNE AGENTS		
ADALIMUMAB-AACF (2 PEN) AJKT 40mg/0.8ml	5	NDS, QL (56 pens / 365 days), NM, PA
ADALIMUMAB-AACF (2 SYRING PSKT 40mg/0.8ml	5	NDS, QL (56 syringes / 365 days), NM, PA
ADALIMUMAB-AACF STARTER P AJKT 40mg/0.8ml	5	NDS, QL (2 packs / year), NM, PA
COSENTYX SOLN 125mg/5ml	5	NDS, NM, PA
COSENTYX SOSY 75mg/0.5ml	5	NDS, QL (16 syringes / 365 days), NM, PA

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
COSENTYX SOSY 150mg/ml	5	NDS, QL (32 syringes / 365 days), NM, PA
COSENTYX SENSOREADY PEN SOAJ 150mg/ml	5	NDS, QL (32 pens / 365 days), NM, PA
COSENTYX UNOREADY SOAJ 300mg/2ml	5	NDS, QL (16 pens / 365 days), NM, PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml	5	NDS, QL (4 pens / 28 days), NM, PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
ENBREL SOLN 25mg/0.5ml	5	NDS, QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	5	NDS, QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
ENBREL MINI SOCT 50mg/ml	5	NDS, QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml	5	NDS, QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 20mg/0.2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 syringes / 28 days), NM, PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 pens / 28 days), NM, PA
HUMIRA PEN AJKT 80mg/0.8ml	5	NDS, QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	5	NDS, QL (3 pens / 28 days), NM, PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml	5	NDS, QL (3 pens / 28 days), NM, PA
HUMIRA PEN-PEDIATRIC UC S AJKT 80mg/0.8ml	5	NDS, QL (4 pens / 28 days), NM, PA
IDACIO (2 PEN) AJKT 40mg/0.8ml	5	NDS, QL (56 pens / 365 days), NM, PA
IDACIO (2 SYRINGE) PSKT 40mg/0.8ml	5	NDS, QL (56 syringes / 365 days), NM, PA
IDACIO CROHN INJ DISEASE AJKT 40mg/0.8ml	5	NDS, QL (2 packs / year), NM, PA
IDACIO PLAQU INJ PSORIASIS AJKT 40mg/0.8ml	5	NDS, QL (2 packs / year), NM, PA
INFLIXIMAB SOLR 100mg	5	NDS, NM, PA

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Drug Name	Drug Tier	Requirements/Limits
PYZCHIVA SOLN 130mg/26ml	5	NDS, NM, PA
PYZCHIVA SOSY 45mg/0.5ml	3	QL (1 syringe / 28 days), NM, PA
PYZCHIVA SOSY 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
REMICADE SOLR 100mg	5	NDS, NM, PA
RENFLEXIS SOLR 100mg	5	NDS, NM, PA
RINVOQ TB24 15mg, 30mg	5	NDS, QL (30 tabs / 30 days), NM, PA
RINVOQ TB24 45mg	5	NDS, QL (168 tabs / year), NM, PA
RINVOQ LQ SOLN 1mg/ml	5	NDS, QL (360 mL / 30 days), NM, PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	5	NDS, QL (1 cartridge / 56 days), NM, PA
SKYRIZI SOLN 600mg/10ml	5	NDS, NM, PA
SKYRIZI SOSY 150mg/ml	5	NDS, QL (6 syringes / 365 days), NM, PA
SKYRIZI PEN SOAJ 150mg/ml	5	NDS, QL (6 pens / 365 days), NM, PA
SOTYKTU TABS 6mg	5	NDS, QL (30 tabs / 30 days), NM, PA
STELARA SOLN 45mg/0.5ml	5	NDS, QL (1 vial / 28 days), NM, PA
STELARA SOLN 130mg/26ml	5	NDS, NM, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOAJ 100mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
TREMFYA SOAJ 200mg/2ml	5	NDS, QL (2 pens / 28 days), NM, PA
TREMFYA SOLN 200mg/20ml	5	NDS, NM, PA
TREMFYA SOSY 100mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOSY 200mg/2ml	5	NDS, QL (2 syringes / 28 days), NM, PA
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml	5	NDS, QL (2 pens / 28 days), NM, PA
TYENNE SOAJ 162mg/0.9ml	5	NDS, QL (4 pens / 28 days), NM, PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	5	NDS, NM, PA
TYENNE SOSY 162mg/0.9ml	5	NDS, QL (4 syringes / 28 days), NM, PA

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Drug Name	Drug Tier	Requirements/Limits
VELSIPITY TABS 2mg	5	NDS, QL (30 tabs / 30 days), NM, PA
XELJANZ SOLN 1mg/ml	5	NDS, QL (480 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	5	NDS, QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	5	NDS, QL (30 tabs / 30 days), NM, PA
YESINTEK SOLN 45mg/0.5ml	3	QL (1 vial / 28 days), NM, PA
YESINTEK SOLN 130mg/26ml	3	NM, PA
YESINTEK SOSY 45mg/0.5ml	3	QL (1 syringe / 28 days), NM, PA
YESINTEK SOSY 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDs)

hydroxychloroquine sulfate TABS 200mg	3
JYLAMVO SOLN 2mg/ml	4
leflunomide TABS 10mg, 20mg	3
methotrexate sodium TABS 2.5mg	3
XATMEP SOLN 2.5mg/ml	4

IMMUNOGLOBULINS

ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NDS, NM, PA
BIVIGAM SOLN 5gm/50ml, 10%	5	NDS, NM, PA
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	5	NDS, NM, PA
GAMASTAN INJ	4	B/D, NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	5	NDS, NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NDS, NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	5	NDS, NM, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NDS, NM, PA

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Drug Name	Drug Tier	Requirements/Limits
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NDS, NM, PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 100mcg/0.5ml	5	NDS, NM, PA
ARCALYST SOLR 220mg	5	NDS, NM, PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	5	NDS, B/D, NM
ASTAGRAF XL CP24 .5mg, 1mg	4	B/D, NM
<i>azathioprine</i> TABS 50mg	3	B/D
BENLYSTA SOAJ 200mg/ml; SOSY 200mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	5	NDS, NM, PA
<i>cyclosporine</i> CAPS 25mg, 100mg	4	B/D, NM
<i>cyclosporine modified (for microemulsion)</i> CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	4	B/D, NM
<i>everolimus (immunosuppressant)</i> TABS .25mg, .5mg, .75mg, 1mg	5	NDS, B/D, NM
<i>gengraf</i> CAPS 25mg, 100mg; SOLN 100mg/ml	4	B/D, NM
<i>mycophenolate mofetil</i> CAPS 250mg; TABS 500mg	3	B/D, NM
<i>mycophenolate mofetil</i> SUSR 200mg/ml	5	NDS, B/D, NM
<i>mycophenolate sodium</i> TBEC 180mg, 360mg	4	B/D, NM
NULOJIX SOLR 250mg	5	NDS, B/D, NM
PROGRAF PACK .2mg, 1mg	4	B/D, NM
REZUROCK TABS 200mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>sirolimus</i> SOLN 1mg/ml	5	NDS, B/D, NM
<i>sirolimus</i> TABS .5mg, 1mg, 2mg	4	B/D, NM
<i>tacrolimus</i> CAPS .5mg, 1mg, 5mg	4	B/D, NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	1	
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	

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Drug Name	Drug Tier	Requirements/Limits
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENGVAXIA SUS	1	
DIP/TET PED INJ 25-5LFU	1	B/D
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSP 1440elu/ml; SUSY 720elu/0.5ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOP INJ INACTIVE	1	
IXCHIQ INJ	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENACTRA INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml	1	QL (2 vials per lifetime)
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	

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Drug Name	Drug Tier Requirements/Limits
VAQTA SUSP 25unit/0.5ml, 50unit/ml	1
VARIVAX SUSR 1350pfu/0.5ml	1
VAXCHORA SUS	1
VIMKUNYA SUSY 40mcg/0.8ml	1
VIVOTIF CAP EC	1
YF-VAX INJ	1

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES/MINERALS, INJECTABLE

D2.5W/NACL INJ 0.45%	4
D10W/NACL INJ 0.2%	3
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	3
<i>dextrose 5% in lactated ringers</i>	3
<i>dextrose 5% w/ sodium chloride 0.2%</i>	3
<i>dextrose 5% w/ sodium chloride 0.3%</i>	3
<i>dextrose 5% w/ sodium chloride 0.9%</i>	3
<i>dextrose 5% w/ sodium chloride 0.45%</i>	3
<i>dextrose 5% w/ sodium chloride 0.225%</i>	3
<i>dextrose 10% w/ sodium chloride 0.45%</i>	3
ISOLYTE-P INJ /D5W	4
ISOLYTE-S INJ PH 7.4	4
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	3
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	3
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	3
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	3
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	3
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	3
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	3
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	3
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	3
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	3
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	3
KCL/D5W/NACL INJ 0.3/0.9%	4
<i>lactated ringer's solution</i>	3
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	3

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Drug Name	Drug Tier Requirements/Limits
<i>magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	3
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	3
<i>multiple electrolytes ph 5.5</i>	4
<i>multiple electrolytes ph 7.4</i>	4
POT CHL 20MEQ/L IN NACL 0.9% INJ	4
POT CHL 20MEQ/L IN NACL 0.45% INJ	4
POT CHL 40MEQ/L IN NACL 0.9% INJ	4
<i>potassium chloride SOLN 2meq/ml, 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml</i>	3
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	3
<i>sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%</i>	3
TPN ELECTROL INJ	4 B/D
ELECTROLYTES/MINERALS/VITAMINS, ORAL	
<i>klor-con PACK 20meq</i>	4
<i>klor-con 8 TBCR 8meq</i>	2
<i>klor-con 10 TBCR 10meq</i>	2
<i>klor-con m10 TBCR 10meq</i>	2
<i>klor-con m15 TBCR 15meq</i>	2
<i>klor-con m20 TBCR 20meq</i>	2
M-NATAL PLUS TAB	3
<i>potassium chloride CPCR 8meq, 10meq; TBCR 8meq, 10meq, 20meq</i>	2
<i>potassium chloride PACK 20meq; SOLN 10%, 20%</i>	4
<i>potassium chloride microencapsulated crystals er TBCR 10meq, 15meq, 20meq</i>	2
PRENATAL TAB 27-1MG	3
PRENATAL TAB PLUS	3
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	2
WESTAB PLUS TAB 27-1MG	3
IV NUTRITION	
CLINIMIX INJ 4.25/D5W	4 B/D
CLINIMIX INJ 4.25/D10	4 B/D
CLINIMIX INJ 5%/D15W	4 B/D
CLINIMIX INJ 5%/D20W	4 B/D
CLINIMIX INJ 6/5	4 B/D

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Drug Name	Drug Tier	Requirements/Limits
CLINIMIX INJ 8/10	4	B/D
CLINIMIX INJ 8/14	4	B/D
<i>clinisol sf 15%</i>	4	B/D
CLINOLIPID EMU 20%	4	B/D
<i>dextrose SOLN 5%, 10%</i>	3	
<i>dextrose SOLN 50%, 70%</i>	3	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	4	B/D
NUTRILIPID EMUL 20gm/100ml	4	B/D
<i>plenamine</i>	4	B/D
PREMASOL SOL 10%	5	NDS, B/D
PROSOL INJ 20%	4	B/D
TRAVASOL INJ 10%	4	B/D
TROPHAMINE INJ 10%	4	B/D

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	3
<i>neo-polycin hc ophth oint 1%</i>	3
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	2
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2
<i>neomycin-polymyxin-hc ophth susp</i>	4
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	2
TOBRADEX OIN 0.3-0.1%	3
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	3
ZYLET SUS 0.5-0.3%	3

ANTI-INFECTIVES

<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	3
<i>bacitracin-polymyxin b ophth oint</i>	2
BESIVANCE SUSP .6%	3
CILOXAN OINT .3%	3
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	2
<i>erythromycin (ophth) OINT 5mg/gm</i>	2
<i>gatifloxacin (ophth) SOLN .5%</i>	3
<i>gentamicin sulfate (ophth) SOLN .3%</i>	2
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	3
NATACYN SUSP 5%	4
<i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>	3

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Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	3	
<i>neomycin-polmy-gramcid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	3	
<i>ofloxacin (ophth) SOLN .3%</i>	2	
<i>polycin ophth oint</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	3	
<i>tobramycin (ophth) SOLN .3%</i>	1	
<i>trifluridine SOLN 1%</i>	4	
<i>XDEMVY SOLN .25%</i>	5	NDS, NM, PA
<i>ZIRGAN GEL .15%</i>	4	
ANTI-INFLAMMATORIES		
<i>bromfenac sodium (ophth) SOLN .07%</i>	3	
<i>bromfenac sodium (ophth) SOLN .075%</i>	4	
<i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>	3	
<i>diclofenac sodium (ophth) SOLN .1%</i>	2	
<i>diluprednate EMUL .05%</i>	4	
<i>FLAREX SUSP .1%</i>	4	
<i>fluorometholone (ophth) SUSP .1%</i>	3	
<i>flurbiprofen sodium SOLN .03%</i>	3	
<i>ketorolac tromethamine (ophth) SOLN .4%</i>	3	
<i>ketorolac tromethamine (ophth) SOLN .5%</i>	2	
<i>LOTEMAX OINT .5%</i>	3	
<i>loteprednol etabonate SUSP .2%</i>	3	
<i>prednisolone acetate (ophth) SUSP 1%</i>	3	
<i>PREDNISOLONE SODIUM PHOSP SOLN 1%</i>	3	
ANTIALLERGICS		
<i>azelastine hcl (ophth) SOLN .05%</i>	2	
<i>cromolyn sodium (ophth) SOLN 4%</i>	2	
<i>ZERVIATE SOLN .24%</i>	4	
ANTIGLAUCOMA		
<i>betaxolol hcl (ophth) SOLN .5%</i>	3	
<i>BETOPTIC-S SUSP .25%</i>	4	
<i>brimonidine tartrate SOLN .2%</i>	1	
<i>brimonidine tartrate SOLN .15%</i>	4	
<i>brinzolamide SUSP 1%</i>	4	
<i>carteolol hcl (ophth) SOLN 1%</i>	2	
<i>COMBIGAN SOL 0.2/0.5%</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl</i> SOLN 2%	2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	2	
<i>latanoprost</i> SOLN .005%	1	
<i>levobunolol hcl</i> SOLN .5%	2	
LUMIGAN SOLN .01%	3	
<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	3	
RHOPRESSA SOLN .02%	4	
ROCKLATAN DRO	4	
SIMBRINZA SUS 1-0.2%	4	
<i>timolol maleate (ophth)</i> SOLG .25%, .5%	3	
<i>timolol maleate (ophth)</i> SOLN .25%, .5%	1	
VYZULTA SOLN .024%	4	
MISCELLANEOUS		
ATROPINE SULFATE SOLN 1%	3	
<i>atropine sulfate (ophthalmic)</i> SOLN 1%	3	
CYSTADROPS SOLN .37%	5	NDS, NM, PA
CYSTARAN SOLN .44%	5	NDS, NM, PA
EYSUVIS SUSP .25%	4	
MIEBO SOLN 1.338gm/ml	3	
<i>proparacaine hcl</i> SOLN .5%	3	
RESTASIS EMUL .05%	3	
RESTASIS MULTIDOSE EMUL .05%	3	
XIIDRA SOLN 5%	3	
OTIC		
OTIC AGENTS		
<i>acetic acid (otic)</i> SOLN 2%	3	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	4	
<i>flac</i> OIL .01%	3	
<i>fluocinolone acetonide (otic)</i> OIL .01%	3	
<i>neomycin-polymyxin-hc otic soln 1%</i>	3	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	3	
<i>ofloxacin (otic)</i> SOLN .3%	4	
RESPIRATORY		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25	3	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	3	QL (1 inhaler / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	3	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	4	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	3	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	3	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	3	QL (60 blisters / 30 days)
ANTICHOLINERGICS		
ATROVENT HFA AERS 17mcg/act	4	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	3	QL (30 blisters / 30 days)
<i>ipratropium bromide SOLN .02%</i>	2	B/D
<i>ipratropium bromide (nasal) SOLN .03%, .06%</i>	3	
ANTIHISTAMINES		
<i>azelastine hcl SOLN .1%</i>	3	
<i>cetirizine hcl SOLN 5mg/5ml</i>	2	QL (300 mL / 30 days)
<i>cyproheptadine hcl SYRP 2mg/5ml; TABS 4mg</i>	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>diphenhydramine hcl SOLN 50mg/ml</i>	3	
<i>hydroxyzine hcl SOLN 25mg/ml, 50mg/ml</i>	4	PA; PA applies if 70 years and older
<i>hydroxyzine hcl SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg</i>	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine pamoate CAPS 25mg, 50mg</i>	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>levocetirizine dihydrochloride SOLN 2.5mg/5ml</i>	4	QL (300 mL / 30 days)
<i>levocetirizine dihydrochloride TABS 5mg</i>	2	QL (30 tabs / 30 days)
BETA AGONISTS		
<i>albuterol sulfate AERS 108mcg/act</i>	3	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate AERS 108mcg/act</i>	3	QL (2 inhalers / 30 days); (generic of Proventil HFA)

Mahahanap mo ang impormasyon kung ano ang ibig sabihin ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagpunta sa pahina numero 7.

Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate</i> AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate</i> NEBU .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	3	B/D
<i>albuterol sulfate</i> NEBU .083%	2	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml	3	
<i>albuterol sulfate</i> TABS 2mg, 4mg	4	
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	4	B/D
<i>levalbuterol tartrate</i> AERO 45mcg/act	3	QL (2 inhalers / 30 days), ST
SEREVENT DISKUS AEPB 50mcg/dose	3	QL (60 inhalations / 30 days)
<i>terbutaline sulfate</i> TABS 2.5mg, 5mg	4	
VENTOLIN HFA AERS 108mcg/act	3	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	3	QL (6 inhalers / 30 days)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium</i> CHEW 4mg, 5mg	2	
<i>montelukast sodium</i> PACK 4mg	4	
<i>montelukast sodium</i> TABS 10mg	1	
<i>zafirlukast</i> TABS 10mg, 20mg	3	
MISCELLANEOUS		
<i>acetylcysteine</i> SOLN 10%, 20%	4	B/D
ALYFTREK TAB 4-20-50	5	NDS, QL (84 tabs / 28 days), NM, PA
ALYFTREK TAB 10-50-125	5	NDS, QL (56 tabs / 28 days), NM, PA
ARALAST NP SOLR 500mg, 1000mg	5	NDS, NM, PA
BRONCHITOL CAPS 40mg	5	NDS, QL (560 caps / 28 days), NM, PA
<i>cromolyn sodium</i> NEBU 20mg/2ml	3	B/D
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.3ml, .3mg/0.3ml	3	(generic of EpiPen)
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml	3	(generic of Adrenaclick)
FASENRA SOSY 10mg/0.5ml, 30mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
FASENRA PEN SOAJ 30mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg	5	NDS, QL (56 packets / 28 days), NM, PA

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Drug Name	Drug Tier	Requirements/Limits
KALYDECO TABS 150mg	5	NDS, QL (60 tabs / 30 days), NM, PA
OFEV CAPS 100mg, 150mg	5	NDS, QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 75-94MG	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 100-125	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 150-188	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI TAB 100-125	5	NDS, QL (112 tabs / 28 days), NM, PA
ORKAMBI TAB 200-125	5	NDS, QL (112 tabs / 28 days), NM, PA
<i>pirfenidone</i> CAPS 267mg	5	NDS, QL (270 caps / 30 days), NM, PA
<i>pirfenidone</i> TABS 267mg	5	NDS, QL (270 tabs / 30 days), NM, PA
<i>pirfenidone</i> TABS 534mg, 801mg	5	NDS, QL (90 tabs / 30 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml	5	NDS, NM, PA
PULMOZYME SOLN 2.5mg/2.5ml	5	NDS, NM, PA
<i>roflumilast</i> TABS 250mcg	4	QL (56 tabs / year)
<i>roflumilast</i> TABS 500mcg	4	QL (30 tabs / 30 days)
SYMDEKO TAB 50-75MG	5	NDS, QL (56 tabs / 28 days), NM, PA
SYMDEKO TAB 100-150	5	NDS, QL (56 tabs / 28 days), NM, PA
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	4	
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg	4	
<i>theophylline</i> TB24 400mg, 600mg	3	
TRIKAFTA PAK 59.5MG	5	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA PAK 75MG	5	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA TAB 50-25-37.5MG & 75MG	5	NDS, QL (84 tabs / 28 days), NM, PA
TRIKAFTA TAB 100-50-75MG & 150MG	5	NDS, QL (84 tabs / 28 days), NM, PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml	5	NDS, QL (4 pens / 28 days), NM, PA

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Drug Name	Drug Tier	Requirements/Limits
XOLAIR SOAJ 150mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
XOLAIR SOLR 150mg	5	NDS, QL (8 vials / 28 days), NM, PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
XOLAIR SOSY 150mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	5	NDS, NM, PA
NASAL STEROIDS		
flunisolide (nasal) SOLN .025%	3	QL (3 bottles / 30 days)
fluticasone propionate (nasal) SUSP 50mcg/act	2	QL (1 bottle / 30 days)
XHANCE EXHU 93mcg/act	4	QL (32 mL / 30 days), PA
STEROID INHALANTS		
ALVESCO AERS 80mcg/act	4	QL (3 inhalers / 30 days)
ALVESCO AERS 160mcg/act	4	QL (2 inhalers / 30 days)
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	3	QL (30 inhalations / 30 days)
budesonide (inhalation) SUSP .25mg/2ml, .5mg/2ml	4	B/D
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR HFA AER 45/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	3	QL (1 inhaler / 30 days)
AIRSUPRA AER 90-80MCG	3	QL (3 inhalers / 30 days)
BREO ELLIPTA INH 50-25MCG	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	3	QL (60 blisters / 30 days)
breyna	3	QL (3 inhalers / 30 days)
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	3	QL (3 inhalers / 30 days)
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	3	QL (3 inhalers / 30 days)
DULERA AER 50-5MCG	4	QL (3 inhalers / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
DULERA AER 100-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 200-5MCG	4	QL (3 inhalers / 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
wixela inhub	3	QL (60 inhalations / 30 days)

TOPICAL

DERMATOLOGY, ACNE

accutane CAPS 10mg, 20mg, 30mg, 40mg	4	PA
annesteem CAPS 10mg, 20mg, 30mg, 40mg	4	PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	4	QL (46.6 gm / 30 days)
claravis CAPS 10mg, 20mg, 30mg, 40mg	4	PA
<i>clindamycin phosphate (topical) GEL 1%</i>	3	QL (75 mL / 30 days)
<i>clindamycin phosphate (topical) LOTN 1%; SOLN 1%</i>	3	QL (60 mL / 30 days)
ery PADS 2%	3	QL (60 pledges / 30 days)
<i>erythromycin (acne aid) GEL 2%</i>	3	QL (60 gm / 30 days)
<i>erythromycin (acne aid) SOLN 2%</i>	3	QL (60 mL / 30 days)
isotretinoin CAPS 10mg, 20mg, 30mg, 40mg	4	PA
<i>sulfacetamide sodium (acne) LOTN 10%</i>	4	QL (118 mL / 30 days)
<i>tretinoin CREA .025%, .05%, .1%; GEL .01%, .025%</i>	4	QL (45 gm / 30 days), PA
<i>twice-daily clindamycin phosphate (topical) GEL 1%</i>	3	QL (75 gm / 30 days)
zenatane CAPS 10mg, 20mg, 30mg, 40mg	4	PA

DERMATOLOGY, ANTIBIOTICS

gentamicin sulfate (topical) CREA .1%; OINT .1%	3	QL (30 gm / 30 days)
mupirocin OINT 2%	2	QL (220 gm / 30 days)
silver sulfadiazine CREA 1%	2	
ssd CREA 1%	2	
SULFAMYLYON CREA 85mg/gm	4	QL (453.6 gm / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGY, ANTIFUNGALS		
ciclopirox SHAM 1%	3	QL (120 mL / 30 days)
ciclopirox olamine CREA .77%	3	QL (90 gm / 30 days)
ciclopirox olamine SUSP .77%	3	QL (60 mL / 30 days)
clotrimazole (topical) CREA 1%	2	QL (45 gm / 30 days)
clotrimazole (topical) SOLN 1%	3	QL (60 mL / 30 days)
clotrimazole w/ betamethasone cream 1-0.05%	3	QL (45 gm / 30 days)
econazole nitrate CREA 1%	3	QL (85 gm / 30 days)
ketoconazole (topical) CREA 2%	3	QL (60 gm / 30 days)
ketoconazole (topical) SHAM 2%	2	QL (120 mL / 30 days)
klayesta POWD 100000unit/gm	3	QL (60 gm / 30 days)
nyamyc POWD 100000unit/gm	3	QL (60 gm / 30 days)
nystatin (topical) CREA 100000unit/gm; OINT 100000unit/gm	2	QL (30 gm / 30 days)
nystatin (topical) POWD 100000unit/gm	3	QL (60 gm / 30 days)
nystop POWD 100000unit/gm	3	QL (60 gm / 30 days)
selenium sulfide LOTN 2.5%	2	
DERMATOLOGY, ANTIPSORIATICS		
acitretin CAPS 10mg, 17.5mg, 25mg	4	PA
calcipotriene CREA .005%; OINT .005%	4	QL (120 gm / 30 days), PA
calcipotriene SOLN .005%	3	QL (120 mL / 30 days), PA
calcitrene OINT .005%	4	QL (120 gm / 30 days), PA
ENSTILAR AER	5	NDS, QL (120 gm / 30 days), PA
tazarotene CREA .05%, .1%	3	QL (60 gm / 30 days), PA
TAZORAC CREA .05%	4	QL (60 gm / 30 days), PA
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort CREA 1%	1	
alclometasone dipropionate CREA .05%; OINT .05%	3	QL (60 gm / 30 days)
betamethasone dipropionate (topical) CREA .05%	3	QL (120 gm / 30 days)
betamethasone dipropionate (topical) LOTN .05%	3	QL (120 mL / 30 days)
betamethasone dipropionate (topical) OINT .05%	4	QL (120 gm / 30 days)
betamethasone dipropionate augmented CREA .05%	2	QL (120 gm / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate augmented GEL .05%; OINT .05%</i>	4	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented LOTN .05%</i>	4	QL (120 mL / 30 days)
<i>betamethasone valerate CREA .1%; OINT .1%</i>	3	QL (120 gm / 30 days)
<i>betamethasone valerate LOTN .1%</i>	3	QL (120 mL / 30 days)
<i>clobetasol propionate CREA .05%; GEL .05%; OINT .05%</i>	4	QL (60 gm / 30 days)
<i>clobetasol propionate SOLN .05%</i>	4	QL (50 mL / 30 days)
<i>clobetasol propionate e CREA .05%</i>	4	QL (60 gm / 30 days)
<i>fluocinolone acetonide CREA .01%</i>	4	QL (60 gm / 30 days)
<i>fluocinolone acetonide CREA .025%</i>	4	QL (120 gm / 30 days)
<i>fluocinolone acetonide OIL .01%</i>	3	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide OINT .025%</i>	3	QL (120 gm / 30 days)
<i>fluocinolone acetonide SOLN .01%</i>	4	QL (60 mL / 30 days)
<i>fluocinonide CREA .05%</i>	3	QL (120 gm / 30 days)
<i>fluocinonide GEL .05%; OINT .05%</i>	4	QL (60 gm / 30 days)
<i>fluocinonide SOLN .05%</i>	3	QL (60 mL / 30 days)
<i>fluocinonide emulsified base CREA .05%</i>	3	QL (120 gm / 30 days)
<i>fluticasone propionate CREA .05%; OINT .005%</i>	3	
<i>halobetasol propionate CREA .05%; OINT .05%</i>	4	QL (50 gm / 30 days)
<i>hydrocortisone (topical) CREA 1%</i>	1	
<i>hydrocortisone (topical) CREA 2.5%; LOTN 2.5%; OINT 2.5%</i>	2	
<i>hydrocortisone (topical) OINT 1%</i>	2	QL (30 gm / 30 days)
<i>hydrocortisone valerate CREA .2%</i>	3	QL (60 gm / 30 days)
<i>mometasone furoate CREA .1%; OINT .1%; SOLN .1%</i>	3	
<i>triamcinolone acetonide (topical) CREA .025%, .1%, .5%</i>	2	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical) LOTN .025%, .1%</i>	3	
<i>triamcinolone acetonide (topical) OINT .025%, .1%, .5%</i>	2	
<i>triderm CREA .5%</i>	2	QL (454 gm / 30 days)
DERMATOLOGY, LOCAL ANESTHETICS		
<i>glydo PRSY 2%</i>	3	QL (60 mL / 30 days), PA
<i>lidocaine OINT 5%</i>	4	QL (50 gm / 30 days), PA

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Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<i>lidocaine hcl</i> SOLN 4%	3	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream</i> 2.5-2.5%	2	B/D, QL (30 gm / 30 days)
<i>lidocan</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<i>tridacaine ii</i> PTCH 5%	4	QL (3 patches / 1 day), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>bexarotene (topical)</i> GEL 1%	5	NDS, QL (60 gm / 30 days), NM, PA
<i>diclofenac sodium (topical)</i> SOLN 1.5%	3	QL (300 mL / 28 days)
<i>fluorouracil (topical)</i> CREA 5%	4	QL (40 gm / 30 days)
<i>fluorouracil (topical)</i> SOLN 2%, 5%	3	QL (10 mL / 30 days)
<i>hydrocortisone (rectal)</i> CREA 1%, 2.5%	3	
<i>imiquimod</i> CREA 5%	3	QL (24 packets / 30 days)
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	2	
<i>metronidazole (topical)</i> CREA .75%; GEL .75%	3	QL (45 gm / 30 days)
<i>metronidazole (topical)</i> LOTN .75%	4	QL (59 mL / 30 days)
<i>nitroglycerin (intra-anal)</i> OINT .4%	4	QL (30 gm / 30 days)
<i>PANRETIN</i> GEL .1%	5	NDS, QL (60 gm / 30 days), PA
<i>pimecrolimus</i> CREA 1%	4	QL (100 gm / 30 days), PA
<i>podofilox</i> SOLN .5%	3	QL (7 mL / 28 days)
<i>procto-med hc</i> CREA 2.5%	3	
<i>proctocort</i> CREA 1%	3	
<i>proctosol hc</i> CREA 2.5%	3	
<i>protozone-hc</i> CREA 2.5%	3	
<i>tacrolimus (topical)</i> OINT .03%, .1%	4	QL (100 gm / 30 days), PA
<i>VALCHLOR</i> GEL .016%	5	NDS, QL (60 gm / 30 days), NM, PA
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>malathion</i> LOTN .5%	4	QL (59 mL / 30 days)
<i>permethrin</i> CREA 5%	3	QL (60 gm / 30 days)
DERMATOLOGY, WOUND CARE AGENTS		
<i>REGRANEX</i> GEL .01%	5	NDS, QL (30 gm / 30 days), PA

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Drug Name	Drug Tier	Requirements/Limits
SANTYL OINT 250unit/gm	4	QL (180 gm / 30 days)
sodium chloride (gu irrigant) SOLN .9%	3	
water for irrigation, sterile irrigation soln	2	

MOUTH/THROAT/DENTAL AGENTS

cevimeline hcl CAPS 30mg	4	
chlorhexidine gluconate (mouth-throat) SOLN .12%	1	
clotrimazole TROC 10mg	3	QL (150 lozenges / 30 days)
kourzeq PSTE .1%	3	
lidocaine hcl (mouth-throat) SOLN 2%	2	
nystatin (mouth-throat) SUSP 100000unit/ml	2	
periogard SOLN .12%	1	
pilocarpine hcl (oral) TABS 5mg, 7.5mg	3	
triamcinolone acetonide (mouth) PSTE .1%	3	

PART B

DIABETIC METERS AND TEST STRIPS

DEXCOM G6 MIS RECEIVER	0	PA
DEXCOM G6 MIS SENSOR	0	PA
DEXCOM G6 MIS TRANSMIT	0	PA
DEXCOM G7 MIS RECEIVER	0	PA
DEXCOM G7 MIS SENSOR	0	PA
FREESTY LIBR KIT 2 SENSOR	0	PA
FREESTY LIBR KIT 3 SENSOR	0	PA
FREESTY LIBR KIT SENSOR	0	PA
FREESTY LIBR MIS 2 READER	0	PA
FREESTY LIBR MIS 3 READER	0	PA
FREESTYLE MIS READER	0	PA
TRUE METRIX KIT AIR	0	
TRUE METRIX KIT METER	0	
TRUE METRIX STRIPS	0	

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Indeks ng Mga Gamot

abacavir sulfate 13
abacavir sulfate-
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abigale lo 65
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ABILIFY MAINTENA.... 42
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abirtega 20
ABRYSCO 77
acamprosate calcium .55
acarbose 55
accutane 88
acebutolol hcl 36
acetaminophen w/
codeine soln 120-12
mg/5ml 9
acetaminophen w/
codeine tab 300-15
mg 9
acetaminophen w/
codeine tab 300-30
mg 9
acetaminophen w/
codeine tab 300-60
mg 9
acetazolamide 37
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ACTHIB INJ 77
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acyclovir sodium 15
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ADALIMUMAB-AACF (2
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AKEEGA TAB 50/500MG
..... 20
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ALECENSA 23
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alfuzosin hcl 71
aliskiren fumarate 38
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alosetron hcl 70
alprazolam 39
altavera 60
ALUNBRIG 23
ALUNBRIG PAK 23
ALVAIZ 72, 73
ALVESCO 87
alyacen 1/35 60
alyacen 7/7/7 60
ALYFTREK TAB 10-50-
125 85

ALYFTREK TAB 4-20-50
..... 85
ALYGLO 76
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ambrisentan 38
amethia 60
amethyst 60
amikacin sulfate 10
amiloride &
hydrochlorothiazide
tab 5-50 mg 37
amiloride hcl 37
amiodarone hcl 34
amitriptyline hcl 40
amlodipine besylate ...36
amlodipine besylate-
benazepril hcl cap 10-
20 mg 32
amlodipine besylate-
benazepril hcl cap 10-
40 mg 32
amlodipine besylate-
benazepril hcl cap 2.5-
10 mg 31
amlodipine besylate-
benazepril hcl cap 5-
10 mg 32
amlodipine besylate-
benazepril hcl cap 5-
20 mg 32
amlodipine besylate-
benazepril hcl cap 5-
40 mg 32
amlodipine besylate-
olmesartan medoxomil
tab 10-20 mg 33
amlodipine besylate-
olmesartan medoxomil
tab 10-40 mg 33
amlodipine besylate-
olmesartan medoxomil
tab 5-20 mg 33

<i>amlodipine besylate-</i>	
<i>olmesartan medoxomil</i>	
<i>tab 5-40 mg</i>	33
<i>amlodipine besylate-</i>	
<i>valsartan tab 10-160</i>	
<i>mg</i>	33
<i>amlodipine besylate-</i>	
<i>valsartan tab 10-320</i>	
<i>mg</i>	33
<i>amlodipine besylate-</i>	
<i>valsartan tab 5-160</i>	
<i>mg</i>	33
<i>amlodipine besylate-</i>	
<i>valsartan tab 5-320</i>	
<i>mg</i>	33
<i>amnesteem</i>	88
<i>amoxapine</i>	40
<i>amoxicillin</i>	18
<i>amoxicillin & k</i>	
<i>clavulanate for susp</i>	
<i>200-28.5 mg/5ml ...</i>	18
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<i>clavulanate for susp</i>	
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<i>clavulanate tab 500-</i>	
<i>125 mg</i>	18
<i>amoxicillin & k</i>	
<i>clavulanate tab 875-</i>	
<i>125 mg</i>	18
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<i>amphetamine-</i>	
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<i>amphetamine-</i>	
<i>dextroamphetamine</i>	
<i>tab 10 mg</i>	50
<i>amphetamine-</i>	
<i>dextroamphetamine</i>	
<i>tab 12.5 mg</i>	50
<i>amphetamine-</i>	
<i>dextroamphetamine</i>	
<i>tab 15 mg</i>	50
<i>amphetamine-</i>	
<i>dextroamphetamine</i>	
<i>tab 20 mg</i>	50
<i>amphetamine-</i>	
<i>dextroamphetamine</i>	
<i>tab 30 mg</i>	50
<i>amphetamine-</i>	
<i>dextroamphetamine</i>	
<i>tab 5 mg</i>	50
<i>amphetamine-</i>	
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mg/50ml.....	10
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<i>lopinavir-ritonavir tab 100-25 mg</i>	15	<i>lyllana</i>	65	<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	39
<i>lopinavir-ritonavir tab 200-50 mg</i>	15	LYNPARZA	27	<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	39
<i>lorazepam</i>	39	LYSODREN	21	<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	39
<i>lorazepam intensol</i>	39	LYTGOBI (12 MG DAILY DOSE)	27	<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	40
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<i>methazolamide</i>	37	minocycline hcl	19	NAMZARIC CAP 21-	
<i>methenamine hippurate</i>		minoxidil.....	38	10MG	40
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<i>methimazole</i>	68	misoprostol	70	10MG	40
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<i>methsuximide</i>	48	modafinil	54	naproxen	8
<i>methylphenidate hcl</i> ..	51	moexipril hcl	32	naproxen dr	8
<i>methylprednisolone</i> ..	66	molindone hcl.....	44	naproxen sodium	8
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<i>acetate</i>	66	MONJUVI	27	NATACYN.....	81
<i>methylprednisolone sod</i>		mono-linyah	63	nateglinide.....	56
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<i>hydrochlorothiazide</i>		<i>moxifloxacin hcl (ophth)</i>		neomycin-bacitrac zn-	
<i>tab 100-25 mg</i>	36	81	polymyx 5(3.5)mg-	
<i>metoprolol &</i>		<i>moxifloxacin hcl 400</i>		400unt-10000unt op	
<i>hydrochlorothiazide</i>		mg/250ml in sodium		oin	82
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<i>metoprolol &</i>		MRESVIA	78	gramcid op sol 1.75-	
<i>hydrochlorothiazide</i>		MULTAQ	34	10000-0.025mg-unt-	
<i>tab 50-25 mg</i>	36	multiple electrolytes ph		mg/ml	82
<i>metoprolol succinate</i> ..	36	5.5	80	neomycin-polymyxin-	
<i>metoprolol tartrate</i>	36	multiple electrolytes ph		dexamethasone ophth	
<i>metronidazole</i>	11	7.4	80	oint 0.1%	81
<i>metronidazole (topical)</i>		mupirocin	88		
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<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	81
<i>neomycin-polymyxin-hc ophth susp</i>	81
<i>neomycin-polymyxin-hc otic soln 1%</i>	83
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml</i>	83
<i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>	81
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<i>nimodipine</i>	37
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<i>nitisinone</i>	67
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<i>nitrofurantoin macrocrystal</i>	11
<i>nitrofurantoin monohyd macro</i>	11
<i>nitroglycerin</i>	38
<i>nitroglycerin (intra-anal)</i>	91
<i>nizatidine</i>	69
<i>nora-be</i>	63
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	63
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	63
<i>norethindrone (contraceptive)</i>	63
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	63
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	63
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	63
<i>norethindrone acetate</i>	67
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	65
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	65
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	63
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	63
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	63
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<i>nortrel 0.5/35 (28)</i>	63
<i>nortrel 1/35 (21)</i>	63
<i>nortrel 1/35 (28)</i>	63
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<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	33
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	33
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	34
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<i>omeprazole</i>	71
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<i>oxaliplatin</i>	20
<i>oxcarbazepine</i>	48
<i>oxybutynin chloride</i> ... 71	
<i>oxycodone hcl</i>	9
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	10
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	9
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	9
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	9
<i>OXYCONTIN</i>	9
<i>OZEMPIC (0.25 OR 0.5 MG/DOSE)</i>	56
<i>OZEMPIC (0.25 OR 0.5MG/DOSE)</i>	56
<i>OZEMPIC (1MG/DOSE)</i>	57
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<i>paclitaxel</i>	22
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<i>PANZYGA</i>	77
<i>paricalcitol</i>	68
<i>paroxetine hcl</i>	41
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<i>PAXLOVID TAB 150-100</i>	16
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<i>pazopanib hcl</i>	28
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<i>PEDVAX HIB</i>	78
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	70
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	70
<i>PEGASYS</i>	16
<i>PEMAZYRE</i>	28
<i>pemetrexed disodium</i> .20	
<i>PENBRAYA INJ</i>	78

<i>penicillamine</i>	60
<i>penicillin g potassium</i>	18
<i>penicillin g sodium</i>	18
<i>penicillin v potassium</i>	18
PENTACEL INJ	78
<i>pentamidine isethionate</i>	
<i>inh</i>	11
<i>pentamidine isethionate</i>	
<i>inj</i>	11
<i>pentoxifylline</i>	73
<i>perampanel</i>	48
<i>perindopril erbumine</i>	32
<i>periogard</i>	92
<i>permethrin</i>	91
<i>perphenazine</i>	44
<i>pfizerpen</i>	18
<i>phenelzine sulfate</i>	41
<i>phenobarbital</i>	48
<i>phenobarbital sodium</i>	48
<i>phenytek</i>	48
<i>phenytoin</i>	48
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<i>phenytoin sodium</i>	
<i>extended</i>	48
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<i>philith</i>	64
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<i>pilocarpine hcl</i>	83
<i>pilocarpine hcl (oral)</i>	92
<i>pimecrolimus</i>	91
<i>pimozide</i>	44
<i>pimtrea</i>	64
<i>pindolol</i>	36
<i>pioglitazone hcl</i>	57
<i>pioglitazone hcl-</i>	
<i>metformin hcl tab 15-500 mg</i>	57
<i>pioglitazone hcl-</i>	
<i>metformin hcl tab 15-850 mg</i>	57
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DOSE	28
PIQRAY 300MG DAILY	
DOSE	28
<i>pirfenidone</i>	86
<i>piroxicam</i>	8
<i>plenamine</i>	81
<i>PLENU SOL</i>	70
<i>podofilox</i>	91
<i>polycin ophth oint</i>	82
<i>polymyxin b sulfate</i>	11
<i>polymyxin b-</i>	
<i>trimethoprim ophth soln 10000 unit/ml-0.1%</i>	82
<i>POMALYST</i>	22
<i>portia-28</i>	64
<i>posaconazole</i>	12
POT CHL 20MEQ/L IN	
<i>NACL 0.45% INJ</i>	80
POT CHL 20MEQ/L IN	
<i>NACL 0.9% INJ</i>	80
POT CHL 40MEQ/L IN	
<i>NACL 0.9% INJ</i>	80
<i>potassium chloride</i>	80
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	80
<i>potassium chloride</i>	80
<i>potassium citrate (alkalinizer)</i>	71
<i>pramipexole dihydrochloride</i>	42
<i>prasugrel hcl</i>	73
<i>pravastatin sodium</i>	35
<i>praziquantel</i>	11
<i>prazosin hcl</i>	33
<i>prednisolone</i>	66
<i>prednisolone acetate (ophth)</i>	82
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<i>prednisolone sodium phosphate</i>	66
<i>prednisone</i>	66
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.....	66
<i>pregabalin</i>	48
PREMASOL SOL 10%	.81
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.....	80
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<i>prevalite</i>	35
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PREZCOBIX TAB 800-150	15
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PRIFTIN	15
<i>primaquine phosphate</i>	13
PRIMAQUINE PHOSPHATE	13
<i>primidone</i>	48
PRIORIX INJ	78
PRIVIGEN	77
<i>probenecid</i>	8
<i>prochlorperazine</i>	68
<i>prochlorperazine edisylate</i>	68
<i>prochlorperazine maleate</i>	69
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<i>proctocort</i>	91	<i>repaglinide</i>	57	<i>rufinamide</i>	49	
<i>procto-med hc</i>	91	<i>REPATHA</i>	35	<i>RUKOBIA</i>	14	
<i>proctosol hc</i>	91	<i>REPATHA PUSHTRONEX</i>		<i>RYBELSUS</i>	57	
<i>protozone-hc</i>	91	<i>SYSTEM</i>	35	<i>RYDAPT</i>	29	
<i>progesterone</i>	67	<i>REPATHA SURECLICK</i>	36	<i>sajazir</i>	73	
<i>PROGRAF</i>	77	<i>RESTASIS</i>	83	<i>SANTYL</i>	92	
<i>PROLASTIN-C</i>	86	<i>RESTASIS MULTIDOSE</i>		<i>sapropterin</i>		
<i>PROLIA</i>	59	.....	83	<i>dihydrochloride</i>	67
<i>promethazine hcl</i>	69	<i>RETEVMO</i>	28	<i>SCEMBLIX</i>	29	
<i>propafenone hcl</i>	35	<i>REVUFORJ</i>	28	<i>scopolamine</i>	69	
<i>proparacaine hcl</i>	83	<i>REXULTI</i>	45	<i>SECUADO</i>	45	
<i>propranolol hcl</i>	36	<i>REYATAZ</i>	13	<i>selegiline hcl</i>	42	
<i>propylthiouracil</i>	68	<i>REZLIDHIA</i>	28	<i>selenium sulfide</i>	89	
<i>PROQUAD INJ</i>	78	<i>REZUROCK</i>	77	<i>SELZENTRY</i>	14	
<i>PROSOL INJ 20%</i>	81	<i>RHOPRESSA</i>	83	<i>SEREVENT DISKUS</i>	85	
<i>protriptyline hcl</i>	41	<i>ribavirin (hepatitis c)</i>	16	<i>sertraline hcl</i>	41	
<i>PULMOZYME</i>	86	<i>rifabutin</i>	15	<i>setlakin</i>	64	
<i>PURIXAN</i>	20	<i>rifampin</i>	15	<i>sharobel</i>	64	
<i>pyrazinamide</i>	15	<i>riluzole</i>	53	<i>SHINGRIX</i>	78	
<i>pyridostigmine bromide</i>		<i>rimantadine</i>		<i>SIGNIFOR</i>	67	
	53	<i>hydrochloride</i>	16	<i>SIKLOS</i>	73	
<i>pyrimethamine</i>	11	<i>RINVOQ</i>	75	<i>sildenafil citrate</i>		
<i>PYZCHIVA</i>	75	<i>RINVOQ LQ</i>	75	<i>(pulmonary</i>		
<i>QINLOCK</i>	28	<i>risedronate sodium</i>	59	<i>hypertension)</i>	39	
<i>QUADRACEL INJ 0.5ML</i>		<i>risperidone</i>	45	<i>silver sulfadiazine</i>	88	
	78	<i>risperidone</i>		<i>SIMBRINZA SUS 1-0.2%</i>		
		<i>microspheres</i>	45		83
<i>quetiapine fumarate</i>	45	<i>ritonavir</i>	13	<i>simliya</i>	64	
<i>quinapril hcl</i>	32	<i>rivaroxaban</i>	72	<i>simpesse</i>	64	
<i>quinidine sulfate</i>	35	<i>rivastigmine</i>	40	<i>simvastatin</i>	35	
<i>quinine sulfate</i>	13	<i>rivastigmine tartrate</i>	40	<i>sirolimus</i>	77	
<i>QULIPTA</i>	52	<i>rivelsa</i>	64	<i>SIRTURO</i>	15	
<i>RABAVERT INJ</i>	78	<i>rizatriptan benzoate</i>	52	<i>SKYRIZI</i>	75	
<i>rabeprazole sodium</i>	71	<i>ROCKLATAN DRO</i>	83	<i>SKYRIZI PEN</i>	75	
<i>RALDESY</i>	41	<i>roflumilast</i>	86	<i>sod sulfate-pot sulf-mg</i>		
<i>raloxifene hcl</i>	67	<i>ROMVIMZA</i>	29	<i>sulf oral sol 17.5-3.13-</i>		
<i>ramipril</i>	32	<i>ropinirole hydrochloride</i>		<i>1.6 gm/177ml</i>	70	
<i>ranolazine</i>	38	.....	42	<i>sodium chloride</i>	80
<i>rasagiline mesylate</i>	42	<i>rosuvastatin calcium</i>	35	<i>sodium chloride (gu</i>		
<i>reclipsen</i>	64	<i>rosyrah</i>	64	<i>irrigant)</i>	92	
<i>RECOMBIVAX HB</i>	78	<i>ROTARIX SUS</i>	78	<i>sodium fluoride chew;</i>		
<i>REGRANEX</i>	91	<i>ROTATEQ SOL</i>	78	<i>tab; 1.1 (0.5 f) mg/ml</i>		
<i>RELENZA DISKHALER</i>	16	<i>roweepra</i>	48	<i>soln</i>	80	
<i>RELISTOR</i>	70	<i>ROZLYTREK</i>	29	<i>SODIUM OXYBATE</i>	54	
<i>REMICADE</i>	75	<i>RUBRACA</i>	29			
<i>RENFLEXIS</i>	75					

<i>sodium phenylbutyrate</i>	67	<i>sulfamethoxazole-</i>	
		<i>trimethoprim tab 400-</i>	
<i>sodium polystyrene</i>	60	<i>80 mg</i>	11
		<i>sulfamethoxazole-</i>	
<i>sulfenacin succinate</i>	71	<i>trimethoprim tab 800-</i>	
<i>SOLIQUA INJ 100/33</i>	59	<i>160 mg</i>	11
<i>SOLTAMOX</i>	21	<i>SULFAMYLYON</i>	88
<i>SOLU-CORTEF</i>	66	<i>sulfasalazine</i>	69
<i>SOMATULINE DEPOT</i>	67	<i>sulindac</i>	8
<i>SOMAVERT</i>	67	<i>sumatriptan</i>	52
<i>sorafenib tosylate</i>	29	<i>sumatriptan succinate</i>	52
<i>sotalol hcl</i>	35	<i>sunitinib malate</i>	29
<i>sotalol hcl (afib/afl)</i>	35	<i>SUNLENCA</i>	14
<i>SOTYKTU</i>	75	<i>syeda</i>	64
<i>spironolactone</i>	33	<i>SYMDEKO TAB 100-150</i>	
<i>spironolactone &</i>			86
<i>hydrochlorothiazide</i>		<i>SYMDEKO TAB 50-75MG</i>	
<i>tab 25-25 mg</i>	37		86
<i>sprintec 28</i>	64	<i>SYMPAZAN</i>	49
<i>SPRITAM</i>	49	<i>SYMTUZA TAB</i>	15
<i>sps</i>	60	<i>SYNAREL</i>	67
<i>sps rectal</i>	60	<i>SYNJARDY TAB 12.5-</i>	
<i>sronyx</i>	64	<i>1000MG</i>	57
<i>ssd</i>	88	<i>SYNJARDY TAB 12.5-500</i>	
<i>STELARA</i>	75		57
<i>STIVARGA</i>	29	<i>SYNJARDY TAB 5-</i>	
<i>streptomycin sulfate</i>	11	<i>1000MG</i>	57
<i>STRIBILD TAB</i>	15	<i>SYNJARDY TAB 5-500MG</i>	
<i>subvenite</i>	49		57
<i>sucralfate</i>	70	<i>SYNJARDY XR TAB 10-</i>	
<i>sulfacetamide sodium</i>		<i>1000</i>	57
<i>(acne)</i>	88	<i>SYNJARDY XR TAB 12.5-</i>	
<i>sulfacetamide sodium</i>		<i>1000</i>	57
<i>(ophth)</i>	82	<i>SYNJARDY XR TAB 25-</i>	
<i>sulfacetamide sodium-</i>		<i>1000</i>	57
<i>prednisolone ophth</i>		<i>SYNJARDY XR TAB 5-</i>	
<i>soln 10-0.23(0.25)%</i>		<i>1000MG</i>	57
	81	<i>SYNTHROID</i>	68
<i>sulfadiazine</i>	11	<i>TABLOID</i>	20
<i>sulfamethoxazole-</i>		<i>TABRECTA</i>	29
<i>trimethoprim iv soln</i>		<i>tacrolimus</i>	77
<i>400-80 mg/5ml</i>	11	<i>tacrolimus (topical)</i>	91
<i>sulfamethoxazole-</i>		<i>tadalafil</i>	71
<i>trimethoprim susp</i>		<i>tadalafil (pulmonary</i>	
<i>200-40 mg/5ml</i>	11	<i>hypertension)</i>	39
		<i>TAFINLAR</i>	29
		<i>TAGRISSO</i>	29
		<i>TALZENNA</i>	29
		<i>tamoxifen citrate</i>	21
		<i>tamsulosin hcl</i>	71
		<i>tarina 24 fe</i>	64
		<i>tarina fe 1/20 eq</i>	64
		<i>TASIGNA</i>	29
		<i>tasimelteon</i>	51
		<i>TAVNEOS</i>	73
		<i>tazarotene</i>	89
		<i>tazicef</i>	17
		<i>TAZORAC</i>	89
		<i>TAZVERIK</i>	29
		<i>TECENTRIQ</i>	29
		<i>TECENTRIQ INJ</i>	
		<i>HYBREZA</i>	29
		<i>TEFLARO</i>	17
		<i>telmisartan</i>	34
		<i>telmisartan-amlodipine</i>	
		<i>tab 40-10 mg</i>	34
		<i>telmisartan-amlodipine</i>	
		<i>tab 40-5 mg</i>	34
		<i>telmisartan-amlodipine</i>	
		<i>tab 80-10 mg</i>	34
		<i>telmisartan-amlodipine</i>	
		<i>tab 80-5 mg</i>	34
		<i>telmisartan-</i>	
		<i>hydrochlorothiazide</i>	
		<i>tab 40-12.5 mg</i>	34
		<i>telmisartan-</i>	
		<i>hydrochlorothiazide</i>	
		<i>tab 80-12.5 mg</i>	34
		<i>temazepam</i>	51
		<i>TENIVAC INJ 5-2LF</i>	78
		<i>tenofovir disoproxil</i>	
		<i>fumarate</i>	14
		<i>TEPMETKO</i>	30
		<i>terazosin hcl</i>	33
		<i>terbinafine hcl</i>	12
		<i>terbutaline sulfate</i>	85
		<i>terconazole vaginal</i>	72

TERIPARATIDE.....	59	trifluridine	82
testosterone	55	trihexyphenidyl hcl	42
testosterone cypionate	55	TRIJARDY XR TAB ER	
testosterone enanthate	55	24HR 10-5-1000MG	57
testosterone pump	55	TRIJARDY XR TAB ER	
tetrabenazine	53	24HR 12.5-2.5-	
tetracycline hcl	19	1000MG.....	57
THALOMID	22	TRIJARDY XR TAB ER	
THEO-24	86	24HR 25-5-1000MG	57
theophylline	86	TRIJARDY XR TAB ER	
thioridazine hcl	45	24HR 5-2.5-1000MG	
thiothixene	45	.....	57
tiadylt er	37	TRIKAFTA PAK 59.5MG	
tiagabine hcl.....	49	.....	86
TIBSOVO.....	30	TRIKAFTA PAK 75MG..	86
ticagrelor	73	TRIKAFTA TAB 100-50-	
TICOVAC.....	78	75MG & 150MG	86
tigecycline	19	TRIKAFTA TAB 50-25-	
tilia fe	64	37.5MG & 75MG	86
timolol maleate	36	tri-legest fe.....	64
timolol maleate (ophth)	83	tri-linyah	64
tinidazole	11	tri-lo-estarrylla	64
TIVICAY	14	tri-lo-marzia	64
TIVICAY PD	14	tri-lo-mili	64
tizanidine hcl	54	tri-lo-sprintec.....	64
TOBI PODHALER	11	trimethoprim.....	11
TOBRADEX OIN 0.3-0.1%	81	tri-mili.....	64
tobramycin	11	trimipramine maleate.	41
tobramycin (ophth) ...	82	TRINTELLIX	41
tobramycin sulfate	11	tri-nymyo	64
tobramycin-dexamethasone ophth susp 0.3-0.1%	81	tri-sprintec	64
tolterodine tartrate....	71	TRIUMEQ PD TAB	15
topiramate	49	TRIUMEQ TAB	15
toremifene citrate	21	tri-vylibra	64
torpenz	30	tri-vylibra lo.....	64
torsemide.....	37	TROGARZO	14
TOUJEO MAX SOLOSTAR	59	TROPHAMINE INJ 10%	
TOUJEO SOLOSTAR ...	59	.....	81
		trospium chloride.....	71
		TRUE METRIX KIT AIR	92
		TRUE METRIX KIT	
		METER.....	92
		TRUE METRIX STRIPS	92
		TRULICITY	57
		TRUMENBA	78

TRUQAP	30	VANCOMYCIN INJ 1 GM	12	VIVITROL	55
TRUXIMA.....	30	VANCOMYCIN INJ 500MG.....	12	VIVOTIF CAP EC	79
TUKYSA	30	VANCOMYCIN INJ 750MG.....	12	VIZIMPRO.....	30
TURALIO	30	VANFLYTA.....	30	VONJO	30
turqoz.....	64	VAQTA.....	79	VORANIGO	30
twice-daily clindamycin phosphate (topical).....	88	varenicline tartrate....	55	voriconazole	12
TWINRIX INJ	78	varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	55	VOSEVI TAB.....	16
TYBOST	14	VARIVAX.....	79	VOWST CAP	70
tydemy	64	VASCEPA	36	VRAYLAR	45
TYENNE	75	VAXCHORA SUS.....	79	vyfemla	64
TYPHIM VI.....	78	velvet	64	vylibra	64
UBRELVY.....	53	VELSIPITY.....	76	VYZULTA	83
unithroid	68	VENCLEXTA.....	30	warfarin sodium	72
ursodiol	70	VENCLEXTA TAB START PK	30	water for irrigation, sterile irrigation soln	92
valacyclovir hcl	16	venlafaxine hcl	41	WELIREG	22
VALCHLOR	91	VENTOLIN HFA	85	wera	64
valganciclovir hcl.....	16	VENTOLIN HFA (INSTITUTIONAL PACK).....	85	WESTAB PLUS TAB 27-1MG	80
valproate sodium	49	VEOZAH	67	wixela inhub	88
valproic acid	49	verapamil hcl	37	wymzya fe	64
valsartan.....	34	VERQUVO	38	WYOST.....	59
valsartan- hydrochlorothiazide tab 160-12.5 mg	34	VERSACLOZ	45	XALKORI	30, 31
valsartan- hydrochlorothiazide tab 160-25 mg	34	VERZENIO	30	xarah fe	64
valsartan- hydrochlorothiazide tab 320-12.5 mg	34	vestura	64	XARELTO	72
valsartan- hydrochlorothiazide tab 320-25 mg	34	vienna	64	XARELTO STAR TAB 15/20MG	72
VALTOCO 10 MG DOSE	49	vigabatrin	49	XATMEP.....	76
VALTOCO 15 MG DOSE	49	vigadrone	49	XCOPRI	49, 50
VALTOCO 20 MG DOSE	49	VIGAFYDE	49	XCOPRI PAK 100-150.50	
VALTOCO 5 MG DOSE	49	vigpoder	49	XCOPRI PAK 12.5-25 .50	
valtya 1/50.....	64	vilazodone hcl	41	XCOPRI PAK 150-200MG (MAINTENANCE)....	50
vancomycin hcl ...	11, 12	VIMKUNYA	79	XCOPRI PAK 150-200MG (TITRATION)	50
		vincristine sulfate.....	22	XCOPRI PAK 50-100MG	50
		vinorelbine tartrate ..	22	XDEMVY	82
		viorele.....	64	XELJANZ	76
		VIRACEPT	14	XELJANZ XR.....	76
		VIREAD	14	xelria fe.....	64
		VITRAKVI.....	30	XERMELO	70
		VIVIMUSTA	20	XGEVA	59
				XHANCE	87

XIFAXAN	70	XPOVIO PAK (80 MG TWICE WEEKLY)	31	ZENPEP CAP 3000UNIT	70
XIGDUO XR TAB 10- 1000.....	57	XTANDI	21	ZENPEP CAP 40000UNT	71
XIGDUO XR TAB 10- 500MG	57	xulane	64	ZENPEP CAP 5000UNIT	70
XIGDUO XR TAB 2.5- 1000.....	57	XULTOPHY INJ 100/3.6	59	ZENPEP CAP 60000UNT	71
XIGDUO XR TAB 5- 1000MG	57	YESINTEK	76	ZERVIATE	82
XIGDUO XR TAB 5- 500MG	57	YF-VAX INJ	79	zidovudine	14
IIDRA	83	YONSA	21	ziprasidone hcl	45
XOFLUZA	16	YUTREPIA	39	ziprasidone mesylate .45	
XOLAIR	86, 87	yuvafem	65	ZIRABEV	31
XOSPATA	31	zafemy	65	ZIRGAN	82
XPOVIO PAK (100 MG ONCE WEEKLY)	31	zafirlukast	85	zoledronic acid	59
XPOVIO PAK (40 MG ONCE WEEKLY)	31	zaleplon	52	ZOLINZA	31
XPOVIO PAK (40 MG TWICE WEEKLY)....	31	ZARXIO	72	zolpidem tartrate	52
XPOVIO PAK (60 MG ONCE WEEKLY)	31	ZEGALOGUE	66	ZONISADE	50
XPOVIO PAK (60 MG TWICE WEEKLY)....	31	ZEJULA.....	31	zonisamide	50
XPOVIO PAK (80 MG ONCE WEEKLY)	31	ZELBORAF	31	zovia 1/35	65
		ZEMAIRA	87	ZTALMY	50
		zenatane	88	zumandimine	65
		ZENPEP CAP 10000UNT	70	ZURZUVAE	41
		ZENPEP CAP 15000UNT	71	ZYDELIG	31
		ZENPEP CAP 20000UNT	71	ZYKADIA	31
		ZENPEP CAP 25000UNT	71	ZYLET SUS 0.5-0.3% .81	

Ang Molina Healthcare ay isang C-SNP, D-SNP at HMO na plano na may kontrata sa Medicare. Ang mga plano sa D-SNP ay may kontrata sa programa ng Medicaid ng estado. Ang pagpapatala ay depende sa pag-renew ng kontrata.

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If you believe we have discriminated on the basis of age, color, disability, national origin, race, or sex, you can file a grievance. You can file a grievance by phone, mail, email, or online. If you need help writing your grievance, we will help you. You may obtain our grievance procedure by visiting our website at <https://www.molinahealthcare.com/members/common/en-US/Notice-of-Nondiscrimination.aspx>

Call our Civil Rights Coordinator at 1-866-606-3889, TTY/TDD: 711 or submit your grievance to:

Civil Rights Unit
200 Oceangate
Long Beach, CA 90802
Email: civil.rights@molinahealthcare.com
Website: <https://molinahealthcare.Alertline.com>

You can also file a civil rights complaint (grievance) with the U.S. Department of Health and Human Services, Office for Civil Rights, online through the Office for Civil Rights Complaint Portal at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
Phone: 1-800-368-1019
TTY/TDD: 800-537-7697

Complaint forms are available here: <https://www.hhs.gov/sites/default/files/ocr-cr-complaint-form-package.pdf>

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ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 877-353-0185 TTY/TDD711.	French Creole
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Na-update ang pormularyong ito noong 09/01/2025. Para sa higit pang kamakailang impormasyon o iba pang mga tanong, pakikontak ang Mga serbisyo para sa Miyembro ng Senior Whole Health of New York NHC sa (800) 665-3086 (dapat tumawag ang mga gumagamit ng TTY sa 711), Oktubre 1 – Marso 31: 7 araw sa isang linggo, 8 a.m. - 8 p.m., lokal na oras, Abril 1 - Setyembre 30: Lunes – Biyernes, 8 a.m. – 8 p.m., lokal na oras, o bisitahin ang SWHNY.com.