

**Programa de Farmacia de Triple-S Salud, Inc.
TRIPLE-S SALUD, INC.**

*Pharmacy Program from Triple-S Salud, Inc.
TRIPLE-S SALUD, INC.*

**LISTA DE MEDICAMENTOS
PLAN FEDERAL 2018**

Federal Plan 2018
Drug List

TSS-FAR-0098-2017-A
Rev. Noviembre / November 2017

Tabla de Contenido / Table of Contents

ESPAÑOL	10
INTRODUCCIÓN.....	10
PARTE I – DISEÑO Y MANEJO DE LA LISTA DE MEDICAMENTOS.....	11
PRESENTACIÓN DE LA LISTA DE MEDICAMENTOS	11
¿CÓMO PUEDO USAR MI LISTA DE MEDICAMENTOS?	11
¿CUÁNTO VOY A PAGAR POR LOS MEDICAMENTOS CUBIERTOS?	11
¿QUÉ SON MEDICAMENTOS GENÉRICOS (NIVEL 1)?	12
¿QUÉ SON MEDICAMENTOS DE MARCA PREFERIDOS (NIVEL 2)?	13
¿QUÉ SON MEDICAMENTOS DE MARCA NO PREFERIDOS (NIVEL 3)?	13
¿QUÉ SON MEDICAMENTOS ESPECIALIZADOS O BIOTECNOLÓGICOS PREFERIDOS (NIVEL 4)?	13
¿QUÉ SON LOS MEDICAMENTOS ESPECIALIZADOS O BIOTECNOLÓGICOS NO PREFERIDOS (NIVEL 5)?	13
¿QUÉ PASA SI MI MEDICAMENTO NO ESTÁ INCLUIDO EN LA LISTA?	13
¿PUEDE CAMBIAR LA LISTA?.....	14
GUÍA DE REFERENCIA	15
LEYENDA - SÍMBOLOS Y ABREVIATURAS	18
POLÍTICA PARA EL MANTENIMIENTO DE LA LISTA DE MEDICAMENTOS	19
EDITOR	20
COMENTARIOS.....	21
DERECHOS RESERVADOS.....	21
ENGLISH.....	22
INTRODUCTION	22
PART I - DRUG LIST DESIGN.....	23
PRESENTATION	23
HOW DO I USE THE DRUG LIST?	23
HOW MUCH WILL I PAY FOR COVERED DRUGS?	23
WHAT ARE GENERIC DRUGS (LEVEL 1)?	24
WHAT ARE PREFERRED BRAND DRUGS (LEVEL 2)?.....	25
WHAT ARE NON-PREFERRED BRAND DRUGS (LEVEL 3)?	25
WHAT ARE PREFERRED SPECIALTY DRUGS (LEVEL 4)?	25
WHAT ARE NON-PREFERRED SPECIALTY OR BIOTECH DRUGS (LEVEL 5)?.....	25
WHAT IF MY DRUG IS NOT ON THE LIST?	25
CAN THE DRUG LIST CHANGE?.....	26
REFERENCE GUIDE	27
LEGEND - ABBREVIATIONS AND SYMBOLS	29
POLICY FOR THE REVIEW AND MAINTENANCE OF THE DRUG LIST	30
POLICY FOR REQUESTING US TO EVALUATE DRUGS TO BE ADDED OR REMOVAL OF DRUGS FROM THE LIST.....	31
POLICY FOR THE DRUG LIST REVIEWS	31
EDITOR	31
COMMENTS	32
RESERVED RIGHTS	32
PART II – LISTA DE MEDICAMENTOS POR CLASIFICACIÓN TERAPÉUTICA / PART II – DRUGS LIST BY THERAPEUTIC CLASS.....	33
ANALGESICS [ANALGÉSICOS].....	33

NONSTEROIDAL ANTI-INFLAMMATORY DRUGS [ANTI-INFLAMATORIOS NO ESTEROIDALES]	33
OPIOID ANALGESICS, LONG-ACTING [ANALGÉSICOS OPIODES, LARGA DURACIÓN]	34
OPIOID ANALGESICS, SHORT-ACTING [ANALGÉSICOS OPIODES, CORTA DURACIÓN].....	35
OTHERS [OTROS].....	38
ANESTHETICS [ANESTÉSICOS].....	38
LOCAL ANESTHETICS [ANESTÉSICO LOCAL]	38
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS [TRATAMIENTO DE ABUSO DE SUSTANCIAS/CONTRA LA ADDICIÓN]	39
ALCOHOL DETERRENTS/ANTI-CRAVING [DISUASIVOS DE ALCOHOL/ANTI-ANSIEDAD]	39
BENZODIAZEPINE REVERSAL AGENTS [ANTAGONISTA DE BENZODIACEPINAS]	39
OPIOID DEPENDENCE TREATMENTS [TRATAMIENTO DEPENDIENTE DE OPIODE]	39
OPIOID REVERSAL AGENTS [ANTAGONISTA DE OPIOIDES]	40
ANTIBACTERIALS [ANTIBACTERIANOS]	40
AMINOGLYCOSIDES [AMINOGLICÓSIDOS].....	40
ANTIBACTERIALS, OTHER [ANTIBACTERIANOS, OTROS].....	40
BETA-LACTAM, CEPHALOSPORINS [CEFALOSPORINAS, BETA-LACTÁMICAS].....	41
BETA-LACTAM, OTHER [BETA-LACTÁMICOS, OTROS]	43
BETA-LACTAM, PENICILLINS [PENICILINAS, BETA-LACTÁMICAS].....	43
MACROLIDES [MACRÓLIDOS]	44
QUINOLONES [QUINOLONAS]	45
SULFONAMIDES [SULFONAMIDAS]	46
TETRACYCLINES [TETRACICLINAS]	46
ANTICONVULSANTS [ANTICONVULSIVANTES]	47
ANTICONVULSANTS, OTHER [ANTICONVULSIVANTES, OTROS]	47
CALCIUM CHANNEL MODIFYING AGENTS [MODIFICADORES DE CANALES DE CALCIO]	47
GAMMA-AMINOBUTYRIC ACID (GABA) AUGMENTING AGENTS [AGENTES AMPLIFICADORES DEL ACIDO GAMA-AMINOBUTIRATO]	47
GLUTAMATE REDUCING AGENTS [REDUCTORES DE GLUTAMATO]	48
SODIUM CHANNEL AGENTS [CANALES DE SODIO]	48
ANTIDEMENTIA AGENTS [ANTIDEMENCIA].....	49
ANTIDEMENTIA AGENTS, OTHER [ANTIDEMENCIA, OTROS].....	49
CHOLINESTERASE INHIBITORS [INHIBidores DE COLINESTERASA]	49
COMBINATIONS, OTHER [COMBINACIÓN, OTROS]	49
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONIST [ANTAGONISTA DEL RECEPTOR NMDA]	50
ANTIDEPRESSANTS [ANTIDEPRESIVOS]	50
ANTIDEPRESSANTS, OTHER [ANTIDEPRESIVOS, OTROS]	50
MONOAMINE OXIDASE B (MAO-B) INHIBITORS [INHIBidores DE MONOAMINA OXIDASA B]	50
SSRIS/SNRIS (SELECTIVE SEROTONIN REUPTAKE INHIBITORS/SEROTONIN AND NOREPINEPHRINE REUPTAKE INHIBITORS) [INHIBidores DE LA RECAPTACIÓN DE SEROTONINA/ NOREPINEFRINA (SSRIS/SNRIS)]	50
TRICYCLICS [TRICÍCLICOS]	52
ANTIEMETICS [ANTIEMÉTICOS]	52
ANTIEMETICS, OTHER [ANTIEMÉTICOS, OTROS]	52
EMETOGENIC THERAPY ADJUNCTS [ADJUVANTES PARA TERAPIA EMETOGÉNICA].....	53
ANTIFUNGALS [ANTIFUNGALES]	53
ANTIFUNGALS [ANTIFUNGALES]	53

ANTIGOUT AGENTS [ANTIGOTA]	54
ANTIGOUT AGENTS [ANTIGOTA]	54
ANTI-INFLAMMATORY AGENTS [ANTI-INFLAMATORIOS]	55
GLUCOCORTICOIDS [GLUCOCORTICOIDES].....	55
ANTIMIGRAINE AGENTS [ANTIMIGRAÑA]	56
ANTIMIGRAINE AGENTS, OTHER [ANTIMIGRAÑA, OTROS].....	56
ERGOT ALKALOIDS [ALCALOIDES DE ERGOTAMINA]	56
SEROTONIN (5-HT) 1B/1D RECEPTOR AGONISTS [AGONISTAS DEL RECEPTOR DE SEROTONINA]	56
ANTIMYASTHENIC AGENTS [ANTIMIASETÉNICOS].....	57
PARASYMPATHOMIMETICS [PARASIMPATOMIMÉTICOS].....	57
ANTIMYCOBACTERIALS [ANTIMICOBACTERIANOS]	58
ANTIMYCOBACTERIALS, OTHER [ANTIMICOBACTERIANOS, OTROS].....	58
ANTITUBERCULARS [ANTITUBERCULOSOS]	58
ANTINEOPLASTICS [ANTINEOPLÁSICOS].....	58
ALKYLATING AGENTS [AGENTES ALQUILANTES]	58
ANTIANDROGENS [ANTIANDROGENOS].....	59
ANTIANGIOGENIC AGENTS [ANTIANGIÓGENICOS].....	59
ANTIESTROGENS/MODIFIERS [ANTIESTRÓGENOS/MODIFICADORES]	59
ANTIMETABOLITES [ANTIMETABOLITOS]	59
ANTINEOPLASTICS, OTHERS [ANTINEOPLÁSICOS, OTROS].....	59
AROMATASE INHIBITORS, 3RD GENERATION [INHIBIDORES DE AROMATASA, 3RA GENERACIÓN]	60
ENZYME INHIBITORS [INHIBIDORES ENZIMÁTICOS]	60
MOLECULAR TARGET INHIBITORS [INHIBIDORES DEL BLANCO MOLECULAR].....	60
MONOCLONAL ANTIBODIES [ANTICUERPOS MONOCLONALES]	62
RETINOIDS [RETINOIDES].....	62
ANTIPARASITICS [ANTIPARASITARIOS]	62
ANTHELMINTICS [ANTIHELMÍNTICOS]	62
ANTIPROTOZOALS [ANTIPROTOZOARIOS]	62
PEDICULICIDES/SCABICIDES [PEDICULICIDAS/ESCABICIDAS].....	63
ANTIPARKINSON AGENTS [ANTIPARKINSON]	63
ANTICHOLINERGICS [ANTICOLINÉRGICOS].....	63
ANTIPARKINSON AGENTS, OTHERS [ANTIPARKINSON, OTROS]	63
DOPAMINE AGONIST [AGONISTAS DE DOPAMINA]	63
DOPAMINE PRECURSORS/L-AMINO ACID DECARBOXYLASE INHIBITORS [PRECURSORES DE DOPAMINA/INHIBIDORES DEL L-AMINO ACID DECARBOXYLASE].....	64
MONOAMINE OXIDASE B (MAO-B) INHIBITORS [INHIBIDORES DE MONOAMINA OXIDASA B]	64
ANTIPSYCHOTICS [ANTIPSICÓTICOS].....	64
1ST GENERATION/TYPICAL [1RA GENERACIÓN/TÍPICOS].....	64
2ND GENERATION/ATYPICAL [2DA GENERACIÓN/ATÍPICOS].....	65
TREATMENT-RESISTANT [RESISTENTES A TRATAMIENTO]	66
ANTISPASTICITY [ANTIESPASTICIDAD]	67
ANTISPASTICITY [ANTIESPASTICIDAD]	67
ANTIVIRALS [ANTIVIRALES]	67
ANTI-CYTOMEGALOVIRUS (CMV) [ANTI-CITOMEGALOVIRUS]	67

ANTIHEPATITIS AGENTS [ANTIHEPATITIS].....	67
ANTIHEPATITIS B (HBV) AGENTS [ANTI-HEPATITIS B (HBV)].....	67
ANTIHEPATITIS C (HCV) AGENTS [ANTI-HEPATITIS C (HCV)]	67
ANTIHERPETIC AGENTS [ANTIHERPÉTICOS]	68
ANTI-HIV ADJUVANTS [ANTI-VIH, ADJUVANTES].....	68
ANTI-HIV AGENTS, INTEGRASE INHIBITORS (INSTI) [ANTI-VIH, INHIBIDORES DE LA INTEGRASA (INSTI)].....	68
ANTI-HIV AGENTS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS [ANTI-VIH, INHIBIDORES NO NUCLEÓSIDOS DE LA TRANSCRIPTASA REVERSA].....	68
ANTI-HIV AGENTS, NUCLEOSIDE AND NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS [ANTI-VIH, INHIBIDORES NUCLEÓSIDOS Y NUCLEÓTIDOS DE LA TRANSCRIPTASA REVERSA].....	69
ANTI-HIV AGENTS, OTHERS [ANTI-VIH, OTROS].....	69
ANTI-HIV AGENTS, PROTEASE INHIBITORS [ANTI-VIH, INHIBIDORES DE LA PROTEASA]	70
ANTI-INFLUENZA AGENTS [ANTIINFLUENZA].....	70
ANTIRETROVIRAL COMBINATIONS [COMBINACIONES ANTIRETROVIRALES]	70
ANTIVIRALS, OTHER [ANTIVIRALES, OTROS]	71
ANXIOLYTICS [ANSIOLÍTICOS]	71
ANXIOLYTICS, OTHER [ANSIOLÍTICOS, OTROS].....	71
BENZODIAZEPINES [BENZODIAZEPINAS].....	71
BIPOLAR AGENTS [BIPOLARIDAD]	72
MOOD STABILIZERS [ESTABILIZADORES DEL ÁNIMO].....	72
BLOOD GLUCOSE REGULATORS [REGULADORES DE GLUCOSA EN SANGRE]	72
ANTIDIABETIC AGENTS [ANTIDIABÉTICOS].....	72
GLYCEMIC AGENTS [GLICÉMICOS]	74
INSULINS [INSULINAS].....	75
BLOOD PRODUCTS/MODIFIERS/VOLUME EXPANDERS [PRODUCTOS PARA LA SANGRE/MODIFICADORES/EXPANSORES DE VOLUMEN]	76
ANTICOAGULANTS [ANTICOAGULANTES].....	76
ANTIHEMOPHILICS [ANTIHEMOFÍLICOS]	77
BLOOD FORMATION MODIFIERS [MODIFICADORES DE LA FORMACIÓN DE SANGRE]	79
COAGULANTS [COAGULANTES]	80
HEMATOPOIETIC AGENTS [HEMATOPOIETICOS]	80
PLATELET MODIFYING AGENTS [MODIFICADORES DE PLAQUETAS].....	81
CARDIOVASCULAR AGENTS [CARDIOVASCULARES]	80
ALPHA-ADRENERGIC AGONISTS [AGONISTAS ALFA ADRENÉRGICOS].....	81
ALPHA-ADRENERGIC BLOCKING AGENTS [BLOQUEADORES ALFA ADRENÉRGICOS].....	82
ANGIOTENSIN II RECEPTOR ANTAGONISTS [ANTAGONISTAS DEL RECEPTOR ANGIOTENSINA II]	82
ANGIOTENSIN-CONVERTING ENZYME (ACE) INHIBITORS [INHIBIDORES DE LA ENZIMA CONVERTIDORA DE ANGIOTENSIN]	83
ANTIARRHYTHMICS [ANTIARRÍTMICOS]	83
BETA-ADRENERGIC BLOCKING AGENTS [BLOQUEADORES BETA ADRENÉRGICOS].....	84
CALCIUM CHANNEL BLOCKING AGENTS [BLOQUEADORES DE CANALES DE CALCIO]	85
CARDIOVASCULAR AGENTS, OTHER [CARDIOVASCULARES, OTROS]	86
COMBINATIONS, OTHER [COMBINACIÓN, OTROS]	87
DIURETICS, CARBONIC ANHYDRASE INHIBITORS [DIURÉTICOS INHIBIDORES DE ANHIDRASA CARBÓNICA]	87
DIURETICS, LOOP [DIURÉTICOS DEL ASA]	87
DIURETICS, POTASSIUM-SPARING [DIURÉTICOS CONSERVADORES DE POTASIO]	87
DIURETICS, THIAZIDE [DIURÉTICOS TIAZIDAS]	88
DYSLIPIDEMICS, FIBRIC ACID DERIVATIVES [DISLIPIDÉMICOS, DERIVADOS DE ÁCIDO FÍBRICO]	88

DYSLIPIDEMICS, HMG COA REDUCTASE INHIBITORS [DISLIPIDÉMICOS, INHIBIDORES DE LA REDUCTASA DE HMG COA]	88
DYSLIPIDEMICS, OTHER [DISLIPIDÉMICOS, OTROS]	89
VASODILATORS, DIRECT-ACTING ARTERIAL [VASODILATADORES, ARTERIALES]	89
VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS [VASODILATADORES, ARTERIALES/ VENOSOS]	90
CENTRAL NERVOUS SYSTEM AGENTS [SISTEMA NERVIOSO CENTRAL]	90
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, AMPHETAMINES [ANFETAMINAS, ADHD]	90
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, NON-AMPHETAMINES [NO-ANFETAMINAS, ADHD]	91
CENTRAL NERVOUS SYSTEM AGENTS, OTHERS [SISTEMA NERVIOSO CENTRAL, OTROS]	93
FIBROMYALGIA [FIBROMIALGIA]	93
MULTIPLE SCLEROSIS AGENTS [ESCLEROSIS MÚLTIPLE]	93
WEIGHT MANAGEMENT [MANEJO DEL PESO]	94
DENTAL AND ORAL AGENTS [DENTALES Y ORALES]	95
DENTAL AND ORAL AGENTS [DENTALES Y ORALES]	95
DERMATOLOGICAL AGENTS [DERMATOLÓGICOS]	95
ACNE AGENTS [ACNÉ]	95
ANTIBACTERIALS [ANTIBACTERIANOS]	96
ANTIFUNGALS [ANTIFUNGALES]	97
CAUSTIC AGENTS [CAÚSTICOS]	98
DERMATOLOGICAL CALCINEURIN INHIBITOR IMMUNOSUPPRESANTS [INHIBIDORES DE CALCINEURINA]	98
MITOTIC INHIBITORS [INHIBIDORES DE LA MITOSIS]	99
NON-MELANOMA SKIN CANCER AGENTS [CÁNCER DE LA PIEL NO-MELOMA]	99
PHOTOCHEMOTHERAPY AGENTS [FOTOQUIMIOTERAPIA]	99
PSORIASIS AGENTS [PSORIASIS]	99
WART AGENTS [VERRUGAS]	99
WOUND-CARE AGENTS [CUIDADO DE HERIDAS]	99
ENZYME REPLACEMENTS/MODIFIERS [REEMPLAZO DE ENZIMAS/MODIFICADORES]	99
ANTI-CYSTINE AGENTS [ANTI-CISTINA]	99
FABRY DISEASE [ENFERMEDAD DE FABRY]	99
GAUCHER'S DISEASE TREATMENT [ENFERMEDAD DE GAUCHER]	100
GLUCOSYL CERAMIDE SYNTHASE INHIBITORS [INHIBIDORES DE LA SINTETASA DE GLUCOSIL CERAMIDA]	100
HOMOCYSTEINURIA TREATMENT [HOMOCISTINURIA]	100
HUNTER SYNDROME TREATMENT [SINDROME DE HUNTER]	100
MUCOPOLYSACCHARIDOSIS DISEASE TREATMENT [MUCOPOLISACARIDOSIS]	100
PHENYLKETONURIA TREATMENT [FENILCETONURIA]	100
SEVERE COMBINED IMMUNODEFICIENCY DISEASE (SCID) TREATMENT [INMUNODEFICIENCIA COMBINADA SEVERA]	100
TYROSINEMIA TREATMENT [TIROSINEMIA]	100
UREA CYCLE DISORDER TREATMENT [DESORDEN DEL CICLO DE UREA]	101
GASTROINTESTINAL AGENTS [GASTROINTESTINALES]	101
ANTISPASMODICS, GASTROINTESTINAL [ANTIESPASMÓDICOS, GASTROINTESTINALES]	101
ENZYME REPLACEMENT [REEMPLAZO ENZIMÁTICO]	101
GASTROINTESTINAL AGENTS, OTHERS [GASTROINTESTINALES, OTROS]	102
HISTAMINE2 (H ₂) RECEPTOR ANTAGONISTS [ANTAGONISTAS DEL RECEPTOR DE HISTAMINA2 (H ₂)]	103
LAXATIVES [LAXANTES]	103

MISCELLANEOUS [MISCELÁNEOS].....	104
PROTECTANTS [PROTECTORES]	104
PROTON PUMP INHIBITORS [INHIBIDORES DE LA BOMBA DE PROTONES]	104
GENITOURINARY AGENTS [GENITOURINARIOS]	105
ACIDIFIERS [ACIDIFICADORES]	105
ALKALINIZERS [ALCALINIZADORES]	105
ANTISPASMODICS, URINARY [ANTIESPASMÓDICOS, URINARIOS].....	105
BENIGN PROSTATIC HYPERSTROPHY AGENTS [HIPERTROFIA PROSTÁTICA BENIGNA].....	106
MISCELLANEOUS [MISCELÁNEOS].....	106
PHOSPHATE BINDERS [ENLAZADORES DE FOSFATO].....	107
PHOSPHODIESTERASE TYPE 5 INHIBITORS [INHIBIDORES DE PDE-5]	107
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL) [HORMONALES, ESTIMULANTE/REEMPLAZO/MODIFICADOR (ADRENAL)]	107
GLUCOCORTICOIDS / MINERALOCORTICOIDS [GLUCOCORTICOIDES/MINERALOCORTICOIDES]	108
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY) [HORMONALES, ESTIMULANTE/REEMPLAZO/MODIFICADOR (PITUITARIA)].....	113
HORMONAL AGENTS, STIMULANT/ REPLACEMENT/MODIFYING (PITUITARY) (HORMONALES, ESTIMULANTE/REEMPLAZO/MODIFICADOR (PITUITARIA)).....	113
VASOPRESSIN ANALOGS [ANÁLOGOS DE VASOPRESINA].....	114
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS) [HORMONALES, ESTIMULANTE/REEMPLAZO/MODIFICADOR (HORMONAS SEXUALES/MODIFICADORES)].....	114
ANABOLIC STEROID [ESTEROIDE ANABÓLICO].....	114
ANDROGENS [ANDRÓGENOS].....	114
ESTROGENS [ESTRÓGENOS].....	115
PROGESTINS [PROGESTINAS].....	116
SELECTIVE ESTROGEN RECEPTOR MODIFYING AGENTS [MODIFICADORES SELECTIVOS DEL RECEPTOR DE ESTRÓGENO]	116
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID) [HORMONALES, ESTIMULANTE/REEMPLAZO/MODIFICADOR (TIROIDE)]	116
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID) [HORMONALES, ESTIMULANTE/REEMPLAZO/MODIFICADOR (TIROIDE)].....	116
HORMONAL AGENTS, SUPPRESSANT (ADRENAL) [HORMONALES, SUPRESORES (ADRENAL)]	117
HORMONAL AGENTS, SUPPRESSANT (ADRENAL) [HORMONALES, SUPRESORES (ADRENAL)].....	117
HORMONAL AGENTS, SUPPRESSANT (PARATHYROID) [HORMONALES, SUPRESORES (PARATIROIDEO)]	117
HORMONAL AGENTS, SUPPRESSANT (PARATHYROID) [HORMONALES, SUPRESORES (PARATIROIDEO)].....	117
HORMONAL AGENTS, SUPPRESSANT (PITUITARY) [HORMONALES, SUPRESORES (PITUITARIA)]	117
HORMONAL AGENTS, SUPPRESSANT (PITUITARY) [HORMONALES, SUPRESORES (PITUITARIA)]	117
HORMONAL AGENTS, SUPPRESSANT (THYROID) [HORMONALES, SUPRESORES (TIROIDE)]	118
ANTITHYROID AGENTS [ANTITIROIDE]	118

IMMUNOLOGICAL AGENTS [INMUNOLÓGICOS]	118
ANGIOEDEMA AGENTS [AGENTES PARA EL TRATAMIENTO DE ANGIOEDEMA]	118
IMMUNE SUPPRESSANTS [SUPRESORES INMUNOLÓGICOS]	118
IMMUNIZING AGENTS, PASSIVE [INMUNIZADORES PASIVOS]	120
IMMUNOMODULATORS [INMUNOMODULADORES]	122
INFLAMMATORY BOWEL DISEASE AGENTS [ENFERMEDAD INFLAMATORIA INTESTINAL]..	122
AMINOSALICYLATES [AMINOSALICILATOS]	122
GLUCOCORTICOIDS [GLUCOCORTICOIDES]	123
SULFONAMIDES [SULFONAMIDAS]	123
METABOLIC BONE DISEASE AGENTS [ENFERMEDAD DEL METABOLISMO DEL HUESO]....	123
METABOLIC BONE DISEASE AGENTS [ENFERMEDAD DEL METABOLISMO DEL HUESO].....	123
MISCELLANEOUS [MISCELÁNEOS]	124
MISCELLANEOUS [MISCELÁNEOS].....	124
OPHTHALMIC AGENTS [OFTÁLMICOS]	124
ANTI-ALLERGY AGENTS [ANTIALÉRGICOS]	124
ANTIBACTERIALS [ANTIBACTERIANOS].....	125
ANTIGLAUCOMA AGENTS [ANTIGLAUCOMA].....	126
ANTIINFLAMMATORIES [ANTIINFLAMATORIOS]	127
OPHTHALMIC AGENTS, OTHERS [OFTÁLMICOS, OTROS]	128
PROSTAGLANDINS AND PROSTAMIDES [PROSTAGLANDINAS Y PROSTAMIDAS]	128
OTIC AGENTS [ÓTICOS]	128
ANTIBACTERIALS [ANTIBACTERIANOS].....	128
ANTIINFLAMMATORIES [ANTIINFLAMATORIOS]	128
OTIC, MISCELLANEOUS [ÓTICOS, MISCELÁNEOS]	129
RESPIRATORY TRACT/PULMONARY AGENTS [TRACTO RESPIRATORIO].....	129
ANTIHISTAMINES [ANTIHISTAMÍNICOS].....	129
ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS [ANTI-INFLAMATORIOS, CORTICOSTEROIDES INHALADOS]	130
ANTILEUKOTRIENES [ANTILEUKOTRIENOS].....	132
BRONCHODILATORS, ANTICHOLINERGIC [BRONCODILATADORES, ANTICOLINÉRGICOS]	132
BRONCHODILATORS, PHOSPHODIESTERASE INHIBITORS (XANTHINES) [BRONCODILATADORES, INHIBIDORES DE LA FOSFODIESTERASA (XANTINAS)].....	133
BRONCHODILATORS, SYMPATHOMIMETIC [BRONCODILATADORES, SIMPATOMIMÉTICOS]	133
CYSTIC FIBROSIS AGENTS [AGENTES PARA FIBROSIS QUITICA]	134
MAST CELL STABILIZERS [ESTABILIZADORES DE MASTOCITOS]	134
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE [INHIBIDORES DE FOSFODIESTERASA]	134
PULMONARY ANTIHYPERTENSIVES [ANTI-HIPERTENSIVOS PULMONALES]	134
RESPIRATORY TRACT AGENTS, OTHERS [TRACTO RESPIRATORIO, OTROS]	135
SKELETAL MUSCLE RELAXANTS [RELAJANTES MUSCULOESQUELETALES]	136
SKELETAL MUSCLE RELAXANTS [RELAJANTES MUSCULOESQUELETALES].....	136
SLEEP DISORDER AGENTS [DESORDENES DEL SUEÑO].....	136
GABA RECEPTOR MODULATORS [MODULADORES DEL RECEPTOR DE GABA]	136
SLEEP DISORDER, OTHER [DESÓRDENES DEL SUEÑO, OTROS]	137
THERAPEUTIC NUTRIENTS/MINERALS/ELECTROLYTES [NUTRIENTES TERAPÉUTICOS/MINERALES/ ELECTROLITOS]	137

ELECTROLYTE/MINERAL REPLACEMENT [REEMPLAZO DE ELECTROLITOS/MINERALES].....	138
ELECTROLYTES/MINERALS MODIFIERS [MODIFICADORES DE ENZIMAS/MODIFICADORES].....	139
VITAMINS [VITAMINAS].....	139
PARTE III – APÉNDICES / PART III - APPENDIXES.....	141
APÉNDICE I – TERAPIAS ESCALONADAS / APPENDIX I – STEP THERAPIES.....	141
APÉNDICE II – LÍMITES DE ESPECIALIDAD / APPENDIX II – SPECIALTY LIMITS (SL).....	147
APÉNDICE III – SOLICITUD DE EXCEPCIÓN MÉDICA / APPENDIX III - MEDICAL EXCEPTION APPLICATION.....	148
ÍNDICE / INDEX.....	149

Español

Introducción

Tu beneficio de farmacia con Triple-S usa una Lista de Medicamentos. La Lista de Medicamentos es una guía de los medicamentos seleccionados por el Comité de Farmacia y Terapéutica de Triple-S Salud, la cual representa los medicamentos vitales para un cuidado de alta calidad. Nuestro Comité de Farmacia y Terapéutica está formado por doctores, farmacéuticos clínicos y otros expertos de la salud, quienes se reúnen periódicamente para evaluar y escoger aquellos medicamentos que serán añadidos en esta Lista de Medicamentos. Esta selección se hace a base de la seguridad, efectividad y costo de los medicamentos.

La Lista de Medicamentos se divide en tres partes.

La primera parte es un resumen que te ofrece información sobre la forma en que se diseñó la Lista. También se incluye una descripción de los éditos de análisis de utilización para validar dosis e identificar terapias duplicadas. Estos éditos están a través del sistema de MC-21 Corporation.

La segunda parte tiene los medicamentos por clase terapéutica.

La tercera parte contiene los Apéndices y una lista por orden alfabético (Índice) de los medicamentos de marca y genéricos en la Lista.

Para más información de cómo obtener tus medicamentos, busca la Sección 5(f) de tu Guía del Programa FEHB.

Esta es una lista parcial e incluye sólo algunos medicamentos cubiertos por Triple-S Salud. Si deseas mayor información visita nuestro portal en la Internet www.ssspr.com o llama a nuestro Departamento de Servicio al Cliente:

Puerto Rico: 787-774-6081 (TTY: 787-792-1370)
USVI: 800-716-6081 (TTY:866-215-1999)

Parte I – Diseño y Manejo de la Lista de Medicamentos

Presentación de la Lista de Medicamentos

A continuación, presentamos la información que ofrecemos para los medicamentos en la Lista.

Nombre del Medicamento	Referencia	Nivel	Instrucciones
Antigota			
allopurinol oral tablet 100 mg, 300 mg	Zyloprim	1	
colchicine oral tablet 0.6 mg	Colcrys	1	
colchicine-probenecid oral tablet 0.5-500 mg		1	
probenecid oral tablet 500 mg		1	
ULORIC ORAL TABLET 40 MG, 80 MG		3	PA; QL (1 TAB per 1 day)

Para todos los medicamentos en la Lista de Medicamentos aparece el nombre del medicamento, nombre de referencia (si aplica), el nivel y si tiene alguna instrucción especial.

En la Lista, los medicamentos genéricos se encuentran escritos en letras **negrillas** minúsculas (como **allopurinol**) y los medicamentos de marca en letras mayúsculas (como **ULORIC**).

¿Cómo puedo usar mi Lista de Medicamentos?

La forma más fácil en que puedes conseguir tus medicamentos en la Lista es buscando tu medicamento en el Índice que comienza en la página 149. El Índice provee una lista por orden alfabético de todos los medicamentos en este documento. Ambos, medicamentos de marca y genéricos, están en el Índice. Busca el Índice y encuentra tu medicamento. Al lado de tu medicamento, encontrarás el número de la página dónde sale la información de la cubierta. Voltea a la página en el Índice y encuentra el nombre del medicamento en la primera columna de la lista.

¿Cuánto voy a pagar por los medicamentos cubiertos?

Los medicamentos en la lista se clasifican por niveles, menos aquellos que tienen \$0 copago, si son recetados o provistos por proveedores de la red de Triple-S Salud. Estos niveles identifican el costo compartido, o sea lo que pagas, por los medicamentos en la receta. Estos niveles son los siguientes:

- Nivel 1 – Medicamentos Genéricos
- Nivel 2 – Medicamentos de Marca Preferidos
- Nivel 3 – Medicamentos de Marca No Preferidos
- Nivel 4 – Medicamentos Especializados o Biotecnológicos Preferidos
- Nivel 5 – Medicamentos Especializados o Biotecnológicos No Preferidos

Debes verificar en la Guía de Beneficios (Sección 5(f)) cuánto es el copago o coaseguro que pagarás por el medicamento, dependiendo del nivel en que se encuentra. No pagarás nada (\$0) por los siguientes medicamentos si son recetados o provistos por proveedores de la red de Triple-S Salud:

- Anticonceptivos aprobados por la FDA (OTC y con receta médica¹)
- Fluoruro (hasta los 6 años)
- Aspirina (con límite de una 1 tableta/ diaria; desde los 18 años)
- Hierro (hasta los 12 meses)
- Ácido fólico (sólo para mujeres)
- Evista y Nolvadex (para prevenir cáncer de seno)
- Medicamentos para dejar de fumar aprobados por la FDA (se cubre el despacho de medicamentos por 90 días seguidos en un intento y hasta dos intentos por año)

Tu cubierta de farmacia te ofrece algunos medicamentos OTC con \$0.00 copago si son recetados o provistos por proveedores de la red de Triple-S Salud.

¿Qué son Medicamentos Genéricos (Nivel 1)?

Un medicamento genérico tiene el mismo ingrediente activo en su fórmula que un medicamento de marca. Los genéricos son aprobados por la Administración de Drogas y Alimentos (FDA, por sus siglas en inglés) y usualmente cuestan menos que el de marca.

Tu cubierta de farmacia requiere que uses el genérico como primera opción, si el genérico existe en el mercado. Si tú o tu doctor eligen un medicamento de marca en lugar de la versión genérica existente, pagarás el copago del medicamento genérico más la diferencia entre el costo del medicamento de marca y el genérico; aun cuando tu doctor escriba “original” o “no sustituir”. Tienes derecho a solicitar, con una justificación médica, para que te cubramos un medicamento de marca que tiene un medicamento genérico. Si aprobamos el medicamento, pagarás el copago del Nivel 3.

Cuando la versión genérica de un medicamento de marca está disponible, automáticamente se incluye en la Lista y el medicamento de marca cambia de Nivel a uno mayor, lo cual puede causar un cambio en el copago o coaseguro que pagas.

Los medicamentos genéricos de las siguientes categorías tienen \$0.00 copago si son recetados por proveedores de la red de Triple-S:

- Antihipertensivos genéricos: inhibidores de la enzima convertidora de angiotensina (ACEIs, por sus siglas en inglés), antagonistas de los receptores de la angiotensina II (ARBs, por sus siglas en inglés), inhibidor directo de la renina;
- Antidiabéticos genéricos (excluye insulinas);
- Estatinas genéricas.

Te sugerimos que uses los medicamentos genéricos. Estos son iguales en potencia y dosis y también son aprobados por la FDA.

¹ Aplica a ciertos anticonceptivos de las siguientes categorías: cápsula cervical, condón femenino, algunos contraceptivos orales, dispositivo intrauterino (IUD, por sus siglas en inglés) de cobre, dispositivo intrauterino (IUD) con progestina, diafragma, anticonceptivos de emergencia orales, espermicida, parche, anillo vaginal, inyección, esponja con espermicida, implante subdermal.

¿Qué son Medicamentos de Marca Preferidos (Nivel 2)?

Hay ciertos medicamentos de marca que han sido escogidos por el Comité como agentes preferidos luego de ser evaluados por seguridad, eficacia y costo. Los mismos están identificados a la derecha como Nivel 2. En aquellas clases terapéuticas donde no hay genéricos, te sugerimos que uses como primera alternativa aquellos medicamentos preferidos.

¿Qué son Medicamentos de Marca No Preferidos (Nivel 3)?

Un medicamento es clasificado como “no preferido” porque existen opciones en los niveles anteriores que son más costo-efectivos o con menos efectos secundarios. Si obtienes un medicamento de marca del Nivel 3, tendrás que pagar un costo mayor por el medicamento.

¿Qué son Medicamentos Especializados o Biotecnológicos Preferidos (Nivel 4)?

Los medicamentos especializados requieren una administración y/o un manejo especial, por su composición compleja. Estos se usan para el tratamiento de condiciones crónicas y de alto riesgo.

El Nivel 4 identifica los medicamentos o productos en la Lista que se ofrecen bajo el Programa de Medicamentos para Condiciones Especiales. Los medicamentos en este nivel incluyen medicamentos genéricos, biosimilares (genéricos de productos biológicos) y de marca a un costo menor y un arreglo especial para su despacho.

¿Qué son los Medicamentos Especializados o Biotecnológicos No Preferidos (Nivel 5)?

El Nivel 5 incluye los Medicamentos Especializados No Preferidos. Los medicamentos en este nivel también tienen tiene un arreglo especial para su despacho con la diferencia de que tienen un costo mayor que los del Nivel 4. Estos se usan también para tratar condiciones crónicas y de alto riesgo que requieren una administración y manejo especial.

Programa para el Manejo de Medicamentos Especializados

Triple-S Salud te ofrece el Programa para el Manejo de Medicamentos Especializados para Condiciones Especiales. Este programa cuenta con una red de farmacias especializadas dedicadas a que estos medicamentos sean despachados y administrados correctamente. Las farmacias en el programa son: CVS Caremark Specialty Pharmacy, Axium Healthcare PR Pharmacy, Special Care Pharmacy Service, SPS Specialty Pharmacy Services y Walgreens Specialty Pharmacy. Estas farmacias son proveedores altamente reconocidos en sus comunidades y en toda la Isla.

¿Qué pasa si mi medicamento no está incluido en la Lista?

Si tu medicamento no está en Lista, debes llamar a nuestro Departamento de Servicio al Cliente y preguntar si éste está cubierto. Si te enteras de que tu medicamento no está cubierto, puedes solicitar a Servicio al Cliente una lista de los medicamentos similares que estén cubiertos. Cuando la recibas, enséñala a tu doctor y pídele que te recete un medicamento similar que esté cubierto.

¿Puede cambiar la Lista?

Podemos añadir o remover medicamentos por determinadas razones. También podemos mover un medicamento de un nivel a otro. Esta lista está actualizada a la fecha de octubre de 2017. Para obtener una lista actualizada, por favor visita nuestro portal en Internet www.ssspr.com o llámanos a

Puerto Rico: 787-774-6081 (TTY: 787-792-1370)
USVI: 800-716-6081 (TTY:866-215-1999)

Si la Administración de Drogas y Alimentos (FDA, por sus siglas en inglés) dispone que un medicamento en nuestra Lista no es seguro o el manufacturero lo remueve del mercado, nosotros lo removeremos de nuestra Lista en el momento y notificaremos a los asegurados que están tomando el medicamento.

Guía de Referencia

Programa de Terapia Escalonada

En algunos casos, te solicitaremos que pruebes primero un medicamento para tratar tu condición antes de usar otros medicamentos para esa condición (terapia escalonada). Por ejemplo, si el medicamento A y B pueden tratar tu condición, puede que necesitemos que uses el medicamento A antes del B. Si el medicamento A no funciona para tratar tu condición, entonces vamos a cubrir el medicamento B.

En algunos casos necesitarás usar medicamentos OTC o medicamentos genéricos antes de usar otros medicamentos para tratar tu condición. Debes usar el medicamento OTC como primera opción para tratar las úlceras y reflujo, alergias de la nariz y alergias de los ojos. Debes usar los genéricos como primera opción para el colesterol, la osteoporosis, alergias de la nariz, insomnio, alta presión sanguínea, el control del dolor, el alto nivel de azúcar en la sangre, depresión e hiperactividad.

El Apéndice I contiene la lista de los medicamentos que tienen terapia escalonada. La misma es efectiva al momento de imprimirse esta Lista y está sujeta a cambios.

Medicamentos que Necesitan Pre-autorización (PA)

Los medicamentos que necesitan una pre-autorización usualmente son aquellos que presentan un posible nivel de toxicidad, son candidatos al uso inapropiado o están relacionados con un alto costo.

Aquellos medicamentos que han sido identificados que necesitan una pre-autorización deben cumplir unas guías clínicas según lo haya establecido el Comité. Estas guías clínicas se crearon de acuerdo a la literatura médica actual.

Medicamentos cuyo costo excedan \$500.00 necesitan una pre-autorización para su despacho. La farmacia enviará copia de la receta a MC-21 Corporation a través del facsímil 1-866-387-3487 o 1-866-277-6556 para la autorización de la misma.

Límites de Cantidad (QL)

Ciertos medicamentos tienen un límite en la dosis a despacharse. Estos límites se establecen de acuerdo a lo sugerido por el manufacturero como la cantidad máxima apta que no está asociada a reacciones adversas y la cual es efectiva para tratar una condición. En el área de Instrucciones de la Lista se identificaron los límites en la dosis a despacharse, en aquellos medicamentos que aplique. Estos límites son efectivos al momento de imprimirse esta Lista y está sujeta a cambios.

Límites de Especialidad Médica (SL)

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

El Apéndice II contiene la lista de los medicamentos que tienen límite de especialidad médica. La misma es efectiva al momento de imprimirse esta Lista y está sujeta a cambios.

Límites de Edad (AL)

Algunos medicamentos tienen un límite de edad. Estos límites son efectivos al momento de imprimirse esta Lista y están sujetos a cambios.

Uso de medicamentos en investigación o experimentales

Los medicamentos recetados para uso investigacional, experimental o no aprobados por la FDA, no se cubren en ningún plan de salud o cubierta de farmacia.

Las indicaciones no aprobadas por la FDA, no se cubren en ningún plan de salud o cubierta de farmacia.

Recetas de Compuestos

Las recetas de compuestos están cubiertas si contienen por lo menos un medicamento de la Lista, si no son para uso cosmético.

Éditos de Análisis de Utilización (DUR)

A través del Programa de Beneficio de Farmacia de Triple-S Salud se han implantado los siguientes éditos de análisis de utilización (DUR, por sus siglas en inglés) con el propósito de evitarte complicaciones, ofreciendo un mejor cuidado.

- Édito de Validación de Dosis - coteja las dosis máximas diarias usando como referencia las dosis pediátricas, de adultos y geriátricas de acuerdo a la información suministrada por Medi-Span®. En la mayoría de los casos, la dosis máxima es aquella aprobada por la FDA.

Medi-Span®, parte de la compañía Wolters Kluwer Health, es el proveedor líder de información sobre medicamentos con recetas que provee soluciones para interacciones de medicamentos por medio de una base de datos disponible a miles de profesionales de cuidado de salud a través del mundo entero. Los datos en la base de datos de MediSpan® ayudan eficientemente a la seguridad del paciente, reestructurar y unificar todo el sistema de comunicaciones y procesamiento de reclamaciones entre las farmacias y los administradores de beneficios de farmacia y el cumplimiento con diversas regulaciones.

- Édito de Terapia Duplicada - verifica tu historial de medicamentos para recetas duplicadas, de dos formas:
 1. Si recibes el mismo medicamento (Ej. mismo ingrediente activo) con dos recetas distintas (Ej. número de receta distinto, puede ser la misma farmacia o farmacias diferentes).
 2. Si recibes dos medicamentos de la misma clase terapéutica, como, por ejemplo, dos antidepresivos o dos analgésicos, entre otros.

Hay ciertas excepciones a estos éditos. Para evitar que el sistema rechace el servicio, nosotros solicitamos a los doctores y dentistas que incluyan la siguiente información en la receta:

- Cambio en dosis

Si aumentó la dosis y necesitas más medicamentos antes de tiempo, en este caso se necesitará una carta de justificación de parte de tu doctor indicando el cambio en dosis. La farmacia necesitará una preautorización a MC-21 Corporation, luego de que se reciba la información necesaria en la receta.

1. Si la dosis se determina por tu peso, el médico debe indicar tu peso y estatura en la receta.
2. Cuando la dosis del medicamento se ajusta de acuerdo a los niveles en la sangre, el doctor debe indicarlo así en la receta (Ej. ajuste de niveles para tiroides, teofilina, anticonvulsivos y warfarina).
3. Cuando para la dosis indicada en la receta no existe su presentación farmacéutica. Por ejemplo, la tableta viene de 25 mg y 50 mg, pero necesitas 75 mg (dosis indicada y aceptada). La farmacia necesitará una precertificación a MC-21 Corporation, luego de que se reciba la información necesaria en la receta (se requiere copia de la receta y hoja de preautorizaciones de MC-21 Corporation).

Leyenda - Símbolos y Abreviaturas

Símbolos y Abreviaturas	Descripción
AL	Identifica aquellos medicamentos para los cuales existe algún límite de edad
Cap	Cápsula
Conc	Concentrado
Cr	Crema
ER, SR, CR	Acción prolongada, acción sostenida, acción controlada
Inh	Inhalador
Inj	Inyectable
QL	Identifica aquellos medicamentos para los cuales existe algún límite en la cantidad que la farmacia puede despachar
SL	Identifica aquellos medicamentos para los cuales existe algún límite en la especialidad médica que debe manejar la terapia con estos productos
Lot	Loción
Negrilla (Bold)	Identifica que el medicamento tiene genérico disponible en todas las presentaciones
Nivel 1	Identifica los medicamentos genéricos
Nivel 2	Identifica los medicamentos de marca preferidos
Nivel 3	Identifica los medicamentos de marca no preferidos
Nivel 4	Identifica los medicamentos especializados o biotecnológicos preferidos
Nivel 5	Identifica los medicamentos especializados o biotecnológicos no preferidos
Oint	Ungüento
Oph	Oftálmico
PA	Pre-autorización. La farmacia es responsable de solicitar y obtener una pre-autorización con <i>MC-21 Corporation</i> o <i>Triple-S Salud, Inc.</i> , antes de despacharse el medicamento
SHA	Champú
SI	Sublingual
SNC	Sistema Nervioso Central
Soln	Solución
ST	Terapia Escalonada
Supp	Suppositorio
Susp	Suspensión
Tab	Tableta
Td	Transdermal

Política para el Mantenimiento de la Lista de Medicamentos

El Comité de Farmacia y Terapéutica se reúne cada mes para revisar los nuevos medicamentos y nueva información de los medicamentos que ya están en el mercado y en nuestra Lista. En el Comité participan médicos, dentistas, farmacéuticos y administradores de Triple-S Salud. Ellos revisan la información sobre la seguridad, la eficacia, el uso actual de la terapia y pruebas científicas, tales como las conclusiones pertinentes de organismos del gobierno federal, empresas farmacéuticas, asociaciones profesionales de médicos, comisiones nacionales y revistas revisadas por colegas. Doctores que no tienen intereses empresariales y financieros en Triple-S Salud, Inc. o MC-21 Corporation son los únicos que pueden votar. Los doctores, farmacéuticos y otros profesionales que son empleados de Triple-S Salud y MC-21 Corporation participan en el Comité, pero no pueden votar. Ellos van a las reuniones del Comité como coordinadores y administradores. Una vez que el Comité termina su evaluación, también miramos el valor en general (costos y descuentos del fabricante) y otros elementos antes de añadir o remover un medicamento del formulario.

El Comité establece las prioridades para la revisión basado en:

- Análisis de la utilización de medicamentos no preferidos que a menudo son recetados. Estos medicamentos se evalúan para colocarlos en otros niveles. Medicamentos aprobados por la FDA.
- Si un doctor o un dentista de la red de Triple-S Salud solicita evaluación del medicamento. (Por favor vea los pasos para que doctores y dentistas deben seguir para pedir que se añada o retire un medicamento de la Lista).

Cuando un medicamento se añade a una clase, revisamos los medicamentos que podrían retirarse de esa clase, si los hubiese.

Los medicamentos que están designados como no preferidos, luego de ser evaluados por el Comité, es que no ofrecen ningún valor clínico ni económico en comparación con otros medicamentos.

En otros casos podría ser que no haya suficientes pruebas en la literatura médica que justifique su uso clínico, al momento de hacer la evaluación. También puede ser que algunas presentaciones de los productos no están disponibles para su uso ambulatorio y sólo se usen en el hospital.

Política para Solicitud de Evaluación de Inclusión o Exclusión de Medicamentos de la Lista

Todo doctor y dentista de la red de Triple-S Salud, Inc. puede pedir que se evalúe añadir y/o eliminar medicamentos a la Lista de la siguiente forma:

- El doctor o dentista debe llenar la hoja de petición de evaluación de medicamentos (Drug List Review Request) en todas sus partes.
- Para obtener la hoja de petición de evaluación de medicamentos (*Drug List Review Request*), él/ella debe comunicarse con el Departamento de Servicios Clínicos de MC-21 Corporation, al **787-286-6032 ext. 3289 ó 1-877-741-7470**.
- Debe enviarla por correo, luego de que sea completada en todas sus partes, a la siguiente dirección:

MC-21 Corporation
Attn: *Clinical Services Department / Drug List Review Request*
Call Box 4908, Caguas, PR 00726

El Departamento de Servicios Clínicos de MC-21 Corporation procederá a hacer la evaluación del producto en la petición, para ser presentada al Comité de Farmacia y Terapéutica en la fecha designada por los miembros del Comité. La solicitud de evaluación para añadir/eliminar tiene que estar completa en todas sus partes, ya que la misma formará parte de la evaluación formal que preparará el Departamento Clínico de MC-21 Corporation para dicho producto.

Política para Revisión de la Lista

Los cambios a esta Lista serán notificados a doctores y dentistas a través de comunicaciones emitidas por la División de Asuntos Clínicos de Triple-S Salud Inc. y/o a través del Pharma News, un boletín para profesionales de la salud que es distribuido seis veces al año, a todos los doctores y dentistas de la red de Triple-S Salud, Inc. Los cambios a la Lista les serán notificados a los asegurados por medio de comunicaciones escritas. La Lista se imprime cada año.

Todas las pautas para las terapias son actuales al momento de imprimirse la edición y están sujetas a cambios. Estas pautas son generales y tal vez no cubran todas las situaciones clínicas. Estas pautas no deben tomarse como remplaza el juicio clínico.

Editor

Sus comentarios y recomendaciones, con el propósito de mejorar y poner al día esta Lista, son bienvenidas. Puede enviar sus comentarios a la siguiente dirección:

Comité de Farmacia y Terapéutica
EDITOR
MC-21 Corporation
Call Box 4908, Caguas, PR 00726

Comentarios

La información contenida en esta Lista no sustituye el conocimiento, la experiencia y el juicio clínico de doctores. **Doctores deben seguir usando su juicio clínico al escoger los medicamentos más adecuados para el cuidado individual de cada paciente.** MC-21 Corporation y Triple-S Salud, Inc. no se hacen responsables por las acciones u omisiones de doctores a base de la información contenida en esta Lista.

Para información más precisa, el doctor debe revisar la literatura provista por el manufacturero del producto en el inserto del producto (PI) o en libros de referencia. **También puede obtener más información llamando al Centro de Información de Medicamentos, un servicio exclusivo para doctores y dentistas de la red de Triple-S Salud, Inc. ofrecido a través de MC-21 Corporation.**

Derechos Reservados

La Lista de medicamentos es una propiedad literaria. MC-21 Corporation y Triple-S Salud, Inc. son los propietarios de los derechos de autor. Esta Lista no podrá copiarse o distribuirse ni cualquier porción de éste sin la autorización escrita de MC-21 Corporation y Triple-S Salud, Inc.

English

Introduction

Your prescription drug benefit uses a Drug List. The List is a guide of drugs chosen by Triple-S Salud's Pharmacy and Therapeutics Committee, which stands for the prescription therapies needed for a high-quality treatment program. Our Committee, formed of doctors, clinical pharmacists and other health experts, meet from time to time to review and decide which drugs should be added in the List. This process is based on the safety, efficacy and cost.

The Drug List has three parts.

The first part is an outline on how the List was designed. It also outlines the utilization analysis edits used to verify dose and find when two or more drugs of the same type are prescribed at the same time. These edits are used through the system of MC-21 Corporation.

The second part has the drugs by drug classes.

The third part has the Appendixes and a list in alphabetical order (Index) of brand and generic drugs in the List.

To know more on how to get your drugs, please see Section 5(f) of your FEHB Program Brochure.

This document has only some drugs covered by Triple-S Salud. If you need support or have questions visit our Website www.ssspr.com or call us at:

Puerto Rico: 787-774-6081 (TTY: 787-792-1370)
USVI: 800-716-6081 (TTY:866-215-1999)

Part I - Drug List Design

Presentation

These examples show the information given for those drugs in the List.

Drug Name	Reference	Level	Instructions
Antigout Agents			
allopurinol oral tablet 100 mg, 300 mg	Zyloprim	1	
colchicine oral tablet 0.6 mg	Colcrys	1	
colchicine-probenecid oral tablet 0.5-500 mg		1	
probenecid oral tablet 500 mg		1	
ULORIC ORAL TABLET 40 MG, 80 MG		3	PA; QL (1 TAB per 1 day)

For all the drugs in the List the drug name, reference name (if applicable), level and any special instructions will appear.

Generic drugs in the List are listed in lowercase **bold** letters (e.g., **allopurinol**). Brand drugs are listed in uppercase letter (e.g., **ULORIC**).

How do I use the Drug List?

The easiest way that you can find your drugs is seeking them in the Index that starts on page 149. The Index gives an alphabetical list of all the drugs. Both brand and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find the coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

How much will I pay for covered drugs?

The drugs in the List are classified by levels, except for those with \$0 copay, if prescribed or supplied by participating providers.

What you pay falls into one of these tiers or levels:

- Level 1 – Generic Drugs
- Level 2 – Preferred Brand Drugs
- Level 3 – Non-Preferred Brand Drugs
- Level 4 – Preferred Specialty or Biotech Drugs
- Level 5 – Non-Preferred Specialty o Biotech Drugs

You must check your Brochure (Section 5(f)) to see how much you will pay for each one of these drugs. You will pay nothing (\$0) for these drugs, if prescribed or supplied by participating providers, as required by Federal Law:

- FDA approved birth control methods and pills (OTC and prescription)¹
- Fluoride (up to 6 years)
- Aspirin (with a limit of 1 tablet / day; over 18 years)
- Iron (up to 12 months)
- Folic acid (females only)
- EVISTA Y NOLVADEX (TO PREVENT BREAST CANCER)
- FDA approved drugs for quitting smoking (covered for 90 days in one try and up to two tries per year).

Your coverage offers you certain over the counter drugs at no cost to you if prescribed or supplied by participating providers.

What are Generic Drugs (Level 1)?

A generic has the same active ingredients in the same amounts as the brand-name drugs. They cost less and are approved by the FDA.

The generic drugs must be dispensed as the first choice always, except for those brand drugs covered in the List for which the generic choices do not exist. If you or your doctor chooses a brand drug instead of the generic version, you will pay the generic drug copay, plus the difference in cost between the brand and the generic drug; even though your doctor has written "Dispense as Written". You have the right to send a medical justification seeking coverage of a brand product with a generic equivalent. If we approve the drug you will pay the Level 3 copay.

When a generic comes in the market, it is added to the List and the brand drug is moved to a higher level, resulting in a change in your cost sharing.

The generic medications from the following therapeutic categories have \$0 copay, if prescribed by participating providers:

- Generic antihypertensives: Angiotensin converting enzyme inhibitors (ACEIs), Angiotensin II receptor blockers (ARBs), Direct renin inhibitor;
- Generic Antidiabetics (excludes insulins);
- Generic statins.

We suggest that you use generic drugs. They are identical in strength and dose, as well as approved by the FDA.

¹ Applies to certain contraceptives of the following categories: cervical cap, copper intrauterine device (IUD), diaphragm, female condom, some oral contraceptives, intrauterine device (IUD) with progestine, oral emergency contraceptives, patch, spermicide, injectable, sponge with spermicide, subdermal implant, vaginal ring.

What are Preferred Brand Drugs (Level 2)?

There are some brand drugs pointed out as preferred agents after an in-depth review in terms of safety, outcomes and cost. You will find these with a Level 2 placed to the right of the name of the drug. In those drug classes where there are no generic drugs, we suggest you use drugs that are designated as preferred as a first choice.

What are Non-Preferred Brand Drugs (Level 3)?

A drug is designated as non-preferred because there are other choices in prior levels that have lesser reactions or are more cost effective. If you get a brand drug from Level 3, you will have to pay more for the drug.

What are Preferred Specialty Drugs (Level 4)?

Specialty Drugs need special handling and storage due to their complex composition. These are used for treating high risk and life-long health problems.

The Level 4 has the drugs or products in the List that are offered under the Drug Program for Special Conditions. The drugs in this tier have generics, biosimilar (generic biologics) and brand at a lower cost and a special handling for supply.

What are Non-Preferred Specialty or Biotech Drugs (Level 5)?

The Level 5 has Non-Preferred Specialty Drugs. The drugs in this level also have a special storage and handling, but have a higher cost sharing when compared to drugs from Level 4. These are used to treat life-long and high-risk health problems.

Specialty Drug Program

We offer you the Specialty Drug Management Program through our Exclusive Pharmacy Network. This program is coordinated through a network of specialized pharmacies committed to ensure that these drugs are dispensed and administered correctly. The pharmacies that participate in the program are CVS Caremark Specialty Pharmacy, Axium Healthcare PR Pharmacy, Special Care Pharmacy Service, SPS Specialty Pharmacy Services, and Walgreens Specialty Pharmacy. These pharmacies are highly recognized throughout the island.

What if my drug is not on the List?

If your drug is not in this List, you should first call our Customer Service Department and ask if your drug is covered. If you learn that your drug is not covered, you can ask about similar drugs that are covered to treat your health problem. Show the list to your doctor and ask him or her to prescribe a drug that is covered.

Can the Drug List change?

Yes. We may add or remove drugs for certain reasons. We might also move a drug from one tier to another. This List is up to date as of October 2017. To get an up to date List, please visit our Website at www.ssspr.com or call us at

Puerto Rico: 787-774-6081 (TTY: 787-792-1370)
USVI: 800-716-6081 (TTY: 866-215-1999)

If the Food and Drug Administration (FDA) determines that a drug on our List is not safe or the drug's manufacturer removes the drug from the market, we will remove the drug right away from our List and issue a notice to members who take the drug.

Reference Guide

Step Therapy Program

In some cases, we require you to first try one drug to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may require your doctor to prescribe Drug A first. If Drug A does not work for you, then we will cover Drug B.

You will need to use Over-The-Counter (OTC) or Generic Drugs before using other drugs to treat your health problem. You must use the OTC as first choice for treating ulcers, reflux, allergies, nasal allergies and eye allergies. You must use generics as a first choice for cholesterol, osteoporosis, nasal allergies, insomnia, high blood pressure, pain management, high blood sugar, depression and hyperactivity drugs.

Appendix I has the list of drugs that have a Step Therapy. The Step Therapy List is subject to changes.

Drugs that Need a Pre-authorization (PA)

Drugs that need an authorization before use are likely to have higher potential for toxicity, inappropriate use or higher cost. Those drugs that need a pre-authorization should fulfill specific clinical criteria as determined by the Committee. These criteria have been developed as stated by current medical literature.

Drugs whose cost goes beyond \$500.00 will need a prior authorization to be dispensed. The pharmacy will send MC-21 Corporation a copy of the prescription via fax at 1-866-387-3487 or 1-866-277-6556 for authorization.

Quantity Limits (QL) on the amount to be dispensed

Certain drugs have a limit on the amount to be dispensed. These amounts are as stated by the manufacturer's indications as to the adequate amount that will not cause adverse effects and which is effective for treating health problems. The area of Instructions in the List points out the limits for those drugs that apply. Quantity limits are effective when they are published in the List and are subject to changes.

Medical Specialty Limits

Some drugs have a limit in the medical specialty; these limits are established based on current medical literature.

Appendix II has the list of drugs that has a medical specialty limit. The Step Therapy List is subject to changes.

Age Limits (AL)

Some drugs have a limit due to age. These limits are effective when they are published in the List and are subject to changes.

Investigational or experimental drugs

Uses of investigational or experimental drugs, or those not approved by the FDA, are not covered by all health plans or prescription drug coverage.

Indications not approved by the FDA, are not covered by all health plans or prescription drug coverage.

Compounded Prescriptions

Compounded prescriptions are covered drugs if they have at least one of the drugs on this List, if they are not for cosmetic purposes.

Edits for Drug Utilization Analysis (DUR)

Through the Pharmacy Program, we have implemented the edits below for drug use review (DUR) to avoid other health problems while offering you a better care.

- Dose check edits confirm for daily maximum doses using as reference the child, adult and aged adult doses as stated by Medi Span. In the most of cases, the maximum dose is the one approved by the FDA.
- Duplicate Therapy edits confirm your drug history for two or more drugs of the same type are prescribed at the same time in two ways:
 1. If you get the same drug (e.g. same active ingredient) with two different prescriptions (e.g. Prescription number is different; but could be through the same pharmacy or different ones).
 2. If you get two drugs of the same drug class, such as: two anti-depressants or two analgesics.

There are exceptions to these edits. To prevent the system from denying the service, we suggest that your doctor includes in the prescription:

- Change in Dose

If the dose increases and you need your drug right away, a letter from the doctor justifying the dose change will be needed. The pharmacy will need a pre-authorization after receipt of the necessary information on that prescription.

- If the dose is determined by your weight, the doctor must write your weight and height in the prescription.
- When the dose of the drug is changed as a result to your blood levels, the doctor must write it in the prescription (e.g.: changes for thyroid, theophylline, anti-convulsiveness, and warfarin).
- When the dose written in the prescription does not exists in the pharmaceutical dose form of the drug. For example, the tablet exists in 25 mg and 50 mg, but you need a 75 mg dose (dose needed and accepted). The pharmacy will need a pre-authorization after the receipt of the necessary information for the prescription (a copy of the prescription will be needed and copy of the pre-authorization form).

Legend - Abbreviations and symbols

Abbreviations and symbols	Description
AL	Drugs for which an age limit exists
Cap	Capsule
Conc	Concentrated
Cr	Cream
ER, SR, CR	Extended release, sustained release, controlled release
Inh	Inhaler
Inj	Injectable
QL	Drugs for which a dispensing limit exists
SL	Drugs for which a limit in the medical specialty exists
Lot	Lotion
Bold	If the drug has a generic available in all its dose forms
TIER 1	Generic drugs
TIER 2	Preferred brand drugs
TIER 3	Non-preferred brand drugs.
TIER 4	Preferred specialty or biotech drugs
TIER 5	Non-preferred specialty or biotech drugs
Oint	Ointment
Oph	Ophthalmic
PA	Pre-authorization. The pharmacy is responsible to get a prior authorization from MC-21 Corporation or Triple S, Inc. before dispensing the drug.
SHA	Shampoo
SI	Sublingual
SNC	Central Nervous System
Soln	Solution
ST	Step Therapy
Supp	Suppository
Susp	Suspension
Tab	Tablet
Td	Transdermal

Policy for the Review and Maintenance of the Drug List

The Pharmacy and Therapeutics Committee meets every month to review new drugs and new information about drugs that are already on the market and in our List. The Committee is formed of Triple-S Salud' participating doctors, dentists, pharmacists and administrators. They review available information concerning safety, effectiveness, current use in therapy and scientific evidence, such as relevant findings of federal government agencies, pharmaceutical manufacturers, medical professional associations, national commissions and peer-reviewed journals. Doctors not working in or having business and financial interests in Triple-S Salud, Inc. or MC-21 Corporation are the only ones with the right to vote. Doctors, pharmacists and other professionals who are Triple-S Salud's and MC-21 Corporation's employees who are part of the Committee do not have the right to vote. They go to Committee meetings as coordinators and health plan administrators. Once the P&T Committee completes its clinical review, we also consider overall value (including cost and manufacturer rebate arrangements) and other factors before adding or removing a drug from the formulary such as:

The Committee sets up the priorities for the review of drugs based on these criteria:

- Analysis of the use of Non-Preferred drugs that are often prescribed. These drugs will be evaluated to add them in other levels.
- Drugs recently approved by the FDA.
- A request made by a participating doctor or dentist in Triple-S Salud' network. (Please see the steps for plan doctors and dentists to ask that we add or remove drugs from the List).

When a drug is added to a drug class, we will review those drugs that could be removed from that class, if any.

Drugs that are Not Included in the Drug List (Non-Formulary) are those that after review, do not offer clinical and economic advantages when compared with other choices. For example; (i) at the time of the review there is no proof in the medical literature that justifies their use. Or, (ii) the drug is used exclusively on an inpatient basis.

Plan doctors and dentists will be notified of the decisions made by the Committee through communications issued by Triple-S Salud's Medical Affairs Division and the Pharma News, which is a bi-monthly newsletter for health care professionals and participating providers in Triple-S Salud's providers' network.

Policy for Requesting Us to Evaluate Drugs to be Added or Removal of Drugs from the List

Any plan doctor and/or dentist can request us to review the drugs to be added or removed from the List with these instructions:

- The doctor or dentist should complete in all parts the form for the review of drugs, known as Drug List Review Request.
- To get the form you should communicate with the Clinical Services Department in MC-21 Corporation by calling **787-286-6032 ext. 3289 or 1-877-741-7470**.
- After completing all parts, you should mail the form to the following address:

MC-21 Corporation
Attn: Clinical Services Department / Drug List Review Request
Call Box 4908, Caguas, PR 00726

MC-21's Clinical Service Department will review the product in the Review Request Form and will send it to the Pharmacy and Therapeutics Committee on the designated date. It is important that all parts of the form are completed because it will become part of the formal documentation that MC-21's Clinical Services Department will prepare for each product.

Policy for the Drug List Reviews

We will issue notices to plan doctors and dentists of the changes to the List and/or through the Pharma News, a bi-monthly newsletter for health care professionals and participating providers in the provider's network. Notices with the changes to the List will be also sent to members. The List is printed each year.

All guidelines for the therapies are updated at the time of printing of this edition and are subject to changes. These guidelines are general and do not have all clinical situations. These guidelines shall not be construed as a substitute for a clinical judgment.

Editor

Your comments and suggestions to this List are welcome. You can send your comments to:

Comité de Farmacia y Terapéutica
EDITOR
MC-21 Corporation
Call Box 4908, Caguas, PR 00726

Comments

The information in this Drug List shall not be a substitute for knowledge, experience and clinical judgment of the doctors. **The doctors shall continue using their clinical judgment in his/her choice of drugs when treating a patient.** MC-21 Corporation and Triple-S Salud, Inc. are not responsible for the actions and omissions of the doctors based on the information in this List.

For detailed information, the doctor must refer to the literature available by the product's manufacturer in the product insert (PI) or in reference books. **Also, more information will be available through the Drug Information Center, an exclusive service offered by MC-21 Corporation to the participating doctors and dentists in Triple-S Salud' Provider Network.**

Reserved Rights

The Drug List is a literary property. MC-21 Corporation and Triple-S Salud, Inc. are the proprietors of the author's rights. Under no circumstances may this material be copied or distributed in whole or any part without the written consent of MC-21 Corporation and Triple-S Salud, Inc.

Parte II – Lista de Medicamentos por Clasificación Terapéutica / Part II – Drugs List by Therapeutic Class

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Analgesics [Analgésicos]			
Nonsteroidal Anti-Inflammatory Drugs [Anti-Inflamatorios No Esteroidales]			
celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg	CeleBREX	1	ST
diclofenac potassium oral tablet 50 mg		1	
diclofenac sodium er oral tablet extended release 24 hour 100 mg		1	
diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg		1	
diclofenac sodium transdermal gel 1 %	Voltaren	1	
diclofenac-misoprostol oral tablet delayed release 50-0.2 mg, 75-0.2 mg	Arthrotec	1	
diflunisal oral tablet 500 mg		1	
etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg		1	
etodolac oral capsule 200 mg, 300 mg		1	
etodolac oral tablet 400 mg	Lodine	1	
etodolac oral tablet 500 mg		1	
FLECTOR TRANSDERMAL PATCH 1.3 %		3	
flurbiprofen oral tablet 100 mg, 50 mg		1	
ibuprofen oral suspension 100 mg/5ml		1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg		1	
INDOCIN ORAL SUSPENSION 25 MG/5ML		3	
INDOCIN RECTAL SUPPOSITORY 50 MG		3	
indomethacin er oral capsule extended release 75 mg		1	
indomethacin oral capsule 25 mg, 50 mg		1	
ketoprofen er oral capsule extended release 24 hour 200 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ketoprofen oral capsule 50 mg, 75 mg		1	
ketorolac tromethamine injection solution 15 mg/ml		1	QL (40 ML per 5 days)
ketorolac tromethamine injection solution 30 mg/ml, 60 mg/2ml		1	QL (20 ML per 5 days)
ketorolac tromethamine intramuscular solution 60 mg/2ml		1	QL (20 ML per 5 days)
ketorolac tromethamine oral tablet 10 mg		1	QL (20 TAB per 5 days)
meclofenamate sodium oral capsule 100 mg, 50 mg		1	
mefenamic acid oral capsule 250 mg	Ponstel	1	
meloxicam oral tablet 15 mg, 7.5 mg	Mobic	1	
nabumetone oral tablet 500 mg, 750 mg		1	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG		3	
naproxen dr oral tablet delayed release 375 mg, 500 mg	EC-Naprosyn	1	
naproxen oral suspension 125 mg/5ml	Naprosyn	1	
naproxen oral tablet 250 mg, 500 mg	Naprosyn	1	
naproxen oral tablet 375 mg		1	
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg	Naprelan	1	
naproxen sodium oral tablet 275 mg		1	
naproxen sodium oral tablet 550 mg	Anaprox DS	1	
oxaprozin oral tablet 600 mg	Daypro	1	
piroxicam oral capsule 10 mg, 20 mg	Feldene	1	
salsalate oral tablet 500 mg, 750 mg		1	
sulindac oral tablet 150 mg, 200 mg		1	
tolmetin sodium oral capsule 400 mg		1	
tolmetin sodium oral tablet 200 mg, 600 mg		1	
Opioid Analgesics, Long-Acting [Analgésicos Opioides, Larga Duración]			
buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcgg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr	Butrans	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	Duragesic	1	ST; QL (10 PATCH per 30 days)
morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	MS Contin	1	QL (2 TAB per 1 day)
oxycodone hcl er oral tablet er 12-hour abuse-deterrent 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	OxyCONTIN	1	QL (2 TAB per 1 day)
tramadol hcl er (biphasic) oral tablet extended release 24 hour 300 mg		1	QL (1 TAB per 1 day)
tramadol hcl er oral tablet extended release 24 hour 100 mg		1	QL (3 TAB per 1 day)
tramadol hcl er oral tablet extended release 24 hour 200 mg		1	QL (1 TAB per 1 day)
tramadol hcl er oral tablet extended release 24 hour 300 mg	Ultram ER	1	QL (1 TAB per 1 day)
Opioid Analgesics, Short-Acting [Analgésicos Opioides, Corta Duración]			
acetaminophen-codeine #2 oral tablet 300-15 mg		1	QL (12 TAB per 1 day)
acetaminophen-codeine #3 oral tablet 300-30 mg	Tylenol with Codeine #3	1	QL (12 TAB per 1 day)
acetaminophen-codeine #4 oral tablet 300-60 mg	Tylenol with Codeine #4	1	QL (6 TAB per 1 day)
acetaminophen-codeine oral solution 120-12 mg/5ml		1	QL (90 ML per 1 day)
butilbital-apap-caff-cod oral capsule 50-300-40-30 mg	Fioricet/Codeine	1	QL (6 CAP per 1 day)
butilbital-apap-caff-cod oral capsule 50-325-40-30 mg		1	QL (6 CAP per 1 day)
butilbital-asa-caff-codeine oral capsule 50-325-40-30 mg	Fiorinal/Codeine #3	1	QL (6 CAP per 1 day)
butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml		1	
butorphanol tartrate nasal solution 10 mg/ml		1	QL (5 ML per 1 day)
CAPITAL/CODEINE ORAL SUSPENSION 120-12 MG/5ML		3	QL (90 ML per 1 day)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
codeine sulfate oral tablet 15 mg		1	QL (24 TAB per 1 day)
codeine sulfate oral tablet 30 mg		1	QL (12 TAB per 1 day)
codeine sulfate oral tablet 60 mg		1	QL (6 TAB per 1 day)
DEMEROL INJECTION SOLUTION 100 MG/2ML, 25 MG/0.5ML		3	
fentanyl citrate (pf) injection solution 100 mcg/2ml, 1000 mcg/20ml, 250 mcg/5ml, 2500 mcg/50ml, 500 mcg/10ml		1	
hydrocodone-acetaminophen oral tablet 10-300 mg	Vicodin HP	1	QL (6 TAB per 1 day)
hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg	Norco	1	QL (6 TAB per 1 day)
hydrocodone-acetaminophen oral tablet 2.5-325 mg	Verdrocet	1	QL (12 TAB per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg	Vicodin	1	QL (8 TAB per 1 day)
hydrocodone-acetaminophen oral tablet 5-325 mg	Lorcet	1	QL (8 TAB per 1 day)
hydrocodone-acetaminophen oral tablet 7.5-300 mg	Vicodin ES	1	QL (6 TAB per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg	Xylon	1	QL (5 TAB per 1 day)
hydrocodone-ibuprofen oral tablet 5-200 mg	Ibudone	1	QL (5 TAB per 1 day)
hydrocodone-ibuprofen oral tablet 7.5-200 mg		1	QL (5 TAB per 1 day)
hydromorphone hcl oral tablet 2 mg	Dilaudid	1	QL (18 TAB per 1 day)
hydromorphone hcl oral tablet 4 mg	Dilaudid	1	QL (6 TAB per 1 day)
hydromorphone hcl oral tablet 8 mg	Dilaudid	1	QL (3 TAB per 1 day)
meperidine hcl injection solution 10 mg/ml		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
meperidine hcl injection solution 100 mg/ml, 25 mg/ml, 50 mg/ml	Demerol	1	
morphine sulfate (concentrate) oral solution 100 mg/5ml		1	QL (6 ML per 1 day)
morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml		1	
morphine sulfate injection solution 2 mg/ml		1	
morphine sulfate oral solution 10 mg/5ml		1	QL (60 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml		1	QL (30 ML per 1 day)
morphine sulfate oral tablet 15 mg		1	QL (4 TAB per 1 day)
morphine sulfate oral tablet 30 mg		1	QL (2 TAB per 1 day)
nalbuphine hcl injection solution 10 mg/ml, 20 mg/ml		1	
OPANA INJECTION SOLUTION 1 MG/ML		3	
oxycodone hcl oral capsule 5 mg		1	QL (18 CAP per 1 day)
oxycodone hcl oral concentrate 100 mg/5ml		1	QL (5 ML per 1 day)
oxycodone hcl oral solution 5 mg/5ml		1	QL (180 ML per 1 day)
oxycodone hcl oral tablet 10 mg, 20 mg		1	QL (6 TAB per 1 day)
oxycodone hcl oral tablet 15 mg, 30 mg	Roxicodone	1	QL (6 TAB per 1 day)
oxycodone hcl oral tablet 5 mg	Roxicodone	1	QL (12 TAB per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	Percocet	1	QL (6 TAB per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg	Percocet	1	QL (12 TAB per 1 day)
oxycodone-acetaminophen oral tablet 5-325 mg	Endocet	1	QL (12 TAB per 1 day)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
oxycodone-acetaminophen oral tablet 7.5-325 mg	Endocet	1	QL (8 TAB per 1 day)
oxymorphone hcl oral tablet 10 mg	Opana	1	QL (3 TAB per 1 day)
tramadol hcl oral tablet 50 mg	Ultram	1	QL (12 TAB per 1 day)
tramadol-acetaminophen oral tablet 37.5-325 mg	Ultracet	1	QL (8 TAB per 1 day)
Others [Otros]			
butalbital-acetaminophen oral tablet 50-325 mg	Tencon	1	
butalbital-apap-caffeine oral capsule 50-300-40 mg	Fioricet	1	
butalbital-apap-caffeine oral capsule 50-325-40 mg	Zebutal	1	
butalbital-apap-caffeine oral tablet 50-325-40 mg	Esgic	1	
butalbital-asa-caffeine oral capsule 50-325-40 mg	Fiorinal	1	
Anesthetics [Anestésicos]			
Local Anesthetics [Anestésico Local]			
ethyl chloride external aerosol		1	
lidocaine external ointment 5 %		1	
lidocaine external patch 5 %	Lidoderm	1	PA
lidocaine hcl (pf) injection solution 0.5 %, 1 %, 2 %	Xylocaine-MPF	1	
lidocaine hcl external cream 3 %	CidalEaze	1	
lidocaine hcl external gel 2 %	Regenecare HA	1	
lidocaine hcl external lotion 3 %		1	
lidocaine hcl external solution 4 %	Xylocaine	1	
lidocaine hcl injection solution 0.5 %, 1 %, 2 %	Xylocaine	1	
lidocaine viscous mouth/throat solution 2 %		1	
lidocaine-prilocaine external cream 2.5-2.5 %		1	
lidocaine-prilocaine external kit 2.5-2.5 %	Priloxx LP	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Anti-Addiction/Substance Abuse Treatment Agents [Tratamiento De Abuso De Sustancias/Contra La Adicción]			
Alcohol Deterrents/Anti-Craving [Disuasivos De Alcohol/Anti-Ansiedad]			
acamprosate calcium oral tablet delayed release 333 mg		1	
disulfiram oral tablet 250 mg, 500 mg	Antabuse	1	
Benzodiazepine Reversal Agents [Antagonista De Benzodiacepinas]			
flumazenil intravenous solution 0.5 mg/5ml, 1 mg/10ml		1	
Opioid Dependence Treatments [Tratamiento Dependiente De Opioide]			
buprenorphine hcl sublingual tablet sublingual 2 mg		1	PA; QL (2 TAB per 1 day)
buprenorphine hcl sublingual tablet sublingual 8 mg		1	PA; QL (8 TAB per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg		1	PA; QL (12 TAB per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg		1	PA; QL (3 TAB per 1 day)
SUBOXONE SUBLINGUAL FILM 12-3 MG		3	PA; QL (2 FILM per 1 day)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG		3	PA; QL (12 FILM per 1 day)
SUBOXONE SUBLINGUAL FILM 4-1 MG		3	PA; QL (6 FILM per 1 day)
SUBOXONE SUBLINGUAL FILM 8-2 MG		3	PA; QL (3 FILM per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG		3	PA; QL (24 TAB per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG		3	PA; QL (12 TAB per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 11.4-2.9 MG		3	PA; QL (1 TAB per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 2.9-0.71 MG		3	PA; QL (5 TAB per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 5.7-1.4 MG		3	PA; QL (3 TAB per 1 day)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 8.6-2.1 MG		3	PA; QL (2 TAB per 1 day)
Opioid Reversal Agents [Antagonista De Opioides]			
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml		1	
naloxone hcl injection solution cartridge 0.4 mg/ml		1	
naloxone hcl injection solution prefilled syringe 2 mg/2ml		1	
naltrexone hcl oral tablet 50 mg		1	
Antibacterials [Antibacterianos]			
Aminoglycosides [Aminoglicósidos]			
amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml		1	
gentamicin sulfate injection solution 10 mg/ml, 40 mg/ml		1	
gentamicin sulfate intravenous solution 10 mg/ml		1	
neomycin sulfate oral tablet 500 mg		1	
paromomycin sulfate oral capsule 250 mg		1	
streptomycin sulfate intramuscular solution reconstituted 1 gm		1	
tobramycin sulfate injection solution 1.2 gm/30ml, 10 mg/ml, 2 gm/50ml, 80 mg/2ml		1	
tobramycin sulfate injection solution reconstituted 1.2 gm		1	
Antibacterials, Other [Antibacterianos, Otros]			
bacitracin intramuscular solution reconstituted 50000 unit		1	
CLEOCIN PHOSPHATE INTRAVENOUS SOLUTION 600 MG/4ML		3	
CLEOCIN VAGINAL SUPPOSITORY 100 MG		3	
clindamycin hcl oral capsule 150 mg, 300 mg	Cleocin	1	
clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml	Cleocin	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml, 900 mg/6ml, 9000 mg/60ml	Cleocin Phosphate	1	
clindamycin phosphate intravenous solution 150 mg/ml, 900 mg/6ml	Cleocin Phosphate	1	
clindamycin phosphate vaginal cream 2 %	Cleocin	1	
colistimethate sodium injection solution reconstituted 150 mg	Coly-Mycin M	1	
lincomycin hcl injection solution 300 mg/ml	Lincocin	1	
linezolid intravenous solution 600 mg/300ml	Zyvox	1	PA
linezolid oral suspension reconstituted 100 mg/5ml	Zyvox	1	PA
linezolid oral tablet 600 mg	Zyvox	1	PA
methenamine hippurate oral tablet 1 gm	Hiprex	1	
metronidazole oral tablet 250 mg, 500 mg	Flagyl	1	
metronidazole vaginal gel 0.75 %	Vandazole	1	
MONUROL ORAL PACKET 3 GM		3	
nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg	Macrodantin	1	
nitrofurantoin monohyd macro oral capsule 100 mg	Macrobid	1	
nitrofurantoin oral suspension 25 mg/5ml	Furadantin	1	
phosphasal oral tablet 81.6 mg		1	
SIVEXTRO ORAL TABLET 200 MG		3	PA
SULFAMYLYON EXTERNAL CREAM 85 MG/GM		3	
SULFAMYLYON EXTERNAL PACKET 5 %		3	
trimethoprim oral tablet 100 mg		1	
uretron d/s oral tablet		1	
uro-mp oral capsule 118 mg	Uribel	1	
vancomycin hcl intravenous solution reconstituted 1000 mg, 500 mg, 750 mg		1	
vancomycin hcl oral capsule 125 mg, 250 mg	Vancocin HCl	1	
ZYVOX INTRAVENOUS SOLUTION 200 MG/100ML		3	PA
Beta-Lactam, Cephalosporins [Cefalosporinas, Beta-Lactámicas]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
cefaclor er oral tablet extended release 12 hour 500 mg		1	
cefaclor oral capsule 250 mg, 500 mg		1	
cefadroxil oral capsule 500 mg		1	
cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml		1	
cefadroxil oral tablet 1 gm		1	
cefazolin sodium injection solution reconstituted 1 gm, 500 mg		1	
cefazolin sodium intravenous solution reconstituted 1 gm		1	
cefdinir oral capsule 300 mg		1	
cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml		1	
cefditoren pivoxil oral tablet 200 mg		1	
cefditoren pivoxil oral tablet 400 mg	Spectracef	1	
cefepime hcl injection solution reconstituted 1 gm, 2 gm	Maxipime	1	
cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml		1	
cefpodoxime proxetil oral tablet 100 mg, 200 mg		1	
cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml		1	
cefprozil oral tablet 250 mg, 500 mg		1	
ceftazidime injection solution reconstituted 1 gm, 2 gm	Fortaz	1	
ceftibuten oral capsule 400 mg	Cedax	1	
ceftibuten oral suspension reconstituted 180 mg/5ml	Cedax	1	
CEFTIN ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 250 MG/5ML		3	
ceftriaxone sodium injection solution reconstituted 1 gm	Rocephin	1	
ceftriaxone sodium injection solution reconstituted 2 gm, 250 mg, 500 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ceftriaxone sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm		1	
cefuroxime axetil oral tablet 250 mg, 500 mg	Ceftin	1	
cefuroxime sodium injection solution reconstituted 1.5 gm, 750 mg	Zinacef	1	
cephalexin oral capsule 250 mg, 500 mg, 750 mg	Keflex	1	
cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml		1	
cephalexin oral tablet 250 mg, 500 mg		1	
FORTAZ INJECTION SOLUTION RECONSTITUTED 500 MG		3	
ZINACEF INTRAVENOUS SOLUTION RECONSTITUTED 750 MG		3	
Beta-Lactam, Other [Beta-Lactámicos, Otros]			
imipenem-cilastatin intravenous solution reconstituted 250 mg, 500 mg	Primaxin IV	1	
INVANZ INJECTION SOLUTION RECONSTITUTED 1 GM		3	
Beta-Lactam, Penicillins [Penicilinas, Beta-Lactámicas]			
amoxicillin oral capsule 250 mg, 500 mg		1	
amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml		1	
amoxicillin oral tablet 500 mg, 875 mg		1	
amoxicillin oral tablet chewable 125 mg, 250 mg		1	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour 1000-62.5 mg	Augmentin XR	1	
amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 400-57 mg/5ml		1	
amoxicillin-pot clavulanate oral suspension reconstituted 250-62.5 mg/5ml	Augmentin	1	
amoxicillin-pot clavulanate oral suspension reconstituted 600-42.9 mg/5ml	Augmentin ES-600	1	
amoxicillin-pot clavulanate oral tablet 250-125 mg		1	
amoxicillin-pot clavulanate oral tablet 500-125 mg, 875-125 mg	Augmentin	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg		1	
ampicillin oral capsule 250 mg, 500 mg		1	
ampicillin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml		1	
ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 2 gm, 250 mg, 500 mg		1	
ampicillin sodium intravenous solution reconstituted 1 gm, 2 gm		1	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML		3	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION 900000-300000 UNIT/2ML		3	
BICILLIN C-R INTRAMUSCULAR SUSPENSION 1200000 UNIT/2ML		3	
BICILLIN L-A INTRAMUSCULAR SUSPENSION 1200000 UNIT/2ML, 2400000 UNIT/4ML, 600000 UNIT/ML		3	
dicloxacillin sodium oral capsule 250 mg, 500 mg		1	
nafcillin sodium injection solution reconstituted 1 gm, 10 gm, 2 gm		1	
nafcillin sodium intravenous solution reconstituted 1 gm, 2 gm		1	
oxacillin sodium injection solution reconstituted 1 gm, 2 gm		1	
penicillin g procaine intramuscular suspension 600000 unit/ml		1	
penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml		1	
penicillin v potassium oral tablet 250 mg, 500 mg		1	
piperacillin sod-tazobactam so intravenous solution reconstituted 2.25 (2-0.25) gm, 3.375 (3- 0.375) gm, 4.5 (4-0.5) gm	Zosyn	1	
Macrolides [Macrólidos]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	Zithromax	1	
azithromycin oral tablet 250 mg	Zithromax Z-Pak	1	
azithromycin oral tablet 500 mg, 600 mg	Zithromax	1	
clarithromycin er oral tablet extended release 24 hour 500 mg	Biaxin XL Pac	1	
clarithromycin oral suspension reconstituted 125 mg/5ml		1	
clarithromycin oral suspension reconstituted 250 mg/5ml	Biaxin	1	
clarithromycin oral tablet 250 mg, 500 mg	Biaxin	1	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED 400 MG/5ML		3	
ERY-TAB ORAL TABLET DELAYED RELEASE 250 MG, 333 MG, 500 MG		3	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG		3	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	Erythromycin Stearate	3	
erythromycin base oral capsule delayed release particles 250 mg		1	
erythromycin base oral tablet 250 mg, 500 mg		1	
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	EryPed 200	1	
erythromycin ethylsuccinate oral tablet 400 mg	E.E.S. 400	1	
PCE ORAL TABLET DELAYED RELEASE 333 MG, 500 MG		3	
ZMAX ORAL SUSPENSION RECONSTITUTED 2 GM		3	
Quinolones [Quinolonas]			
ciprofloxacin hcl oral tablet 250 mg, 500 mg	Cipro	1	
ciprofloxacin hcl oral tablet 750 mg		1	
ciprofloxacin intravenous solution 200 mg/20ml, 400 mg/40ml		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ciprofloxacin oral suspension reconstituted 250 mg/5ml (5%), 500 mg/5ml (10%)	Cipro	1	
ciprofloxacin-ciproflox hcl er oral tablet extended release 24 hour 1000 mg	Cipro XR	1	QL (14 TAB per 30 days)
ciprofloxacin-ciproflox hcl er oral tablet extended release 24 hour 500 mg	Cipro XR	1	QL (3 TAB per 30 days)
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	Levaquin	1	
moxifloxacin hcl oral tablet 400 mg	Avelox	1	
Sulfonamides [Sulfonamidas]			
sulfadiazine oral tablet 500 mg		1	
sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5ml		1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	Sulfatrim Pediatric	1	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg	Bactrim	1	
sulfamethoxazole-trimethoprim oral tablet 800-160 mg	Bactrim DS	1	
Tetracyclines [Tetraciclinas]			
doxycycline hyclate intravenous solution reconstituted 100 mg	Doxy 100	1	
doxycycline hyclate oral capsule 100 mg	Vibramycin	1	
doxycycline hyclate oral capsule 50 mg	Morgidox	1	
doxycycline hyclate oral tablet 100 mg, 20 mg		1	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 75 mg		1	
doxycycline monohydrate oral capsule 100 mg, 75 mg	Monodox	1	
doxycycline monohydrate oral capsule 50 mg	Mondoxyne NL	1	
doxycycline monohydrate oral suspension reconstituted 25 mg/5ml	Vibramycin	1	
doxycycline oral capsule delayed release 40 mg	Oracea	1	
minocycline hcl er oral tablet extended release 24 hour 90 mg		1	
minocycline hcl oral capsule 100 mg, 50 mg	Minocin	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
minocycline hcl oral capsule 75 mg		1	
minocycline hcl oral tablet 100 mg, 50 mg, 75 mg		1	
tetracycline hcl oral capsule 250 mg, 500 mg		1	
VIBRAMYCIN ORAL SYRUP 50 MG/5ML		3	
Anticonvulsants [Anticonvulsivantes]			
Anticonvulsants, Other [Anticonvulsivantes, Otros]			
levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg	Keppra XR	1	ST
levetiracetam intravenous solution 500 mg/5ml	Keppra	1	
levetiracetam oral solution 100 mg/ml	Keppra	1	
levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg	Keppra	1	
Calcium Channel Modifying Agents [Modificadores De Canales De Calcio]			
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG		3	ST
LYRICA ORAL SOLUTION 20 MG/ML		3	ST
Gamma-Aminobutyric Acid (GABA) Augmenting Agents [Agentes Amplificadores Del Acido Gama-Aminobutirato]			
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	KlonopIN	1	
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg		1	
diazepam rectal gel 10 mg, 20 mg	Diastat AcuDial	1	
diazepam rectal gel 2.5 mg	Diastat Pediatric	1	
divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg	Depakote ER	1	
divalproex sodium oral capsule delayed release sprinkle 125 mg	Depakote Sprinkles	1	
divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg	Depakote	1	
gabapentin oral capsule 100 mg, 300 mg, 400 mg	Neurontin	1	
gabapentin oral solution 300 mg/6ml	Neurontin	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
gabapentin oral tablet 600 mg, 800 mg	Neurontin	1	
phenobarbital oral solution 20 mg/5ml		1	
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg		1	
primidone oral tablet 250 mg, 50 mg	Mysoline	1	
SABRIL ORAL TABLET 500 MG		5	PA
valproate sodium oral solution 250 mg/5ml	Depakene	1	
valproic acid oral capsule 250 mg	Depakene	1	
vigabatrin oral packet 500 mg	Sabril	5	PA
Glutamate Reducing Agents [Reductores De Glutamato]			
lamotrigine er oral tablet extended release 24 hour 200 mg, 300 mg, 50 mg	LaMICtal XR	1	
lamotrigine oral kit 25 & 50 & 100 mg, 25 (21)-50 (7) mg, 50 (42)-100(14) mg	LaMICtal ODT	1	
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	LaMICtal	1	
lamotrigine oral tablet chewable 25 mg, 5 mg	LaMICtal	1	
lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg	LaMICtal ODT	1	
topiramate oral capsule sprinkle 15 mg, 25 mg	Topamax Sprinkle	1	
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	Topamax	1	
Sodium Channel Agents [Canales De Sodio]			
carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg	Carbatrol	1	
carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg	TEGretol-XR	1	
carbamazepine oral suspension 100 mg/5ml	TEGretol	1	
carbamazepine oral tablet 200 mg	Epitol	1	
carbamazepine oral tablet chewable 100 mg		1	
DILANTIN ORAL CAPSULE 30 MG		3	
oxcarbazepine oral suspension 300 mg/5ml	Trileptal	1	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	Trileptal	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
phenytoin oral suspension 125 mg/5ml	Dilantin	1	
phenytoin oral tablet chewable 50 mg	Dilantin Infatabs	1	
phenytoin sodium extended oral capsule 100 mg	Dilantin	1	
phenytoin sodium extended oral capsule 200 mg, 300 mg	Phentyek	1	
phenytoin sodium injection solution 50 mg/ml		1	
VIMPAT ORAL SOLUTION 10 MG/ML		3	AL (greater than or equal to 17 years)
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG		3	AL (greater than or equal to 17 years)
Antidementia Agents [Antidemencia]			
Antidementia Agents, Other [Antidemencia, Otros]			
ergoloid mesylates oral tablet 1 mg		1	
Cholinesterase Inhibitors [Inhibidores De Colinesterasa]			
donepezil hcl oral tablet 10 mg, 23 mg, 5 mg	Aricept	1	
donepezil hcl oral tablet dispersible 10 mg, 5 mg		1	
galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg	Razadyne ER	1	
galantamine hydrobromide oral solution 4 mg/ml		1	
galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg	Razadyne	1	
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg		1	
rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr	Exelon	1	QL (1 PATCH per 1 day)
Combinations, Other [Combinación, Otros]			
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK 7 & 14 & 21 &28 -10 MG		2	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG		2	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
N-Methyl-D-Aspartate (NMDA) Receptor Antagonist [Antagonista Del Receptor NMDA]			
memantine hcl oral solution 2 mg/ml		1	
memantine hcl oral tablet 10 mg, 5 mg	Namenda	1	
memantine hcl oral tablet 5 (28)-10 (21) mg	Namenda Titration Pak	1	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG, 7 MG		2	ST
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR 7 & 14 & 21 &28 MG		2	ST
Antidepressants [Antidepresivos]			
Antidepressants, Other [Antidepresivos, Otros]			
bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg	Wellbutrin SR	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	Wellbutrin XL	1	
bupropion hcl oral tablet 100 mg, 75 mg		1	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg	Remeron	1	
mirtazapine oral tablet 7.5 mg		1	
mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg	Remeron SolTab	1	
Monoamine Oxidase B (MAO-B) Inhibitors [Inhibidores De Monoamina Oxidasa B]			
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR		3	PA
MARPLAN ORAL TABLET 10 MG		3	
phenelzine sulfate oral tablet 15 mg	Nardil	1	
tranylcypromine sulfate oral tablet 10 mg	Parnate	1	
SSRIS/SNRIS (Selective Serotonin Reuptake Inhibitors/Serotonin And Norepinephrine Reuptake Inhibitors) [Inhibidores De La Recaptación De Serotonina/ Norepinefrina (SSRIS/SNRIS)]			
citalopram hydrobromide oral solution 10 mg/5ml		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg	CeleXA	1	
desvenlafaxine er oral tablet extended release 24 hour 100 mg, 50 mg	Khedezla	1	ST
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	Pristiq	1	ST
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	Cymbalta	1	
escitalopram oxalate oral solution 5 mg/5ml		1	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	Lexapro	1	
fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg	PROzac	1	
fluoxetine hcl oral capsule delayed release 90 mg		1	ST
fluoxetine hcl oral solution 20 mg/5ml		1	
fluoxetine hcl oral tablet 10 mg, 20 mg		1	
fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg		1	
maprotiline hcl oral tablet 25 mg, 50 mg, 75 mg		1	
nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg		1	
paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg	Paxil CR	1	
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	Paxil	1	
PAXIL ORAL SUSPENSION 10 MG/5ML		3	
sertraline hcl oral concentrate 20 mg/ml	Zoloft	1	
sertraline hcl oral tablet 100 mg, 25 mg, 50 mg	Zoloft	1	
trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg		1	
venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg	Effexor XR	1	
venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 37.5 mg, 75 mg		1	
venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Tricyclics [Tricíclicos]			
amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 50 mg, 75 mg		1	
amitriptyline hcl oral tablet 25 mg	Elavil	1	
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg		1	
clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg	Anafranil	1	
desipramine hcl oral tablet 10 mg, 25 mg	Norpramin	1	
desipramine hcl oral tablet 100 mg, 150 mg, 50 mg, 75 mg		1	
doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg		1	
doxepin hcl oral concentrate 10 mg/ml		1	
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	Tofranil	1	
imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg		1	
nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg	Pamelor	1	
nortriptyline hcl oral solution 10 mg/5ml		1	
protriptyline hcl oral tablet 10 mg, 5 mg		1	
Antiemetics [Antieméticos]			
Antiemetics, Other [Antieméticos, Otros]			
diphenhydramine hcl injection solution 50 mg/ml		1	
meclizine hcl oral tablet 12.5 mg		1	
meclizine hcl oral tablet 25 mg	Dramamine	1	
metoclopramide hcl oral solution 5 mg/5ml		1	
metoclopramide hcl oral tablet 10 mg, 5 mg	Reglan	1	
promethazine hcl injection solution 25 mg/ml, 50 mg/ml	Phenergan	1	
promethazine hcl oral solution 6.25 mg/5ml		1	
promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg		1	
promethazine hcl rectal suppository 12.5 mg	Phenadoz	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
promethazine hcl rectal suppository 25 mg	Promethegan	1	
promethazine hcl rectal suppository 50 mg	Phenergan	1	
TIGAN INTRAMUSCULAR SOLUTION 100 MG/ML		3	
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS	Scopolamine	3	
trimethobenzamide hcl oral capsule 300 mg	Tigan	1	
Emetogenic Therapy Adjuncts [Adjuvantes Para Terapia Emetogénica]			
AKYNZEO ORAL CAPSULE 300-0.5 MG		3	PA; QL (1 CAP per 7 days)
ANZEMET ORAL TABLET 100 MG, 50 MG		3	
aprepitant oral capsule 125 mg	Emend	1	PA; QL (1 CAP per 7 days)
aprepitant oral capsule 80 & 125 mg	Emend Tri-Pack	1	PA; QL (3 PACK per 7 days)
aprepitant oral capsule 80 mg	Emend	1	PA; QL (2 CAP per 7 days)
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	Marinol	1	
granisetron hcl oral tablet 1 mg		1	
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml		4	
ondansetron hcl oral solution 4 mg/5ml	Zofran	1	
ondansetron hcl oral tablet 4 mg, 8 mg	Zofran	1	
ondansetron oral tablet dispersible 4 mg, 8 mg	Zofran ODT	1	
Antifungals [Antifungales]			
Antifungals [Antifungales]			
BIO-STATIN ORAL CAPSULE 500000 UNIT		3	
bio-statin oral powder		1	
caspofungin acetate intravenous solution reconstituted 50 mg, 70 mg	Cancidas	5	
clotrimazole mouth/throat lozenge 10 mg		1	
CRESEMBA ORAL CAPSULE 186 MG		3	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG		5	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml	Diflucan	1	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	Diflucan	1	
flucytosine oral capsule 250 mg, 500 mg	Ancobon	1	
griseofulvin microsize oral suspension 125 mg/5ml		1	
griseofulvin microsize oral tablet 500 mg		1	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	Gris-PEG	1	
itraconazole oral capsule 100 mg	Sporanox	1	
ketoconazole oral tablet 200 mg		1	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG		5	
NOXAFIL ORAL SUSPENSION 40 MG/ML		3	
NOXAFIL ORAL TABLET DELAYED RELEASE 100 MG		3	
nystatin mouth/throat suspension 100000 unit/ml		1	
nystatin oral tablet 500000 unit		1	
SPORANOX ORAL SOLUTION 10 MG/ML		3	
terbinafine hcl oral tablet 250 mg	LamISIL	1	QL (84 TAB per 365 days)
terconazole vaginal cream 0.4 %	Terazol 7	1	
terconazole vaginal cream 0.8 %		1	
terconazole vaginal suppository 80 mg		1	
voriconazole intravenous solution reconstituted 200 mg	Vfend IV	4	
voriconazole oral suspension reconstituted 40 mg/ml	Vfend	1	
voriconazole oral tablet 200 mg, 50 mg	Vfend	1	
Antigout Agents [Antigota]			
Antigout Agents [Antigota]			
allopurinol oral tablet 100 mg, 300 mg	Zyloprim	1	
colchicine oral tablet 0.6 mg	Colcrys	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
colchicine-probenecid oral tablet 0.5-500 mg		1	
probenecid oral tablet 500 mg		1	
ULORIC ORAL TABLET 40 MG, 80 MG		3	PA; QL (1 TAB per 1 day)
Anti-Inflammatory Agents [Anti-Inflamatorios]			
Glucocorticoids [Glucocorticoides]			
betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml	Celestone Soluspan	1	
cortisone acetate oral tablet 25 mg		1	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML		3	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML		3	
dexamethasone oral elixir 0.5 mg/5ml		1	
dexamethasone oral solution 0.5 mg/5ml		1	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg		1	
dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml		1	
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	Cortef	1	
KENALOG INJECTION SUSPENSION 10 MG/ML, 40 MG/ML		3	
MEDROL ORAL TABLET 2 MG		3	
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	Depo-Medrol	1	
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	Medrol	1	
methylprednisolone oral tablet therapy pack 4 mg	Medrol	1	
methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mcg, 40 mg	Solu-MEDROL	1	
MILLIPRED ORAL TABLET 5 MG		3	
prednisolone oral syrup 15 mg/5ml		1	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
prednisolone sodium phosphate oral solution 6.7 (5 base) mg/5ml	Pediapred	1	
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML		3	
prednisone oral solution 5 mg/5ml		1	
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg, 50 mg		1	
prednisone oral tablet 20 mg	Deltasone	1	
prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)		1	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG		3	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 2 GM, 500 MG		3	
Antimigraine Agents [Antimigraña]			
Antimigraine Agents, Other [Antimigraña, Otros]			
CAMBIA ORAL PACKET 50 MG		3	QL (9 PACKET per 30 days)
isometheptene-dichloral-apap oral capsule 65-100-325 mg	Nodolor	1	
Ergot Alkaloids [Alcaloides De Ergotamina]			
dihydroergotamine mesylate nasal solution 4 mg/ml	Migranal	1	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL 2 MG		3	
ergotamine-caffeine oral tablet 1-100 mg	Cafergot	1	
MIGERGOT RECTAL SUPPOSITORY 2-100 MG		3	
Serotonin (5-HT) 1B/1D Receptor Agonists [Agonistas Del Receptor De Serotonina]			
almotriptan malate oral tablet 12.5 mg, 6.25 mg	Axert	1	QL (6 TAB per 30 days)
eletriptan hydrobromide oral tablet 20 mg, 40 mg	Relpax	1	ST; QL (6 TAB per 30 days)
frovatriptan succinate oral tablet 2.5 mg	Frova	1	QL (9 TAB per 30 days)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
naratriptan hcl oral tablet 1 mg, 2.5 mg	Amerge	1	QL (9 TAB per 30 days)
rizatriptan benzoate oral tablet 10 mg	Maxalt	1	QL (12 TAB per 30 days)
rizatriptan benzoate oral tablet 5 mg	Maxalt	1	QL (24 TAB per 30 days)
rizatriptan benzoate oral tablet dispersible 10 mg	Maxalt-MLT	1	QL (12 TAB per 30 days)
rizatriptan benzoate oral tablet dispersible 5 mg	Maxalt-MLT	1	QL (24 TAB per 30 days)
sumatriptan nasal solution 20 mg/act, 5 mg/act	Imitrex	1	QL (6 EA per 30 days)
sumatriptan succinate oral tablet 100 mg	Imitrex	1	QL (9 TAB per 30 days)
sumatriptan succinate oral tablet 25 mg, 50 mg	Imitrex	1	QL (18 TAB per 30 days)
sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	Imitrex STATdose Refill	1	QL (5 ML per 30 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	Imitrex	1	QL (5 ML per 30 days)
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	Imitrex STATdose System	1	QL (5 ML per 30 days)
sumatriptan succinate subcutaneous solution prefilled syringe 6 mg/0.5ml		1	QL (5 ML per 30 days)
TREXIMET ORAL TABLET 85-500 MG		3	QL (10 TAB per 30 days)
zolmitriptan oral tablet 2.5 mg, 5 mg	Zomig	1	QL (6 TAB per 30 days)
zolmitriptan oral tablet dispersible 2.5 mg, 5 mg	Zomig ZMT	1	QL (6 TAB per 30 days)
ZOMIG NASAL SOLUTION 5 MG		3	QL (6 EA per 30 days)
Antimyasthenic Agents [Antimiasténicos]			
Parasympathomimetics [Parasimpatomiméticos]			
guanidine hcl oral tablet 125 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
MESTINON ORAL SYRUP 60 MG/5ML		3	
pyridostigmine bromide er oral tablet extended release 180 mg	Mestinon	1	
pyridostigmine bromide oral tablet 60 mg	Mestinon	1	
Antimycobacterials [Antimicobacterianos]			
Antimycobacterials, Other [Antimicobacterianos, Otros]			
dapsone oral tablet 100 mg, 25 mg		1	
rifabutin oral capsule 150 mg	Mycobutin	1	
Antituberculars [Antituberculosos]			
CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED 1 GM		3	
cycloserine oral capsule 250 mg	Seromycin	1	
ethambutol hcl oral tablet 100 mg, 400 mg	Myambutol	1	
isoniazid oral syrup 50 mg/5ml		1	
isoniazid oral tablet 100 mg, 300 mg		1	
PASER ORAL PACKET 4 GM		3	
PRIFTIN ORAL TABLET 150 MG		3	
pyrazinamide oral tablet 500 mg		1	
RIFAMATE ORAL CAPSULE 150-300 MG		3	
rifampin intravenous solution reconstituted 600 mg	Rifadin	1	
rifampin oral capsule 150 mg, 300 mg	Rifadin	1	
RIFATER ORAL TABLET 50-120-300 MG		3	
SIRTURO ORAL TABLET 100 MG		5	PA
TRECATOR ORAL TABLET 250 MG		3	
Antineoplastics [Antineoplásicos]			
Alkylating Agents [Agentes Alquilantes]			
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG, 5 MG		4	
HEXALEN ORAL CAPSULE 50 MG		5	
LEUKERAN ORAL TABLET 2 MG		5	
MATULANE ORAL CAPSULE 50 MG		5	
melphalan oral tablet 2 mg	Alkeran	5	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Antiandrogens [Antiandrogenos]			
bicalutamide oral tablet 50 mg	Casodex	1	
flutamide oral capsule 125 mg		1	
nilutamide oral tablet 150 mg	Nilandron	5	PA
XTANDI ORAL CAPSULE 40 MG		5	PA
ZYTIGA ORAL TABLET 250 MG, 500 MG		5	PA
Antiangiogenic Agents [Antiangiogénicos]			
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG		5	PA
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG		5	PA
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG		5	PA
Antiestrogens/Modifiers [Antiestrógenos/Modificadores]			
EMCYT ORAL CAPSULE 140 MG		3	
FARESTON ORAL TABLET 60 MG		3	
tamoxifen citrate oral tablet 10 mg, 20 mg		1	PA
Antimetabolites [Antimetabolitos]			
capecitabine oral tablet 150 mg, 500 mg	Xeloda	4	PA
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG		3	
fluorouracil intravenous solution 1 gm/20ml		4	PA
fluorouracil intravenous solution 500 mg/10ml	Adrucil	4	PA
hydroxyurea oral capsule 500 mg	Hydrea	1	
mercaptopurine oral tablet 50 mg		1	
Antineoplastics, Others [Antineoplásicos, Otros]			
bleomycin sulfate injection solution reconstituted 15 unit		4	PA
dacarbazine intravenous solution reconstituted 200 mg		4	PA
docetaxel intravenous concentrate 20 mg/ml, 80 mg/4ml	Taxotere	4	PA
doxorubicin hcl intravenous solution 2 mg/ml	Adriamycin	4	PA
ERIVEDGE ORAL CAPSULE 150 MG		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg		1	
levoleucovorin calcium intravenous solution 175 mg/17.5ml		4	
levoleucovorin calcium pf intravenous solution 250 mg/25ml		4	
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG		5	PA
MESNEX ORAL TABLET 400 MG		5	
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG		5	PA
oxaliplatin intravenous solution reconstituted 100 mg, 50 mg		4	PA
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG		5	PA
TABLOID ORAL TABLET 40 MG		5	
temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg	Temodar	4	PA
vinblastine sulfate intravenous solution 1 mg/ml		4	PA
ZOLINZA ORAL CAPSULE 100 MG		5	PA
Aromatase Inhibitors, 3rd Generation [Inhibidores de Aromatasa, 3ra Generación]			
anastrozole oral tablet 1 mg	Arimidex	1	
exemestane oral tablet 25 mg	Aromasin	1	
letrozole oral tablet 2.5 mg	Femara	1	
Enzyme Inhibitors [Inhibidores Enzimáticos]			
etoposide oral capsule 50 mg		4	
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG		5	PA
ZYDELIG ORAL TABLET 100 MG, 150 MG		5	PA
Molecular Target Inhibitors [Inhibidores Del Blanco Molecular]			
AFINITOR DISPERZ ORAL TABLET SOLUBLE 2 MG, 3 MG, 5 MG		5	PA
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG		5	PA
ALECENSA ORAL CAPSULE 150 MG		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
BOSULIF ORAL TABLET 100 MG, 500 MG		5	PA
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG		5	PA
CAPRELSA ORAL TABLET 100 MG, 300 MG		5	PA
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 1 X 80 & 1 X 20 MG		5	PA
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 1 X 80 & 3 X 20 MG		5	PA
COMETRIQ (60 MG DAILY DOSE) ORAL KIT 20 MG		5	PA
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG		5	PA
ICLUSIG ORAL TABLET 15 MG, 45 MG		5	PA
imatinib mesylate oral tablet 100 mg, 400 mg	Gleevec	5	PA
IMBRUVICA ORAL CAPSULE 140 MG		5	PA
INLYTA ORAL TABLET 1 MG, 5 MG		5	PA
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG		5	PA
LYNPARZA ORAL CAPSULE 50 MG		5	PA
LYNPARZA ORAL TABLET 100 MG, 150 MG		5	PA
MEKINIST ORAL TABLET 0.5 MG, 2 MG		5	PA
NEXAVAR ORAL TABLET 200 MG		5	PA
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG		4	PA
STIVARGA ORAL TABLET 40 MG		5	PA
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG		4	PA
TAFINLAR ORAL CAPSULE 50 MG, 75 MG		5	PA
TARCEVA ORAL TABLET 100 MG, 150 MG, 25 MG		4	PA
TASIGNA ORAL CAPSULE 150 MG, 200 MG		4	PA
TYKERB ORAL TABLET 250 MG		5	PA
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG		5	PA
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
VOTRIENT ORAL TABLET 200 MG		5	PA
XALKORI ORAL CAPSULE 200 MG, 250 MG		5	PA
ZELBORAFL ORAL TABLET 240 MG		5	PA
Monoclonal Antibodies [Anticuerpos Monoclonales]			
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 440 MG		5	PA
PERJETA INTRAVENOUS SOLUTION 420 MG/14ML		5	PA
RITUXAN INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML		5	PA
Retinoids [Retinoides]			
bexarotene oral capsule 75 mg	Targretin	4	
PANRETIN EXTERNAL GEL 0.1 %		5	
TARGRETIN EXTERNAL GEL 1 %		5	
tretinoin oral capsule 10 mg		4	
Antiparasitics [Antiparasitarios]			
Anthelmintics [Antihelmínticos]			
ALBENZA ORAL TABLET 200 MG		3	
BILTRICIDE ORAL TABLET 600 MG		3	
EMVERM ORAL TABLET CHEWABLE 100 MG		3	QL (18 TAB per 365 days)
ivermectin oral tablet 3 mg	Stromectol	1	
Antiprotozoals [Antiprotozoarios]			
ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML		3	QL (60 ML per 30 days)
ALINIA ORAL TABLET 500 MG		3	QL (6 TAB per 30 days)
atovaquone oral suspension 750 mg/5ml	Mepron	1	
atovaquone-proguanil hcl oral tablet 250-100 mg	Malarone	1	QL (12 TAB per 365 days)
atovaquone-proguanil hcl oral tablet 62.5-25 mg	Malarone	1	QL (48 TAB per 365 days)
chloroquine phosphate oral tablet 250 mg, 500 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
COARTEM ORAL TABLET 20-120 MG		3	QL (24 TAB per 365 days)
DARAPRIM ORAL TABLET 25 MG		5	PA
hydroxychloroquine sulfate oral tablet 200 mg	Plaquenil	1	
mefloquine hcl oral tablet 250 mg		1	
NEBUPENT INHALATION SOLUTION RECONSTITUTED 300 MG		3	
PENTAM INJECTION SOLUTION RECONSTITUTED 300 MG		3	
primaquine phosphate oral tablet 26.3 mg		1	
quinine sulfate oral capsule 324 mg	Qualaquin	1	QL (42 CAP per 365 days)
Pediculicides/Scabicides [Pediculicidas/Escabicidas]			
lindane external shampoo 1 %		1	
permethrin external cream 5 %	Elimite	1	
SKLICE EXTERNAL LOTION 0.5 %		3	
Antiparkinson Agents [Antiparkinson]			
Anticholinergics [Anticolinérgicos]			
benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg		1	
trihexyphenidyl hcl oral elixir 0.4 mg/ml		1	
trihexyphenidyl hcl oral tablet 2 mg, 5 mg		1	
Antiparkinson Agents, Others [Antiparkinson, Otros]			
amantadine hcl oral capsule 100 mg		1	
amantadine hcl oral syrup 50 mg/5ml		1	
amantadine hcl oral tablet 100 mg		1	
bromocriptine mesylate oral capsule 5 mg	Parlodel	1	
bromocriptine mesylate oral tablet 2.5 mg	Parlodel	1	
entacapone oral tablet 200 mg	Comtan	1	
tolcapone oral tablet 100 mg	Tasmar	1	
Dopamine Agonist [Agonistas De Dopamine]			
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE 30 MG/3ML		5	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR		3	ST
pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	Mirapex ER	1	
pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	Mirapex	1	
ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	Requip XL	1	ST
ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	Requip	1	
Dopamine Precursors/L-Amino Acid Decarboxylase Inhibitors [Precursores De Dopamina/Inhibidores Del L-Amino Acid Decarboxylase]			
carbidopa oral tablet 25 mg	Lodosyn	1	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	Sinemet CR	1	
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	Sinemet	1	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	Stalevo	1	
Monoamine Oxidase B (MAO-B) Inhibitors [Inhibidores De Monoamina Oxidasa B]			
rasagiline mesylate oral tablet 0.5 mg, 1 mg	Azilect	1	ST
selegiline hcl oral capsule 5 mg	Eldepryl	1	
selegiline hcl oral tablet 5 mg		1	
Antipsychotics [Antipsicóticos]			
1st Generation/Typical [1ra Generación/Típicos]			
chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml		1	
chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg		1	
fluphenazine decanoate injection solution 25 mg/ml		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
fluphenazine hcl injection solution 2.5 mg/ml		1	
fluphenazine hcl oral concentrate 5 mg/ml		1	
fluphenazine hcl oral elixir 2.5 mg/5ml		1	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg		1	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	Haldol Decanoate	1	
haloperidol lactate injection solution 5 mg/ml	Haldol	1	
haloperidol lactate oral concentrate 2 mg/ml		1	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg		1	
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg		1	
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg		1	
perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg		1	
pimozide oral tablet 1 mg, 2 mg	Orap	1	
prochlorperazine edisylate injection solution 5 mg/ml		1	
prochlorperazine maleate oral tablet 10 mg, 5 mg		1	
prochlorperazine rectal suppository 25 mg	Compro	1	
thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg		1	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg		1	
trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg		1	
2nd Generation/Atypical [2da Generación/Atípicos]			
ABILITY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED 300 MG, 400 MG		3	
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	Abilify	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML		4	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION 273 MG/0.875ML, 410 MG/1.315ML, 546 MG/1.75ML, 819 MG/2.625ML		4	ST
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG		3	
olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	ZyPREXA	1	
olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg	ZyPREXA Zydis	1	
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg, 6-50 mg	Symbyax	1	
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg, 9 mg	Invega	1	
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg	SEROquel XR	1	ST
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	SEROquel	1	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED 12.5 MG, 25 MG, 37.5 MG, 50 MG		4	
risperidone oral solution 1 mg/ml	RisperDAL	1	
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	RisperDAL	1	
risperidone oral tablet dispersible 0.25 mg		1	
risperidone oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	RisperDAL M-TAB	1	
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 2.5 MG, 5 MG		3	
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	Geodon	1	
Treatment-Resistant [Resistentes A Tratamiento]			
clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	Clozaril	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Antispasticity [Antiespasticidad]			
Antispasticity [Antiespasticidad]			
baclofen oral tablet 10 mg, 20 mg		1	
dantrolene sodium oral capsule 100 mg		1	
dantrolene sodium oral capsule 25 mg, 50 mg	Dantrium	1	
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	Zanaflex	1	
tizanidine hcl oral tablet 2 mg		1	
tizanidine hcl oral tablet 4 mg	Zanaflex	1	
Antivirals [Antivirales]			
Anti-Cytomegalovirus (CMV) [Anti-Citomegalovirus]			
FOSCAVIR INTRAVENOUS SOLUTION 6000 MG/250ML		4	
ganciclovir sodium intravenous solution reconstituted 500 mg	Cytovene	5	
valganciclovir hcl oral tablet 450 mg	Valcyte	5	
Antihepatitis Agents [Antihepatitis]			
MODERIBA ORAL TABLET 200 & 400 MG		5	PA
RIBASPHERE ORAL TABLET 600 MG		5	PA
RIBASPHERE RIBAPAK ORAL TABLET 400 & 600 MG, 400 MG		5	PA
ribavirin oral capsule 200 mg	Rebetol	4	PA
ribavirin oral tablet 200 mg	Moderiba	4	PA
Antihepatitis B (HBV) Agents [Anti-Hepatitis B (HBV)]			
BARACLUDE ORAL SOLUTION 0.05 MG/ML		4	PA
entecavir oral tablet 0.5 mg, 1 mg	Baraclude	4	PA
INTRON A INJECTION SOLUTION 10000000 UNIT/ML, 6000000 UNIT/ML		5	PA
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT, 18000000 UNIT, 50000000 UNIT		5	PA
VEMLIDY ORAL TABLET 25 MG		4	PA
Antihepatitis C (HCV) Agents [Anti-Hepatitis C (HCV)]			
EPCLUSA ORAL TABLET 400-100 MG		4	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
HARVONI ORAL TABLET 90-400 MG		4	PA
SOVALDI ORAL TABLET 400 MG		4	PA
ZEPATIER ORAL TABLET 50-100 MG		4	PA
Antiherpetic Agents [Antiherpéticos]			
acyclovir external ointment 5 %	Zovirax	1	QL (30 GM per 15 days)
acyclovir oral capsule 200 mg	Zovirax	1	
acyclovir oral suspension 200 mg/5ml	Zovirax	1	
acyclovir oral tablet 400 mg, 800 mg	Zovirax	1	
acyclovir sodium intravenous solution reconstituted 500 mg		1	
DENAVIR EXTERNAL CREAM 1 %		3	
famciclovir oral tablet 125 mg, 250 mg		1	
famciclovir oral tablet 500 mg	Famvir	1	
valacyclovir hcl oral tablet 1 gm, 500 mg	Valtrex	1	
ZOVIRAX EXTERNAL CREAM 5 %		3	
Anti-HIV Adjuvants [Anti-VIH, Adjuvantes]			
TYBOST ORAL TABLET 150 MG		3	
Anti-HIV Agents, Integrase Inhibitors (INSTI) [Anti-VIH, Inhibidores De La Integrasa (INSTI)]			
ISENTRESS HD ORAL TABLET 600 MG		3	
ISENTRESS ORAL PACKET 100 MG		3	
ISENTRESS ORAL TABLET 400 MG		3	
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG		3	
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG		3	
VITEKTA ORAL TABLET 150 MG, 85 MG		3	
Anti-HIV Agents, Non-Nucleoside Reverse Transcriptase Inhibitors [Anti-VIH, Inhibidores No Nucleósidos De La Transcripasa Reversa]			
EDURANT ORAL TABLET 25 MG		3	
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG		3	PA
nevirapine er oral tablet extended release 24 hour 100 mg, 400 mg	Viramune XR	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
nevirapine oral suspension 50 mg/5ml	Viramune	1	
nevirapine oral tablet 200 mg	Viramune	1	
RESCRIPTOR ORAL TABLET 100 MG, 200 MG		3	
SUSTIVA ORAL CAPSULE 200 MG, 50 MG		3	
SUSTIVA ORAL TABLET 600 MG		3	
Anti-HIV Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors [Anti-VIH, Inhibidores Nucleósidos Y Nucleótidos De La Transcriptasa Reversa]			
abacavir sulfate oral tablet 300 mg	Ziagen	1	
didanosine oral capsule delayed release 125 mg, 200 mg, 250 mg, 400 mg	Videx EC	1	
EMTRIVA ORAL CAPSULE 200 MG		3	
EMTRIVA ORAL SOLUTION 10 MG/ML		3	
lamivudine oral solution 10 mg/ml	Epivir	1	
lamivudine oral tablet 150 mg, 300 mg	Epivir	1	
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML		3	
stavudine oral capsule 15 mg, 20 mg, 30 mg, 40 mg	Zerit	1	
stavudine oral solution reconstituted 1 mg/ml	Zerit	1	
VIDEX ORAL SOLUTION RECONSTITUTED 2 GM, 4 GM		3	
VIREAD ORAL POWDER 40 MG/GM		3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG		3	
VIREAD ORAL TABLET 300 MG		3	PA
ZIAGEN ORAL SOLUTION 20 MG/ML		3	
zidovudine oral capsule 100 mg	Retrovir	1	
zidovudine oral syrup 50 mg/5ml	Retrovir	1	
zidovudine oral tablet 300 mg	Retrovir	1	
Anti-HIV Agents, Others [Anti-VIH, Otros]			
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG		5	PA
SELZENTRY ORAL SOLUTION 20 MG/ML		3	PA
SELZENTRY ORAL TABLET 150 MG, 25 MG, 300 MG, 75 MG		3	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Anti-HIV Agents, Protease Inhibitors [Anti-VIH, Inhibidores De La Proteasa]			
APTIVUS ORAL CAPSULE 250 MG		3	PA
APTIVUS ORAL SOLUTION 100 MG/ML		3	PA
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG		3	
INVIRASE ORAL CAPSULE 200 MG		3	
INVIRASE ORAL TABLET 500 MG		3	
LEXIVA ORAL SUSPENSION 50 MG/ML		3	
LEXIVA ORAL TABLET 700 MG		3	
NORVIR ORAL CAPSULE 100 MG		3	
NORVIR ORAL SOLUTION 80 MG/ML		3	
NORVIR ORAL TABLET 100 MG		3	
PREZISTA ORAL SUSPENSION 100 MG/ML		3	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG		3	
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG		3	
REYATAZ ORAL PACKET 50 MG		3	
VIRACEPT ORAL TABLET 250 MG, 625 MG		3	
Anti-Influenza Agents [Antiinfluenza]			
oseltamivir phosphate oral capsule 30 mg, 45 mg, 75 mg	Tamiflu	1	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/BLISTER		3	
rimantadine hcl oral tablet 100 mg	Flumadine	1	
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML		3	
Antiretroviral Combinations [Combinaciones Antiretrovirales]			
abacavir sulfate-lamivudine oral tablet 600-300 mg	Epzicom	1	
abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg	Trizivir	1	
ATRIPLA ORAL TABLET 600-200-300 MG		3	
COMPLERA ORAL TABLET 200-25-300 MG		3	
DESCOVY ORAL TABLET 200-25 MG		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
EVOTAZ ORAL TABLET 300-150 MG		3	
GENVOYA ORAL TABLET 150-150-200-10 MG		3	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG		3	
lamivudine-zidovudine oral tablet 150-300 mg	Combivir	1	
lopinavir-ritonavir oral solution 400-100 mg/5ml	Kaletra	1	
ODEFSEY ORAL TABLET 200-25-25 MG		3	
PREZCOBIX ORAL TABLET 800-150 MG		3	
STRIBILD ORAL TABLET 150-150-200-300 MG		3	
TRIUMEQ ORAL TABLET 600-50-300 MG		3	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG		3	
Antivirals, Other [Antivirales, Otros]			
ribavirin inhalation solution reconstituted 6 gm	Virazole	5	
Anxiolytics [Ansiolíticos]			
Anxiolytics, Other [Ansiolíticos, Otros]			
buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg		1	
hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml		1	
hydroxyzine hcl oral syrup 10 mg/5ml		1	
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg		1	
hydroxyzine pamoate oral capsule 100 mg		1	
hydroxyzine pamoate oral capsule 25 mg, 50 mg	Vistaril	1	
Benzodiazepines [Benzodiazepinas]			
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg	Xanax XR	1	
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	Xanax	1	
chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg		1	
chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg		1	
clorazepate dipotassium oral tablet 15 mg, 3.75 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
clorazepate dipotassium oral tablet 7.5 mg	Tranxene-T	1	
diazepam oral tablet 10 mg, 2 mg, 5 mg	Valium	1	
lorazepam injection solution 2 mg/ml, 4 mg/ml	Ativan	1	
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	Ativan	1	
midazolam hcl injection solution 10 mg/10ml, 10 mg/2ml, 2 mg/2ml, 25 mg/5ml, 5 mg/5ml, 5 mg/ml, 50 mg/10ml		1	
midazolam hcl oral syrup 2 mg/ml		1	
oxazepam oral capsule 10 mg, 15 mg, 30 mg		1	
Bipolar Agents [Bipolaridad]			
Mood Stabilizers [Estabilizadores Del Ánimo]			
lithium carbonate er oral tablet extended release 300 mg	Lithobid	1	
lithium carbonate er oral tablet extended release 450 mg		1	
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg		1	
lithium carbonate oral tablet 300 mg		1	
lithium oral solution 8 meq/5ml		1	
Blood Glucose Regulators [Reguladores De Glucosa En Sangre]			
Antidiabetic Agents [Antidiabéticos]			
acarbose oral tablet 100 mg, 25 mg, 50 mg	Precose	1	
ACTOPLUS MET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 15-1000 MG, 30-1000 MG		3	ST
alogliptin benzoate oral tablet 12.5 mg, 25 mg, 6.25 mg	Nesina	1	ST
alogliptin-metformin hcl oral tablet 12.5-1000 mg, 12.5-500 mg	Kazano	1	ST
BYDUREON SUBCUTANEOUS PEN-INJECTOR 2 MG		2	ST
BYDUREON SUBCUTANEOUS SUSPENSION RECONSTITUTED ER 2 MG		2	ST
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML		2	ST

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML		2	ST
chlorpropamide oral tablet 100 mg, 250 mg		1	
glimepiride oral tablet 1 mg, 2 mg, 4 mg	Amaryl	1	
glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	Glucotrol XL	1	
glipizide oral tablet 10 mg, 5 mg	Glucotrol	1	
glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg		1	
glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg	Glynase	1	
glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg		1	
glyburide-metformin oral tablet 1.25-250 mg		1	
glyburide-metformin oral tablet 2.5-500 mg, 5-500 mg	Glucovance	1	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG		3	ST
INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG		2	ST
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG		2	ST
INVOKANA ORAL TABLET 100 MG, 300 MG		2	ST
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG		2	ST
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG		2	ST
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG		2	ST
JARDIANCE ORAL TABLET 10 MG, 25 MG		2	ST
JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG		3	ST
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG		3	ST
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG		2	ST

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
KORLYM ORAL TABLET 300 MG		5	PA
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	Fortamet	1	ST
metformin hcl er oral tablet extended release 24 hour 500 mg, 750 mg	Glucophage XR	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	Glucophage	1	
miglitol oral tablet 100 mg, 25 mg, 50 mg	Glyset	1	ST
nateglinide oral tablet 120 mg, 60 mg	Starlix	1	
ONGLYZA ORAL TABLET 2.5 MG, 5 MG		2	ST
pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg	Actos	1	ST
pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg	Duetact	1	ST
pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg	Actoplus Met	1	ST
repaglinide oral tablet 0.5 mg		1	ST
repaglinide oral tablet 1 mg, 2 mg	Prandin	1	ST
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML		3	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML		3	
SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG		2	ST
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG		2	ST
TRADJENTA ORAL TABLET 5 MG		3	ST
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML		3	ST
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML		2	ST
Glycemic Agents [Glicémicos]			
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED 1 MG		3	
GLUCAGON EMERGENCY INJECTION KIT 1 MG		3	
PROGLYCEM ORAL SUSPENSION 50 MG/ML		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Insulins [Insulinas]			
APIDRA INJECTION SOLUTION 100 UNIT/ML		3	
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML		3	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML		3	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML		2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML		2	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML		2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML		2	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML		2	
HUMALOG SUBCUTANEOUS SOLUTION 100 UNIT/ML		2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML		2	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION 100 UNIT /ML		2	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION 100 UNIT /ML		2	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION 100 UNIT /ML		2	
HUMULIN N SUBCUTANEOUS SUSPENSION 100 UNIT /ML		2	
HUMULIN R U-100 SUBCUTANEOUS SOLUTION 100 UNIT/ML		2	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML		2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML		2	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML		2	
LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML		2	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML		2	
LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML		2	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML		2	
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML		2	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML		2	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML		2	
NOVOLOG SUBCUTANEOUS SOLUTION 100 UNIT/ML		2	
Blood Products/Modifiers/Volume Expanders [Productos Para La Sangre/Modificadores/Expansores De Volumen]			
Anticoagulants [Anticoagulantes]			
ELIQUIS ORAL TABLET 2.5 MG, 5 MG		2	PA
enoxaparin sodium injection solution 300 mg/3ml	Lovenox	1	
enoxaparin sodium subcutaneous solution 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml	Lovenox	1	
fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml	Arixtra	1	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml		1	
heparin sodium (porcine) pf injection solution 5000 unit/0.5ml		1	
PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG		3	PA
warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	Coumadin	1	
XARELTO ORAL TABLET 10 MG		2	
XARELTO ORAL TABLET 15 MG, 20 MG		2	PA
XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG		2	PA
Antihemophilics [Antihemofílicos]			
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT		4	PA, SL
ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT		4	PA, SL
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
ALPHANATE/VWF COMPLEX/HUMAN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT		5	PA, SL
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED 1500 UNIT, 500 UNIT		5	PA, SL
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT		5	PA, SL
BEBULIN INTRAVENOUS SOLUTION RECONSTITUTED 200-1200 UNIT		5	PA, SL
BENEFIX INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED 250 UNIT, 500 UNIT		5	PA, SL

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT, 5000 UNIT, 6000 UNIT, 750 UNIT		5	PA, SL
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED		4	PA, SL
FEIBA NF INTRAVENOUS SOLUTION RECONSTITUTED		5	PA, SL
HELIXATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT		4	PA, SL
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT		5	PA, SL
IDEVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT		5	PA, SL
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1500 UNIT		5	PA, SL
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 250 UNIT, 500 UNIT		5	PA, SL
KOGENATE FS BIO-SET INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
MONOCLOATE-P INTRAVENOUS KIT 1000 UNIT, 1500 UNIT		5	PA, SL

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT		5	PA, SL
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT		5	PA, SL
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG, 8 MG		5	PA, SL
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 500 UNIT, 3000 UNIT, 4000 UNIT		5	PA, SL
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 500 UNIT, 3000 UNIT, 4000 UNIT		5	PA, SL
OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT		5	PA, SL
PROFILNINE SD INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT		5	PA, SL
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED 1241-1800 UNIT, 1801-2400 UNIT, 220-400 UNIT, 401-800 UNIT, 801-1240 UNIT		4	PA, SL
RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT		4	PA, SL
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED 1300 UNIT, 650 UNIT		5	PA, SL
WILATE INTRAVENOUS KIT 1000-1000 UNIT, 500-500 UNIT		5	PA, SL
XYNTHA INTRAVENOUS KIT 250 UNIT		5	PA, SL
XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT		5	PA, SL
Blood Formation Modifiers [Modificadores De La Formación De Sangre]			
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML		5	PA
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML		5	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
LEUKINE INTRAVENOUS SOLUTION RECONSTITUTED 250 MCG		5	
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT 6 MG/0.6ML		5	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML		5	
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML		5	
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML		5	
PROCRI INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML		4	PA
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG		5	PA
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML		5	
Coagulants [Coagulantes]			
AMICAR ORAL TABLET 1000 MG, 500 MG		3	
tranexamic acid intravenous solution 1000 mg/10ml	Cyklokapron	5	
Hematopoietic Agents [Hematopoieticos]			
cyanocobalamin injection solution 1000 mcg/ml		1	
ferocon oral capsule		1	
ferrocite plus oral tablet 106-1 mg		1	
FERRO-PLEX HEMATINIC ORAL TABLET 115-1 MG		3	
folic acid injection solution 5 mg/ml		1	
folic acid oral tablet 1 mg		1	
FUSION PLUS ORAL CAPSULE		3	
hematinic/folic acid oral tablet 324-1 mg	Hemocyte-F	1	
HEMETAB ORAL TABLET 22-6-1-0.025 MG	BiferaRx	3	
hydroxocobalamin intramuscular solution 1000 mcg/ml		1	
iferex 150 forte oral capsule 150-25-1 mg-mcg-mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
INTEGRA F ORAL CAPSULE 125-1 MG		3	
INTEGRA PLUS ORAL CAPSULE		3	
k-tan plus oral capsule 162-115.2-1 mg		1	
MULTIGEN ORAL TABLET 70 MG		3	
MULTIGEN PLUS ORAL TABLET 50-101-1 MG		3	
na ferric gluc cplx in sucrose intravenous solution 12.5 mg/ml	Ferrlecit	1	
NEURIN-SL SUBLINGUAL TABLET SUBLINGUAL 600-600 MCG	Abaneu-SL	3	
PRE-FOLIC ORAL TABLET 1-100 MG		3	
PROFERRIN-FORTE ORAL TABLET 12-1 MG		3	
PROTECTIRON ORAL TABLET 60-1 MG		3	
PUREFE PLUS ORAL CAPSULE 106-1 MG	Hemocyte Plus	3	
TANDEM F ORAL CAPSULE 162-115.2-1 MG		3	
tl-hem 150 oral tablet 150-1 mg	Hemax	1	
virt-vite oral tablet 2.5-25-1 mg	NuFol	1	
Platelet Modifying Agents [Modificadores De Plaquetas]			
anagrelide hcl oral capsule 0.5 mg	Agrylin	1	
anagrelide hcl oral capsule 1 mg		1	
aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg	Aggrenox	1	
BRILINTA ORAL TABLET 60 MG, 90 MG		3	PA
cilostazol oral tablet 100 mg, 50 mg		1	
clopidogrel bisulfate oral tablet 75 mg	Plavix	1	
dipyridamole oral tablet 25 mg, 50 mg, 75 mg		1	
EFFIENT ORAL TABLET 10 MG, 5 MG	Prasugrel HCl	3	PA
Cardiovascular Agents [Cardiovasculares]			
Alpha-Adrenergic Agonists [Agonistas Alfa Adrenérgicos]			
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	Catapres	1	
clonidine hcl transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr	Catapres-TTS	1	
guanfacine hcl oral tablet 1 mg, 2 mg		1	
methyldopa oral tablet 250 mg, 500 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg		1	
Alpha-Adrenergic Blocking Agents [Bloqueadores Alfa Adrenérgicos]			
doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg	Cardura	1	
prazosin hcl oral capsule 1 mg, 2 mg, 5 mg	Minipress	1	
terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg		1	
Angiotensin II Receptor Antagonists [Antagonistas Del Receptor Angiotensina II]			
candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg	Atacand	1	ST
candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg	Atacand HCT	1	ST
EDARBI ORAL TABLET 40 MG, 80 MG		3	ST
EDARBYCLOL ORAL TABLET 40-12.5 MG, 40-25 MG		3	ST
irbesartan oral tablet 150 mg, 300 mg, 75 mg	Avapro	1	
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg	Avalide	1	
losartan potassium oral tablet 100 mg, 25 mg, 50 mg	Cozaar	1	
losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg	Hyzaar	1	
olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg	Benicar	1	ST
olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	Benicar HCT	1	ST
telmisartan oral tablet 20 mg, 40 mg, 80 mg	Micardis	1	ST
telmisartan-hctz oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg	Micardis HCT	1	ST
valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg	Diovan	1	
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	Diovan HCT	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Angiotensin-Converting Enzyme (ACE) Inhibitors [Inhibidores De La Enzima Convertidora De Angiotensin]			
benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Lotensin	1	
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	Lotensin HCT	1	
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg		1	
captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg		1	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	Vasotec	1	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	Vaseretic	1	
fisinopril sodium oral tablet 10 mg, 20 mg, 40 mg		1	
fisinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg		1	
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	Zestril	1	
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	Zestoretic	1	
quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Accupril	1	
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	Accuretic	1	
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	Altace	1	
trandolapril oral tablet 1 mg, 2 mg, 4mg	Mavik	1	
trandolapril-verapamil hcl er oral tablet extended release 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	Tarka	1	
Antiarrhythmics [Antiarrítmicos]			
amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg	Pacerone	1	
disopyramide phosphate oral capsule 100 mg, 150 mg	Norpace	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	Tikosyn	1	
flecainide acetate oral tablet 100 mg, 150 mg, 50 mg		1	
mexiletine hcl oral capsule 150 mg, 200 mg, 250 mg		1	
MULTAQ ORAL TABLET 400 MG		3	ST
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG		3	
propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg	Rythmol SR	1	
propafenone hcl oral tablet 150 mg, 225 mg, 300 mg		1	
quinidine gluconate er oral tablet extended release 324 mg		1	
quinidine sulfate oral tablet 200 mg, 300 mg		1	
sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg	Betapace AF	1	
sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg	Sorine	1	
Beta-Adrenergic Blocking Agents [Bloqueadores Beta Adrenérgicos]			
acebutolol hcl oral capsule 200 mg, 400 mg		1	
atenolol oral tablet 100 mg, 25 mg, 50 mg	Tenormin	1	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	Tenoretic	1	
betaxolol hcl oral tablet 10 mg, 20 mg		1	
bisoprolol fumarate oral tablet 10 mg, 5 mg		1	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	Ziac	1	
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG		3	ST
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	Coreg	1	
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG, 80 MG		3	ST
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg	Toprol XL	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	Lopressor	1	
metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg	Lopressor HCT	1	
nadolol oral tablet 20 mg, 40 mg, 80 mg	Corgard	1	
pindolol oral tablet 10 mg, 5 mg		1	
propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg	Inderal LA	1	
propranolol hcl intravenous solution 1 mg/ml		1	
propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml		1	
propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg		1	
propranolol-hctz oral tablet 40-25 mg, 80-25 mg		1	
timolol maleate oral tablet 10 mg, 20 mg, 5 mg		1	
Calcium Channel Blocking Agents [Bloqueadores De Canales De Calcio]			
amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	Lotrel	1	
amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg	Norvasc	1	
amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	Exforge	1	ST
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-10 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-20 mg, 5-40 mg, 5-80 mg	Caduet	1	
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	Azor	1	ST
amlodipine-valsartan-hctz oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	Exforge HCT	1	ST
diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	Taztia XT	1	
diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg	Tiazac	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 300 mg	Cartia XT	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 180 mg, 240 mg, 360 mg	Cardizem CD	1	
diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg		1	
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg		1	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	Cardizem	1	
felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg		1	
isradipine oral capsule 2.5 mg, 5 mg		1	
nicardipine hcl oral capsule 20 mg, 30 mg		1	
nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	Adalat CC	1	
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	Procardia XL	1	
nifedipine oral capsule 10 mg, 20 mg	Procardia	1	
nimodipine oral capsule 30 mg		1	
nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 8.5 mg	Sular	1	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg	Verelan PM	1	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	Verelan	1	
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	Calan SR / Isoptin SR	1	
verapamil hcl oral tablet 120 mg, 40 mg, 80 mg	Calan	1	
Cardiovascular Agents, Other [Cardiovasculares, Otros]			
DEMSER ORAL CAPSULE 250 MG		3	
digoxin oral solution 0.05 mg/ml		1	
digoxin oral tablet 125 mcg, 250 mcg	Lanoxin	1	
LANOXIN ORAL TABLET 187.5 MCG, 62.5 MCG		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
pentoxifylline er oral tablet extended release 400 mg		1	
phenoxybenzamine hcl oral capsule 10 mg	Dibenzylidine	1	
RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR 1000 MG, 500 MG		3	PA
TEKTURN A HCT ORAL TABLET 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG		3	
TEKTURN A ORAL TABLET 150 MG, 300 MG		3	
Combinations, Other [Combinación, Otros]			
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG		2	PA
Diuretics, Carbonic Anhydrase Inhibitors [Diuréticos Inhibidores De Anhidrasa Carbónica]			
acetazolamide oral tablet 125 mg, 250 mg		1	
methazolamide oral tablet 25 mg, 50 mg	Neptazane	1	
Diuretics, Loop [Diuréticos Del Asa]			
bumetanide injection solution 0.25 mg/ml		1	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	Bumex	1	
furosemide injection solution 10 mg/ml		1	
furosemide oral solution 10 mg/ml, 8 mg/ml		1	
furosemide oral tablet 20 mg, 40 mg, 80 mg	Lasix	1	
torsemide oral tablet 10 mg, 20 mg	Demadex	1	
torsemide oral tablet 100 mg, 5 mg		1	
Diuretics, Potassium-Sparing [Diuréticos Conservadores De Potasio]			
ALDACTAZIDE ORAL TABLET 50-50 MG		3	
amiloride hcl oral tablet 5 mg		1	
amiloride-hydrochlorothiazide oral tablet 5-50 mg		1	
eplerenone oral tablet 25 mg, 50 mg	Inspra	1	ST
spironolactone oral tablet 100 mg, 25 mg, 50 mg	Aldactone	1	
spironolactone-hctz oral tablet 25-25 mg	Aldactazide	1	
triamterene-hctz oral capsule 37.5-25 mg	Dyazide	1	
triamterene-hctz oral capsule 50-25 mg		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
triamterene-hctz oral tablet 37.5-25 mg	Maxzide-25	1	
triamterene-hctz oral tablet 75-50 mg	Maxzide	1	
Diuretics, Thiazide [Diuréticos Tiazidas]			
chlorothiazide oral tablet 250 mg, 500 mg		1	
chlorthalidone oral tablet 100 mg, 25 mg, 50 mg		1	
DIURIL ORAL SUSPENSION 250 MG/5ML		3	
hydrochlorothiazide oral capsule 12.5 mg	Microzide	1	
hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg		1	
indapamide oral tablet 1.25 mg, 2.5 mg		1	
metolazone oral tablet 10 mg, 2.5 mg, 5 mg		1	
Dyslipidemics, Fibric Acid Derivatives [Dislipidémicos, Derivados De Ácido Fíbrico]			
ANTARA ORAL CAPSULE 30 MG, 90 MG		3	
fenofibrate micronized oral capsule 130 mg, 43 mg		1	
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	Lofibra	1	
fenofibrate oral capsule 150 mg, 50 mg	Lipofen	1	
fenofibrate oral tablet 145 mg, 48 mg	Tricor	1	
fenofibrate oral tablet 160 mg	Triglide	1	
fenofibrate oral tablet 54 mg	Lofibra	1	
fenofibric acid oral capsule delayed release 135 mg, 45 mg	Trilipix	1	
gemfibrozil oral tablet 600 mg	Lopid	1	
Dyslipidemics, HMG CoA Reductase Inhibitors [Dislipidémicos, Inhibidores De La Reductasa De HMG CoA]			
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG, 40 MG, 60 MG		3	ST
atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 80 mg	Lipitor	1	
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	Vytorin	1	ST

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
fluvastatin sodium er oral tablet extended release 24 hour 80 mg	Lescol XL	1	ST
fluvastatin sodium oral capsule 20 mg	Lescol	1	ST
fluvastatin sodium oral capsule 40 mg	Lescol	1	ST
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG		3	ST
lovastatin oral tablet 10 mg, 20 mg		1	
lovastatin oral tablet 40 mg	Mevacor	1	
pravastatin sodium oral tablet 10 mg		1	
pravastatin sodium oral tablet 20 mg, 40 mg, 80 mg	Pravachol	1	
rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Crestor	1	
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Zocor	1	
simvastatin oral tablet 80 mg	Zocor	1	ST
Dyslipidemics, Other [Dislipidémicos, Otros]			
cholestyramine light oral packet 4 gm	Prevalite	1	
cholestyramine light oral powder 4 gm/dose	Prevalite	1	
cholestyramine oral packet 4 gm	Questran	1	
cholestyramine oral powder 4 gm/dose	Questran	1	
colestipol hcl oral granules 5 gm	Colestid Flavored	1	
colestipol hcl oral packet 5 gm	Colestid	1	
colestipol hcl oral tablet 1 gm	Colestid	1	
ezetimibe oral tablet 10 mg	Zetia	1	ST
niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg	Niaspan	1	
NIACOR ORAL TABLET 500 MG		3	
omega-3-acid ethyl esters oral capsule 1 gm	Lovaza	1	
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM		3	
WELCHOL ORAL PACKET 3.75 GM		3	
WELCHOL ORAL TABLET 625 MG		3	
Vasodilators, Direct-Acting Arterial [Vasodilatadores, Arteriales]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg		1	
minoxidil oral tablet 10 mg, 2.5 mg		1	
Vasodilators, Direct-Acting Arterial/Venous [Vasodilatadores, Arteriales/Venosos]			
ISORDIL TITRADOSE ORAL TABLET 40 MG		3	
isosorbide dinitrate er oral tablet extended release 40 mg		1	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	Isordil	1	
isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg		1	
isosorbide mononitrate oral tablet 10 mg, 20 mg		1	
NITRO-BID TRANSDERMAL OINTMENT 2 %		3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR		3	
nitroglycerin er oral capsule extended release 2.5 mg, 6.5 mg, 9 mg	Nitro-Time	1	
nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg	Nitrostat	1	
nitroglycerin transdermal patch 24 hour 0.1 mg/hr	Minitran	1	
nitroglycerin transdermal patch 24 hour 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	Nitro-Dur	1	
nitroglycerin translingual solution 0.4 mg/spray	Nitrolingual	1	
Central Nervous System Agents [Sistema Nervioso Central]			
Attention Deficit Hyperactivity Disorder Agents, Amphetamines [Anfetaminas, ADHD]			
amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 5 mg	Adderall XR	1	ST; QL (1 CAP per 1 day)
amphetamine-dextroamphet er oral capsule extended release 24 hour 30 mg	Adderall XR	1	ST; QL (3 CAP per 1 day)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	Adderall	1	QL (3 TAB per 1 day)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
amphetamine-dextroamphetamine oral tablet 30 mg	Adderall	1	QL (1 TAB per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg	Dexedrine	1	QL (4 CAP per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	Dexedrine	1	QL (3 CAP per 1 day)
dextroamphetamine sulfate oral tablet 10 mg	Zenzedi	1	QL (4 TAB per 1 day)
dextroamphetamine sulfate oral tablet 5 mg	Zenzedi	1	QL (3 TAB per 1 day)
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG		2	ST; QL (1 CAP per 1 day)
VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG		2	ST; QL (1 TAB per 1 day)
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines [No-Anfetaminas, ADHD]			
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg	Strattera	1	PA; ST; AL (Less than 5 years is non-covered; greater than or equal to 6 years up to 18 years manage with ST; if greater than or equal to 19 manage with PA); QL (3 CAP per 1 day)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg	Strattera	1	PA; ST; AL (Less than 5 years is non-covered; greater than or equal to 6 years up to 18 years manage with ST; if greater than or equal to 19 manage with PA); QL (1 CAP per 1 day)
clonidine hcl er oral tablet extended release 12 hour 0.1 mg	Kapvay	1	QL (4 TAB per 1 day)
dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg	Focalin XR	1	QL (1 CAP per 1 day)
dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg	Focalin	1	QL (2 TAB per 1 day)
guanfacine hcl er oral tablet extended release 24 hour 1 mg, 3 mg	Intuniv	1	QL (3 TAB per 1 day)
guanfacine hcl er oral tablet extended release 24 hour 2 mg	Intuniv	1	QL (4 TAB per 1 day)
guanfacine hcl er oral tablet extended release 24 hour 4 mg	Intuniv	1	QL (2 TAB per 1 day)
methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg		1	QL (1 CAP per 1 day)
methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg	Ritalin LA	1	QL (1 CAP per 1 day)
methylphenidate hcl er oral tablet extended release 18 mg, 27 mg, 54 mg	Concerta	1	QL (1 TAB per 1 day)
methylphenidate hcl er oral tablet extended release 36 mg	Concerta	1	QL (2 TABS per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg, 20 mg	Metadate ER	1	QL (1 TAB per 1 day)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 36 mg, 54 mg		1	QL (1 TABS per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	Methylin	1	QL (3 ML per 1 day)
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	Ritalin	1	QL (3 TAB per 1 day)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG		2	QL (3 TAB per 1 day)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG		2	QL (2 TAB per 1 day)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 40 MG		2	QL (1 TAB per 1 day)
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED 25 MG/5ML		2	QL (12 ML per 1 day)
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG		3	QL (1 CAP per 1 day)
Central Nervous System Agents, Others [Sistema Nervioso Central, Otros]			
BOTOX INJECTION SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT		5	PA
riluzole oral tablet 50 mg	Rilutek	4	PA
Fibromyalgia [Fibromialgia]			
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG		3	
SAVELLA TITRATION PACK ORAL 12.5 & 25 & 50 MG		3	
Multiple Sclerosis Agents [Esclerosis Múltiple]			
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR 10 MG		5	PA
AUBAGIO ORAL TABLET 14 MG, 7 MG		4	
AVONEX INTRAMUSCULAR KIT 30 MCG		4	
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML		4	
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML		4	
BETASERON SUBCUTANEOUS KIT 0.3 MG		4	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML, 40 MG/ML		4	
EXTAVIA SUBCUTANEOUS KIT 0.3 MG		5	
GILENYA ORAL CAPSULE 0.5 MG		5	PA
LEMTRADA INTRAVENOUS SOLUTION 12 MG/1.2ML		5	PA
mitoxantrone hcl intravenous concentrate 20 mg/10ml, 25 mg/12.5ml, 30 mg/15ml		4	PA
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR 63 & 94 MCG/0.5ML		4	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 63 & 94 MCG/0.5ML		4	
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR 125 MCG/0.5ML		4	
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML		4	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML		5	
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG		5	
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML		5	
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG		5	
TECFIDERA ORAL 120 & 240 MG		4	
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG		4	
TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML		4	PA
Weight Management [Manejo Del Peso]			
BELVIQ ORAL TABLET 10 MG		3	PA
BELVIQ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG		3	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 11.25-69 MG, 15-92 MG, 3.75-23 MG, 7.5-46 MG		3	PA
Dental And Oral Agents [Dentales Y Orales]			
Dental And Oral Agents [Dentales Y Orales]			
BUCALSEP EXTERNAL LIQUID		3	
BUCALSEP EXTERNAL SOLUTION		3	
cevimeline hcl oral capsule 30 mg	Evoxac	1	
chlorhexidine gluconate mouth/throat solution 0.12 %	Peridex	1	
pilocarpine hcl oral tablet 5 mg, 7.5 mg	Salagen	1	
triamcinolone acetonide mouth/throat paste 0.1 %	Oralone	1	
Dermatological Agents [Dermatológicos]			
Acne Agents [Acné]			
ABSORICA ORAL CAPSULE 25 MG, 35 MG		3	
ACZONE EXTERNAL GEL 5 %, 7.5 %		3	
adapalene external cream 0.1 %	Differin	1	AL (less than or equal to 23 years)
adapalene external gel 0.1 %, 0.3 %	Differin	1	AL (less than or equal to 23 years)
adapalene-benzoyl peroxide external gel 0.1-2.5 %	Epiduo	1	AL (less than or equal to 23 years)
AZELEX EXTERNAL CREAM 20 %		3	
claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg		1	
EPIDUO FORTE EXTERNAL GEL 0.3-2.5 %		3	AL (less than or equal to 23 years)
FINACEA EXTERNAL FOAM 15 %		3	
tazarotene external cream 0.1 %	Tazorac	1	PA
TAZORAC EXTERNAL CREAM 0.05 %		3	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
TAZORAC EXTERNAL GEL 0.05 %, 0.1 %		3	PA
tretinoin external cream 0.05 %, 0.025 %, 0.1 %	Retin-A	1	AL (less than or equal to 23 years)
tretinoin external gel 0.01 %, 0.025 %	Retin-A	1	AL (less than or equal to 23 years)
tretinoin external gel 0.05 %	Atralin	1	AL (less than or equal to 23 years)
tretinoin microsphere external gel 0.04 %, 0.1 %	Retin-A Micro	1	AL (less than or equal to 23 years)
Antibacterials [Antibacterianos]			
ACANYA EXTERNAL GEL 1.2-2.5 %		3	
benzoyl peroxide-erythromycin external gel 5-3 %	Benzamycin	1	
bp 10-1 external emulsion 10-1 %	Cerisa Wash	1	
clindamycin phos-benzoyl perox external gel 1.2-5 %	Neuac	1	
clindamycin phos-benzoyl perox external gel 1-5 %	BenzaClin with Pump	1	
clindamycin phosphate external gel 1 %	Cleocin-T	1	
clindamycin phosphate external lotion 1 %	Cleocin-T	1	
clindamycin phosphate external solution 1 %	Cleocin-T	1	
clindamycin phosphate external swab 1 %	Clindacin-P	1	
clindamycin-tretinoin external gel 1.2-0.025 %	Ziana	1	
CORTISPORIN EXTERNAL CREAM 3.5-10000-0.5		3	
CORTISPORIN EXTERNAL OINTMENT 1 %		3	
erythromycin external gel 2 %	Erygel	1	
erythromycin external pad 2 %		1	
erythromycin external solution 2 %		1	
gentamicin sulfate external cream 0.1 %		1	
gentamicin sulfate external ointment 0.1 %		1	
metronidazole external cream 0.75 %	MetroCream	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
metronidazole external gel 0.75 %	MetroGel	1	
metronidazole external gel 1 %	Metrogel	1	
metronidazole external lotion 0.75 %	MetroLotion	1	
MIRVASO EXTERNAL GEL 0.33 %		3	
mupirocin calcium external cream 2 %	Bactroban	1	
mupirocin external ointment 2 %	Bactroban	1	
silver sulfadiazine external cream 1 %	Thermazene	1	
sulfacetamide sodium external suspension 10 %	Klaron	1	
sulfacetamide sodium-sulfur external cream 10-5 %	Avar-e Emollient	1	
sulfacetamide sodium-sulfur external emulsion 10-5 %	Avar Cleanser	1	
sulfacetamide sodium-sulfur external liquid 10-2 %	Avar LS Cleanser	1	
sulfacetamide sodium-sulfur external lotion 10-5 %		1	
sulfacetamide sodium-sulfur external suspension 10-5 %		1	
sulfacetamide sodium-sulfur external suspension 8-4 %	SulfaCleanse 8/4	1	
Antifungals [Antifungales]			
ALCORTIN A EXTERNAL GEL 1-2-1 %		3	
ciclopirox external gel 0.77 %		1	
ciclopirox external shampoo 1 %	Loprox	1	
ciclopirox external solution 8 %	Penlac	1	QL (6.6 ML per 90 days)
ciclopirox olamine external cream 0.77 %	Loprox	1	
ciclopirox olamine external suspension 0.77 %	Loprox	1	
clotrimazole external cream 1 %	Lotrimin	1	
clotrimazole external solution 1 %	Lotrimin	1	
clotrimazole-betamethasone external cream 1-0.05 %	Lotrisone	1	AL (greater than or equal to 18 years)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
clotrimazole-betamethasone external lotion 1-0.05 %	Lotrisone	1	AL (greater than or equal to 18 years)
econazole nitrate external cream 1 %		1	
EXELDERM EXTERNAL CREAM 1 %		3	
EXELDERM EXTERNAL SOLUTION 1 %		3	
EXODERM EXTERNAL LOTION 25-1 %		3	
ketoconazole external cream 2 %	Nizoral	1	
ketoconazole external shampoo 2 %	Nizoral	1	
MENTAX EXTERNAL CREAM 1 %		3	
naftifine hcl external cream 1 %	Naftin	1	
naftifine hcl external cream 2 %	Naftin	1	
NAFTIN EXTERNAL GEL 1 %		3	
NAFTIN EXTERNAL GEL 2 %		3	
nystatin external cream 100000 unit/gm		1	
nystatin external ointment 100000 unit/gm		1	
nystatin external powder 100000 unit/gm	Nystop	1	
nystatin-triamcinolone external cream 100000-0.1 unit/gm-%		1	
nystatin-triamcinolone external ointment 100000-0.1 unit/gm-%		1	
oxiconazole nitrate external cream 1 %	Oxistat	1	
OXISTAT EXTERNAL LOTION 1 %		3	
Caustic Agents [Caústicos]			
CONDYLOX EXTERNAL GEL 0.5 %		3	
podofilox external solution 0.5 %		1	
Dermatological Calcineurin Inhibitor Immunosuppressants [Inhibidores De Calcineurina]			
ELIDEL EXTERNAL CREAM 1 %		3	ST
tacrolimus external ointment 0.03 %, 0.1 %	Protopic	1	ST
Dermatological Emollients [Emolientes]			
ammonium lactate external cream 12 %	Lac-Hydrin	1	
ammonium lactate external lotion 12 %	Lac-Hydrin	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
CEM-UREA EXTERNAL SOLUTION 45 %		3	
NEOSALUS EXTERNAL LOTION		3	
urea external cream 39 %	Rea Lo 39	1	
urea external cream 40 %	Rea Lo 40	1	
urea external lotion 40 %	Cerovel	1	
urea nail external gel 45 %	Uramaxin	1	
Mitotic Inhibitors [Inhibidores De La Mitosis]			
selenium sulfide external lotion 2.5 %		1	
Non-Melanoma Skin Cancer Agents [Cáncer De La Piel No-Meloma]			
diclofenac sodium transdermal gel 3 %	Solaraze	1	
fluorouracil external cream 0.5 %	Carac	1	
fluorouracil external cream 5 %	Efudex	1	
fluorouracil external solution 2 %		1	
Photochemotherapy Agents [Fotoquimioterapia]			
methoxsalen oral capsule 10 mg		1	
methoxsalen rapid oral capsule 10 mg	Oxsoralen Ultra	1	
Psoriasis Agents [Psoriasis]			
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	Soriatane	1	
calcipotriene external cream 0.005 %	Dovonex	1	
calcipotriene external solution 0.005 %		1	
calcitriol external ointment 3 mcg/gm	Vectical	1	
SOOLANTRA EXTERNAL CREAM 1 %		2	
Wart Agents [Verrugas]			
imiquimod external cream 5 %	Aldara	1	
Wound-Care Agents [Cuidado De Heridas]			
REGRANEX EXTERNAL GEL 0.01 %		5	PA
SANTYL EXTERNAL OINTMENT 250 UNIT/GM		3	
Enzyme Replacements/Modifiers [Reemplazo De Enzimas/Modificadores]			
Anti-Cystine Agents [Anti-Cistina]			
CYSTAGON ORAL CAPSULE 150 MG, 50 MG		5	PA
Fabry Disease [Enfermedad De Fabry]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG		5	PA
Gaucher's Disease Treatment [Enfermedad De Gaucher]			
CERDELGA ORAL CAPSULE 84 MG		5	PA
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT		5	PA
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED 200 UNIT		5	PA
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT		5	PA
Glucosylceramide Synthase Inhibitors [Inhibidores De La Sintetasa De Glucosilceramida]			
ZAVESCA ORAL CAPSULE 100 MG		5	PA
Homocystinuria Treatment [Homocystinuria]			
CYSTADANE ORAL POWDER		5	PA
Hunter Syndrome Treatment [Sindrome De Hunter]			
ELAPRASE INTRAVENOUS SOLUTION 6 MG/3ML		5	PA
Mucopolysaccharidosis Disease Treatment [Mucopolisacaridosis]			
ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML		5	PA
NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML		5	PA
VIMIZIM INTRAVENOUS SOLUTION 5 MG/5ML		5	PA
Phenylketonuria Treatment [Fenilcetonuria]			
KUVAN ORAL PACKET 100 MG, 500 MG		5	PA
KUVAN ORAL TABLET SOLUBLE 100 MG		5	PA
Severe Combined Immunodeficiency Disease (Scid) Treatment [Inmunodeficiencia Combinada Severa]			
ADAGEN INTRAMUSCULAR SOLUTION 250 UNIT/ML		5	PA
Tyrosinemia Treatment [Tirosinemia]			
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ORFADIN ORAL SUSPENSION 4 MG/ML		5	PA
Urea Cycle Disorder Treatment [Desorden Del Ciclo De Urea]			
BUPHENYL ORAL TABLET 500 MG		5	PA
sodium phenylbutyrate oral powder 3 gm/tsp	Buphenyl	4	PA
Gastrointestinal Agents [Gastrointestinales]			
Antispasmodics, Gastrointestinal [Antiespasmódicos, Gastrointestinales]			
atropine sulfate (pf) injection solution 0.4 mg/0.5ml		1	
atropine sulfate injection solution 0.4 mg/ml, 1 mg/ml, 8 mg/20ml		1	
atropine sulfate injection solution prefilled syringe 0.25 mg/5ml, 0.5 mg/5ml, 1 mg/10ml		1	
chlordiazepoxide-clidinium oral capsule 5-2.5 mg	Librax	1	
dicyclomine hcl oral capsule 10 mg	Bentyl	1	
dicyclomine hcl oral solution 10 mg/5ml	Bentyl	1	
dicyclomine hcl oral tablet 20 mg	Bentyl	1	
glycopyrrolate oral tablet 1 mg	Robinul	1	
glycopyrrolate oral tablet 2 mg	Robinul-Forte	1	
hyoscyamine sulfate er oral tablet extended release 12 hour 0.375 mg	Symax-SR	1	
hyoscyamine sulfate oral tablet 0.125 mg	Levsin	1	
hyoscyamine sulfate sublingual tablet sublingual 0.125 mg	Levsin/SL	1	
methscopolamine bromide oral tablet 2.5 mg	Pamine	1	
methscopolamine bromide oral tablet 5 mg	Pamine Forte	1	
SYMAX DUOTAB ORAL TABLET EXTENDED RELEASE 0.375 MG		3	
Enzyme Replacement [Remplazo Enzimático]			
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000 UNIT, 6000 UNIT		2	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500 UNIT, 16800 UNIT, 21000 UNIT, 4200 UNIT		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 8000 UNIT		3	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 20000 UNIT		3	
Gastrointestinal Agents, Others [Gastrointestinales, Otros]			
ANALPRAM-HC RECTAL LOTION 2.5-1 %		3	
CORTIFOAM RECTAL FOAM 10 %		3	
cromolyn sodium oral concentrate 100 mg/5ml	Gastrocrom	1	
diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml	Lomotil	1	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	Lomotil	1	
hydrocortisone ace-pramoxine rectal cream 1-1 %	Analpram-HC	1	
hydrocortisone ace-pramoxine rectal cream 2.5-1 %	Analpram HC	1	
hydrocortisone acetate rectal suppository 25 mg	Anusol-HC	1	
hydrocortisone acetate rectal suppository 30 mg	Hemmorex-HC	1	
hydrocortisone rectal cream 2.5 %	Anusol-HC	1	
hydrocortisone rectal enema 100 mg/60ml	Colocort	1	
lidocaine-hydrocortisone ace rectal cream 3-0.5 %		1	
lidocaine-hydrocortisone ace rectal kit 2-2 %		1	
lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %, 3-2.5 %		1	
loperamide hcl oral capsule 2 mg	Imodium	1	
MYTESI ORAL TABLET DELAYED RELEASE 125 MG		5	PA
PROCORT RECTAL CREAM 1.85-1.15 %		3	
PROCTOFOAM HC RECTAL FOAM 1-1 %		3	
PYLERA ORAL CAPSULE 140-125-125 MG		3	
RECTIV RECTAL OINTMENT 0.4 %		3	
UCERIS RECTAL FOAM 2 MG/ACT		3	
ursodiol oral capsule 300 mg	Actigall	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ursodiol oral tablet 250 mg	Urso 250	1	
ursodiol oral tablet 500 mg	Urso Forte	1	
XIFAXAN ORAL TABLET 200 MG, 550 MG		3	PA
Histamine2 (H2) Receptor Antagonists [Antagonistas Del Receptor De Histamina2 (H2)]			
cimetidine hcl oral solution 300 mg/5ml	Tagamet	1	
cimetidine oral tablet 300 mg, 400 mg, 800 mg	Tagamet	1	
famotidine intravenous solution 20 mg/2ml	Pepcid	1	
famotidine oral suspension reconstituted 40 mg/5ml	Pepcid	1	
famotidine oral tablet 20 mg, 40 mg	Pepcid	1	
nizatidine oral capsule 150 mg, 300 mg	Axid	1	
ranitidine hcl injection solution 150 mg/6ml, 50 mg/2ml	Zantac	1	
ranitidine hcl oral capsule 150 mg, 300 mg	Zantac	1	
ranitidine hcl oral syrup 15 mg/ml	Zantac	1	
ranitidine hcl oral tablet 150 mg, 300 mg	Zantac	1	
ZANTAC INJECTION SOLUTION 1000 MG/40ML		3	
Irritable Bowel Syndrome Agents [Síndrome De Colon Irritado]			
alosetron hcl oral tablet 0.5 mg, 1 mg	Lotronex	1	
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG		3	QL (2 CAP per 1 day)
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG		2	QL (1 CAP per 1 day)
Laxatives [Laxantes]			
GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM		3	QL (1EA per 15 days)
lactulose encephalopathy oral solution 10 gm/15ml		1	
lactulose oral solution 10 gm/15ml		1	
peg 3350/electrolytes oral solution reconstituted 240 gm	Colyte with Flavor Packs	1	QL (4000 ML per 15 days)
peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm	Nulytely with Flavor Packs	1	QL (4000 ML per 15 days)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
peg-3350/electrolytes oral solution reconstituted 236 gm	Golytely	1	QL (4000 ML per 15 days)
pegylax oral powder		1	
Polyethylene glycol 3350 oral packet	ClearLax	1	
SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/180ML		3	
Miscellaneous [Misceláneos]			
CHOLBAM ORAL CAPSULE 250 MG, 50 MG		5	PA
Protectants [Protectores]			
CARAFATE ORAL SUSPENSION 1 GM/10ML	Sucralfate	3	
misoprostol oral tablet 100 mcg, 200 mcg	Cytotec	1	
sucralfate oral tablet 1 gm	Carafate	1	
Proton Pump Inhibitors [Inhibidores De La Bomba De Protones]			
DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG		3	ST
esomeprazole magnesium oral capsule delayed release 20 mg	NexIUM	OTC	
esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg	NexIUM	1	ST
lansoprazole oral capsule delayed release 15 mg	Prevacid	OTC	
lansoprazole oral capsule delayed release 15 mg, 30 mg	Prevacid	1	
NEXIUM 24HR CAPSULE DELAYED RELEASE 20 MG ORAL		OTC	
NEXIUM ORAL PACKET 10 MG, 2.5 MG, 20 MG, 40 MG, 5 MG		3	ST
omeprazole oral capsule delayed release 20.6 mg	PriLOSEC	OTC	
omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg	PriLOSEC	1	
omeprazole oral tablet delayed release 20 mg	PriLOSEC	OTC	
omeprazole-sodium bicarbonate oral capsule 20-1100 mg	Zegerid	OTC	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
omeprazole-sodium bicarbonate oral capsule 20-1100 mg	Zegerid	1	
omeprazole-sodium bicarbonate oral capsule 40-1100 mg	Zegerid	1	ST
pantoprazole sodium intravenous solution reconstituted 40 mg	Protonix	1	
pantoprazole sodium oral tablet delayed release 20 mg, 40 mg	Protonix	1	
PREVACID SOLUTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG		3	ST
PREVACID 24HR CAPSULE DELAYED RELEASE 15 MG ORAL		OTC	
PRILOSEC OTC TABLET DELAYED RELEASE 20 MG ORAL		OTC	
PROTONIX ORAL PACKET 40 MG		3	ST
rabeprazole sodium oral tablet delayed release 20 mg	Aciphex	1	ST
ZEGERID OTC CAPSULE 20-1100 MG ORAL		OTC	
Genitourinary Agents [Genitourinarios]			
Acidifiers [Acidificadores]			
K-PHOS NO 2 ORAL TABLET 305-700 MG		3	
Alkalinizers [Alcalinizadores]			
ORACIT ORAL SOLUTION 490-640 MG/5ML		3	
potassium citrate er oral tablet extended release 10 meq (1080 mg)	Urocit-K 10	1	
potassium citrate er oral tablet extended release 15 meq (1620 mg)	Urocit-K 15	1	
potassium citrate er oral tablet extended release 5 meq (540 mg)	Urocit-K 5	1	
potassium citrate-citric acid oral packet 3300-1002 mg	Taron-Crystals	1	
potassium citrate-citric acid oral solution 1100-334 mg/5ml		1	
sod citrate-citric acid oral solution 500-334 mg/5ml	Shohls Modified	1	
Antispasmodics, Urinary [Antiespasmódicos, Urinarios]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	Urecholine	1	
darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg	Enablex	1	
flavoxate hcl oral tablet 100 mg		1	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG		3	ST
oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg	Ditropan XL	1	
oxybutynin chloride oral syrup 5 mg/5ml		1	
oxybutynin chloride oral tablet 5 mg		1	
tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg	Detrol LA	1	
tolterodine tartrate oral tablet 1 mg, 2 mg	Detrol	1	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG		3	
VESICARE ORAL TABLET 10 MG, 5 MG		3	
Benign Prostatic Hypertrophy Agents [Hipertrofia Prostática Benigna]			
alfuzosin hcl er oral tablet extended release 24 hour 10 mg	Uroxatral	1	
dutasteride oral capsule 0.5 mg	Avodart	1	
dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg	Jalyn	1	
finasteride oral tablet 5 mg	Proscar	1	
RAPAFLO ORAL CAPSULE 4 MG, 8 MG		3	
tamsulosin hcl oral capsule 0.4 mg	Flomax	1	
Genitourinary Agents, Others [Genitourinarios, Otros]			
DEPEN TITRATABS ORAL TABLET 250 MG		3	
ELMIRON ORAL CAPSULE 100 MG		3	
phenazopyridine hcl oral tablet 100 mg, 200 mg	Pyridium	1	
RIMSO-50 INTRAVESICAL SOLUTION 50 %		3	
Miscellaneous [Misceláneos]			
METHERGINE ORAL TABLET 0.2 MG		3	
RELAGARD VAGINAL GEL 0.9-0.025 %		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
---------------------------------------	---------------------------	------------------	---------------------------------

Phosphate Binders [Enlazadores De Fosfato]

calcium acetate (phos binder) oral capsule 667 mg	PhosLo	1	
FOSRENOL ORAL PACKET 1000 MG, 750 MG		3	PA
lanthanum carbonate oral tablet chewable 1000 mg, 50 mg, 750 mg	Fosrenol	1	PA
RENAGEL ORAL TABLET 400 MG, 800 MG		3	PA
sevelamer carbonate oral packet 0.8 gm, 2.4 gm	Renvela	1	PA
sevelamer carbonate oral tablet 800 mg	Renvela	1	PA
VELPHORO ORAL TABLET CHEWABLE 500 MG		2	PA

Phosphodiesterase Type 5 Inhibitors [Inhibidores De PDE-5]

CIALIS ORAL TABLET 10 MG, 20 MG		3	AL (greater than or equal to 18 years); QL (6 TAB per 30 days)
CIALIS ORAL TABLET 2.5 MG, 5 MG		3	PA; AL (greater than or equal to 18 years); QL (1 TAB per 1 day)
LEVITRA ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG		3	AL (greater than or equal to 18 years); QL (6 TAB per 30 days)
STAXYN ORAL TABLET DISPERSIBLE 10 MG		3	AL (greater than or equal to 18 years); QL (4 TAB per 30 days)
VIAGRA ORAL TABLET 100 MG, 25 MG, 50 MG		3	AL (greater than or equal to 18 years); QL (6 TAB per 30 days)

Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) [Hormonales, Estimulante/Reemplazo/Modificador (Adrenal)]

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
Glucocorticoids / Mineralocorticoids [Glucocorticoides/Mineralocorticoides]			
alclometasone dipropionate external cream 0.05 %		1	
alclometasone dipropionate external ointment 0.05 %		1	
APEXICON E EXTERNAL CREAM 0.05 %		3	AL (greater than or equal to 12 years)
betamethasone dipropionate aug external cream 0.05 %	Diprolene AF	1	AL (greater than or equal to 12 years)
betamethasone dipropionate aug external gel 0.05 %		1	AL (greater than or equal to 12 years)
betamethasone dipropionate aug external lotion 0.05 %	Diprolene	1	AL (greater than or equal to 12 years)
betamethasone dipropionate aug external ointment 0.05 %	Diprolene	1	AL (greater than or equal to 12 years)
betamethasone dipropionate external cream 0.05 %		1	AL (greater than or equal to 12 years);
betamethasone dipropionate external lotion 0.05 %		1	AL (greater than or equal to 12 years)
betamethasone dipropionate external ointment 0.05 %		1	AL (greater than or equal to 12 years)
betamethasone valerate external cream 0.1 %		1	
betamethasone valerate external foam 0.12 %	Luxiq	1	AL (greater than or equal to 12 years)
betamethasone valerate external lotion 0.1 %		1	
betamethasone valerate external ointment 0.1 %		1	AL (greater than or equal to 12 years)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
CAPEX EXTERNAL SHAMPOO 0.01 %		3	
clobetasol propionate external cream 0.05 %		1	AL (greater than or equal to 12 years)
clobetasol propionate external cream 0.05 %	Temovate	1	AL (greater than or equal to 12 years)
clobetasol propionate external foam 0.05 %	Olux	1	AL (greater than or equal to 12 years)
clobetasol propionate external gel 0.05 %	Temovate	1	AL (greater than or equal to 12 years)
clobetasol propionate external liquid 0.05 %	Clobex Spray	1	AL (greater than or equal to 12 years)
clobetasol propionate external lotion 0.05 %	Clobex	1	AL (greater than or equal to 12 years)
clobetasol propionate external ointment 0.05 %	Temovate	1	AL (greater than or equal to 12 years)
clobetasol propionate external shampoo 0.05 %	Clobex	1	AL (greater than or equal to 12 years)
clobetasol propionate external solution 0.05 %	Temovate	1	AL (greater than or equal to 12 years)
clocortolone pivalate external cream 0.1 %	Cloderm	1	
CORDRAN EXTERNAL TAPE 4 MCG/SQCM		3	
desonide external cream 0.05 %	DesOwen	1	
desonide external lotion 0.05 %	DesOwen	1	
desonide external ointment 0.05 %	DesOwen	1	
desoximetasone external cream 0.05 %	Topicort	1	AL (greater than or equal to 12 years)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
desoximetasone external cream 0.25 %	Topicort	1	AL (greater than or equal to 12 years)
desoximetasone external gel 0.05 %	Topicort	1	AL (greater than or equal to 12 years)
desoximetasone external ointment 0.05 %, 0.25 %	Topicort	1	AL (greater than or equal to 12 years)
diflorasone diacetate external cream 0.05 %		1	AL (greater than or equal to 12 years)
diflorasone diacetate external ointment 0.05 %		1	AL (greater than or equal to 12 years)
fludrocortisone acetate oral tablet 0.1 mg		1	
fluocinolone acetonide body external oil 0.01 %	Derma-Smoothe/FS Body	1	
fluocinolone acetonide external cream 0.01 %		1	
fluocinolone acetonide external cream 0.025 %	Synalar	1	AL (greater than or equal to 12 years)
fluocinolone acetonide external ointment 0.025 %	Synalar	1	AL (greater than or equal to 12 years)
fluocinolone acetonide external solution 0.01 %	Synalar	1	
fluocinolone acetonide scalp external oil 0.01 %	Derma-Smoothe/FS Scalp	1	
fluocinonide external cream 0.05 %		1	AL (greater than or equal to 12 years)
fluocinonide external cream 0.1 %	Vanos	1	AL (greater than or equal to 12 years)

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
fluocinonide external gel 0.05 %		1	AL (greater than or equal to 12 years)
fluocinonide external ointment 0.05 %		1	AL (greater than or equal to 12 years)
fluocinonide external solution 0.05 %		1	AL (greater than or equal to 12 years)
fluocinonide-e external cream 0.05 %		1	AL (greater than or equal to 12 years); QL (60 GM per 15 days)
flurandrenolide external cream 0.05 %	Cordran	1	
flurandrenolide external lotion 0.05 %	Nolix	1	
fluticasone propionate external cream 0.05 %	Cutivate	1	
fluticasone propionate external lotion 0.05 %	Cutivate	1	
fluticasone propionate external ointment 0.005 %	Cutivate	1	
halobetasol propionate external cream 0.05 %	Ultravate	1	AL (greater than or equal to 12 years)
halobetasol propionate external ointment 0.05 %	Ultravate	1	AL (greater than or equal to 12 years)
HALOG EXTERNAL CREAM 0.1 %		3	AL (greater than or equal to 12 years)
HALOG EXTERNAL OINTMENT 0.1 %		3	AL (greater than or equal to 12 years)
hydrocortisone ace-pramoxine external cream 2.5-1 %	Pramosone	1	
hydrocortisone butyr lipo base external cream 0.1 %	Locoid Lipocream	1	
hydrocortisone butyrate external cream 0.1 %	Locoid	1	
hydrocortisone butyrate external ointment 0.1 %	Locoid	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
hydrocortisone butyrate external solution 0.1 %	Locoid	1	
hydrocortisone external cream 1 %	KeriCort 10	1	
hydrocortisone external cream 2.5 %		1	
hydrocortisone external lotion 2.5 %		1	
hydrocortisone external ointment 1 %		1	
hydrocortisone external ointment 2.5 %		1	
hydrocortisone valerate external cream 0.2 %	Westcort	1	
hydrocortisone valerate external ointment 0.2 %	Westcort	1	
LOCOID EXTERNAL LOTION 0.1 %		3	
mometasone furoate external cream 0.1 %	Elocon	1	
mometasone furoate external ointment 0.1 %	Elocon	1	
mometasone furoate external solution 0.1 %	Elocon	1	
PANDEL EXTERNAL CREAM 0.1 %		3	AL (greater than or equal to 18 years)
PRAMOSONE E EXTERNAL CREAM 1-2.5 %		3	
PRAMOSONE EXTERNAL CREAM 1-1 %		3	
PRAMOSONE EXTERNAL LOTION 1-1 %, 1-2.5 %		3	
PRAMOSONE EXTERNAL OINTMENT 1-1 %		3	
PRAMOSONE EXTERNAL OINTMENT 1-2.5 %		3	
prednicarbate external cream 0.1 %	Dermatop	1	
prednicarbate external ointment 0.1 %	Dermatop	1	
scalacort external lotion 2 %	Ala Scalp	1	
TEXACORT EXTERNAL SOLUTION 2.5 %		3	
triamcinolone acetonide external cream 0.025 %		1	
triamcinolone acetonide external cream 0.1 %	Triderm	1	
triamcinolone acetonide external cream 0.5 %		1	AL (greater than or equal to 12 years)
triamcinolone acetonide external lotion 0.025 %, 0.1 %		1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
triamcinolone acetonide external ointment 0.5 %		1	AL (greater than or equal to 12 years)
TRIANEX EXTERNAL OINTMENT 0.05 %		3	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) [Hormonales, Estimulante/Reemplazo/Modificador (Pituitaria)]			
Hormonal Agents, Stimulant/ Replacement/Modifying (Pituitary) [Hormonales, Estimulante/Reemplazo/Modificador (Pituitaria)]			
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG		4	PA
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED 12 MG, 5 MG		4	PA
HUMATROPE INJECTION SOLUTION RECONSTITUTED 12 MG, 24 MG, 5 MG, 6 MG		5	PA
INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML		5	PA
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION 10 MG/1.5ML, 15 MG/1.5ML, 30 MG/3ML		4	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION 10 MG/2ML		5	PA
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION 20 MG/2ML		5	PA
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION 5 MG/2ML		5	PA
OMNITROPE SUBCUTANEOUS SOLUTION 5 MG/1.5ML		4	PA
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED 5.8 MG		5	PA
SAIZEN CLICK.EASY INJECTION SOLUTION RECONSTITUTED 8.8 MG		5	PA
SAIZEN INJECTION SOLUTION RECONSTITUTED 5 MG		5	PA
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 5 MG		5	PA
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED 8.8 MG		5	PA
Vasopressin Analogs [Análogos De Vasopresina]			
desmopressin ace rhinal tube nasal solution 0.01 %	DDAVP Rhinal Tube	1	
desmopressin ace spray refrig nasal solution 0.01 %		1	
desmopressin acetate injection solution 4 mcg/ml	DDAVP	1	
desmopressin acetate oral tablet 0.1 mg, 0.2 mg	DDAVP	1	
desmopressin acetate spray nasal solution 0.01 %	DDAVP	1	
STIMATE NASAL SOLUTION 1.5 MG/ML		5	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) [Hormonales, Estimulante/Reemplazo/Modificador (Hormonas Sexuales/Modificadores)]			
Anabolic Steroid [Esteroide Anabólico]			
oxandrolone oral tablet 10 mg, 2.5 mg	Oxandrin	1	
Androgens [Andrógenos]			
ANDRODERM TRANSDERMAL PATCH 24 HOUR 2 MG/24HR, 4 MG/24HR		3	
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)		3	QL (75 GM per 30 days)
ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%)		3	QL (37.5 GM per 30 days)
ANDROGEL TRANSDERMAL GEL 40.5 MG/2.5GM (1.62%)		3	QL (75 GM per 30 days)
danazol oral capsule 100 mg, 200 mg, 50 mg		1	
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	Depo-Testosterone	1	
testosterone enanthate intramuscular solution 200 mg/ml		1	
testosterone transdermal gel 10 mg/act (2%)	Fortesta	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
testosterone transdermal gel 12.5 mg/act (1%)	Vogelxo Pump	1	QL (150 GM per 30 days)
testosterone transdermal gel 25 mg/2.5gm (1%)	AndroGel	1	QL (2.5 GM per 1 day)
testosterone transdermal gel 50 mg/5gm (1%)	AndroGel	1	QL (5 GM per 1 day)
testosterone transdermal solution 30 mg/act	Axiron	1	
Estrogens [Estrógenos]			
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG		3	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/DAY		3	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY		3	
DUAVEE ORAL TABLET 0.45-20 MG		3	
est estrogens-methyltest hs oral tablet 0.625-1.25 mg	EEMT HS	1	
est estrogens-methyltest oral tablet 1.25-2.5 mg	EEMT	1	
ESTRACE VAGINAL CREAM 0.1 MG/GM		3	
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	Estrace	1	
estradiol vaginal tablet 10 mcg	Vagifem	1	
estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr	Vivelle-Dot	1	
estradiol transdermal patch twice weekly 0.0375 mg/24hr, 0.1 mg/24hr	Minivelle	1	
estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	Climara	1	
estradiol-norethindrone acet oral tablet 0.5-0.1 mg	Mimvey Lo	1	
estradiol-norethindrone acet oral tablet 1-0.5 mg	Mimvey	1	
ESTRING VAGINAL RING 2 MG		3	
ESTROGEL TRANSDERMAL GEL 0.75 MG/1.25 GM (0.06%)		3	
estropipate oral tablet 0.75 mg, 1.5 mg, 3 mg		1	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG		2	
PREMARIN VAGINAL CREAM 0.625 MG/GM		3	
PREMPHASE ORAL TABLET 0.625-5 MG		2	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG		2	
Progestins [Progestinas]			
CRINONE VAGINAL GEL 4 %		3	QL (6.75 GM per 15 days)
CRINONE VAGINAL GEL 8 %		3	QL (16.86 GM per 15 days)
medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg	Provera	1	
megestrol acetate oral suspension 40 mg/ml		1	
megestrol acetate oral suspension 625 mg/5ml	Megace ES	1	
megestrol acetate oral tablet 20 mg, 40 mg		1	
norethindrone acetate oral tablet 5 mg	Aygestin	1	
progesterone micronized oral capsule 100 mg, 200 mg	Prometrium	1	
Selective Estrogen Receptor Modifying Agents [Modificadores Selectivos Del Receptor De Estrógeno]			
OSPHENA ORAL TABLET 60 MG		3	
raloxifene hcl oral tablet 60 mg	Evista	1	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) [Hormonales, Estimulante/Reemplazo/Modificador (Tiroide)]			
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) [Hormonales, Estimulante/Reemplazo/Modificador (Tiroide)]			
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	Synthroid	1	
liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg	Cytomel	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG		2	
Hormonal Agents, Suppressant (Adrenal) [Hormonales, Supresores (Adrenal)]			
Hormonal Agents, Suppressant (Adrenal) [Hormonales, Supresores (Adrenal)]			
LYSODREN ORAL TABLET 500 MG		5	
Hormonal Agents, Suppressant (Parathyroid) [Hormonales, Supresores (Paratiroides)]			
Hormonal Agents, Suppressant (Parathyroid) [Hormonales, Supresores (Paratiroides)]			
SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG		3	PA
Hormonal Agents, Suppressant (Pituitary) [Hormonales, Supresores (Pituitaria)]			
Hormonal Agents, Suppressant (Pituitary) [Hormonales, Supresores (Pituitaria)]			
cabergoline oral tablet 0.5 mg		1	
chorionic gonadotropin intramuscular solution reconstituted 10000 unit	Pregnyl	5	PA
leuprolide acetate injection kit 1 mg/0.2ml		4	PA
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG		3	PA
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG		5	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG		3	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG		5	PA
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30 MG		5	PA
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45 MG		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG		3	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED), 30 MG (PED)		3	PA
octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	SandoSTATIN	4	PA
octreotide acetate injection solution 1000 mcg/ml	SandoSTATIN	5	PA
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG		5	PA
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML		5	PA
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG		5	PA
SYNAREL NASAL SOLUTION 2 MG/ML		5	PA
TRELSTAR INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG		5	PA
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG, 3.75 MG		5	PA
Hormonal Agents, Suppressant (Thyroid) [Hormonales, Supresores (Tiroide)]			
Antithyroid Agents [Antitiroide]			
methimazole oral tablet 10 mg, 5 mg	Tapazole	1	
propylthiouracil oral tablet 50 mg		1	
Immunological Agents [Inmunológicos]			
Angioedema Agents [Agentes Para El Tratamiento De Angioedema]			
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT		5	PA
Immune Suppressants [Supresores Inmunológicos]			
azathioprine oral tablet 50 mg	Imuran	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
COSENTYX SENSOREADY 300 DOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML		5	PA
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML		5	PA
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML		4	PA
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED 25 MG		4	PA
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML		4	PA
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED 300 MG		5	PA
HUMIRA PEN-PSORIASIS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML		4	PA
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML		4	PA
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG		5	PA
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML		5	PA
methotrexate oral tablet 2.5 mg		1	
mycophenolate mofetil oral capsule 250 mg	CellCept	1	
mycophenolate mofetil oral suspension reconstituted 200 mg/ml	CellCept	1	
mycophenolate mofetil oral tablet 500 mg	CellCept	1	
mycophenolate sodium oral tablet delayed release 180 mg, 360 mg	Myfortic	1	
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML		5	PA
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED 250 MG		5	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML, 50 MG/0.4ML, 87.5 MG/0.7ML		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG		5	PA
SIMPONI ARIA INTRAVENOUS SOLUTION 50 MG/4ML		5	PA
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 50 MG/0.5ML		5	PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML		5	PA
STELARA INTRAVENOUS SOLUTION 130 MG/26ML		5	PA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML		5	PA
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML		5	PA
XELJANZ ORAL TABLET 5 MG		5	PA
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG		5	PA
Immunizing Agents, Passive [Inmunizadores Pasivos]			
ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED		5	
antivenin latroductus mactans injection kit		4	
antivenin micrurus fulvius intravenous solution reconstituted		4	
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 12 GM, 6 GM		5	
CROFAB INTRAVENOUS SOLUTION RECONSTITUTED		5	
CUVITRU SUBCUTANEOUS SOLUTION 1 GM/5ML, 2 GM/10ML		5	
CYTOGAM INTRAVENOUS INJECTABLE 50 MG/ML		5	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 0.5 GM/10ML, 2.5 GM/50ML		5	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 GM/50ML		4	
GAMASTAN S/D INTRAMUSCULAR INJECTABLE		5	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
GAMMAGARD INJECTION SOLUTION 20 GM/200ML, 30 GM/300ML		5	
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM		4	
GAMMAKED INJECTION SOLUTION 2.5 GM/25ML		5	
GAMMAPLEX INTRAVENOUS SOLUTION 20 GM/200ML, 20 GM/400ML, 5 GM/100ML		5	
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 40 GM/400ML, 5 GM/50ML		5	
HEPAGAM B INJECTION SOLUTION		5	
HIZENTRA SUBCUTANEOUS SOLUTION 10 GM/50ML, 4 GM/20ML		5	
HYPERHEP B S/D INTRAMUSCULAR SOLUTION		5	
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 250 UNIT		3	
HYPERTET S/D INTRAMUSCULAR INJECTABLE 250 UNIT/ML		5	
HYQVIA SUBCUTANEOUS KIT 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML		5	
IMOGLAM RABIES-HT INTRAMUSCULAR INJECTABLE 150 UNIT/ML		5	
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/200ML, 2 GM/20ML, 25 GM/500ML		5	
OCTAGAM INTRAVENOUS SOLUTION 10 GM/100ML		4	
PRIVIGEN INTRAVENOUS SOLUTION 40 GM/400ML		5	
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT		3	
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML		3	
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
VARIZIG INTRAMUSCULAR SOLUTION 125 UNIT/1.2ML		5	
WINRHO SDF INJECTION SOLUTION 1500 UNIT/1.3ML, 15000 UNIT/13ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML		3	
Immunomodulators [Inmunomoduladores]			
ACTEMRA INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML		5	PA
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML		5	PA
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG		5	PA
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG		5	PA
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-Injector 200 MG/ML		5	PA
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML		5	PA
leflunomide oral tablet 10 mg, 20 mg	Arava	1	
methotrexate sodium (pf) injection solution 1 gm/40ml, 100 mg/4ml, 200 mg/8ml, 250 mg/10ml, 50 mg/2ml		1	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml		1	
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION 135 MCG/0.5ML, 180 MCG/0.5ML		5	PA
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML		5	PA
PEG-INTRON REDIPEN SUBCUTANEOUS KIT 150 MCG/0.5ML, 50 MCG/0.5ML		5	PA
PEGINTRON SUBCUTANEOUS KIT 120 MCG/0.5ML, 80 MCG/0.5ML		5	PA
RIDAURA ORAL CAPSULE 3 MG		3	
Inflammatory Bowel Disease Agents [Enfermedad Inflamatoria Intestinal]			
Aminosalicylates [Aminosalicilatos]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.375 GM		3	
balsalazide disodium oral capsule 750 mg	Colazal	1	
CANASA RECTAL SUPPOSITORY 1000 MG		2	
DELZICOL ORAL CAPSULE DELAYED RELEASE 400 MG		2	
DIPENTUM ORAL CAPSULE 250 MG		3	
LIALDA ORAL TABLET DELAYED RELEASE 1.2 GM	Mesalamine	2	
mesalamine oral tablet delayed release 800 mg	Asacol HD	1	
mesalamine rectal enema 4 gm		1	
mesalamine-cleanser rectal kit 4 gm	Rowasa	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG		2	
SFROWASA RECTAL ENEMA 4 GM/60ML		3	
Glucocorticoids [Glucocorticoides]			
budesonide oral capsule delayed release particles 3 mg	Entocort EC	1	
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR 9 MG		3	PA
Sulfonamides [Sulfonamidas]			
sulfasalazine oral tablet 500 mg	Azulfidine	1	
sulfasalazine oral tablet delayed release 500 mg	Azulfidine EN- tabs	1	
Metabolic Bone Disease Agents [Enfermedad Del Metabolismo Del Hueso]			
Metabolic Bone Disease Agents [Enfermedad Del Metabolismo Del Hueso]			
alendronate sodium oral solution 70 mg/75ml		1	ST
alendronate sodium oral tablet 10 mg, 35 mg, 40 mg, 5 mg, 70 mg	Fosamax	1	
calcitonin (salmon) nasal solution 200 unit/act	Miacalcin	1	QL (3.7 ML per 30 days)
calcitriol intravenous solution 1 mcg/ml		1	
calcitriol oral capsule 0.25 mcg, 0.5 mcg	Rocaltrol	1	
calcitriol oral solution 1 mcg/ml	Rocaltrol	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg	Hectorol	1	PA
etidronate disodium oral tablet 200 mg, 400 mg		1	
FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML		4	PA; QL (2.4 ML per 30 days)
FOSAMAX PLUS D ORAL TABLET 70-2800 MG-UNIT, 70-5600 MG-UNIT		3	ST
ibandronate sodium intravenous solution 3 mg/3ml	Boniva	4	PA
ibandronate sodium oral tablet 150 mg	Boniva	1	ST
MIACALCIN INJECTION SOLUTION 200 UNIT/ML		3	
paricalcitol intravenous solution 2 mcg/ml, 5 mcg/ml	Zemplar	1	PA
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	Zemplar	1	PA
PROLIA SUBCUTANEOUS SOLUTION 60 MG/ML		5	PA; QL (1 ML per 180 days)
risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg	Actonel	1	ST
risedronate sodium oral tablet delayed release 35 mg	Atelvia	1	ST
zoledronic acid intravenous solution 5 mg/100ml	Reclast	4	PA; QL (100 ML per 365 days)
Miscellaneous [Misceláneos]			
Miscellaneous [Misceláneos]			
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML		5	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16 MG/2ML		5	
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 48 MG/6ML		5	
Ophthalmic Agents [Oftálmicos]			
Anti-Allergy Agents [Antialérgicos]			
azelastine hcl ophthalmic solution 0.05 %		1	ST
cromolyn sodium ophthalmic solution 4 %		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
EMADINE OPHTHALMIC SOLUTION 0.05 %		3	ST
ketotifen fumarate ophth soln 0.025%	Zaditor	OTC	
LASTACAFT OPHTHALMIC SOLUTION 0.25 %		3	ST
olopatadine hcl ophthalmic solution 0.1 %	Patanol	1	
olopatadine hcl ophthalmic solution 0.2 %	Pataday	1	ST
ZADITORError! Bookmark not defined. SOLUTION 0.025 % OPHTHALMIC		OTC	
Antibacterials [Antibacterianos]			
bacitracin ophthalmic ointment 500 unit/gm		1	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	Polycin	1	
bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %	Neo-Polycin HC	1	
BESIVANCE OPHTHALMIC SUSPENSION 0.6 %		3	
BLEPHAMIDE OPHTHALMIC SUSPENSION 10-0.2 %		3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT 10-0.2 %		3	
CILOXAN OPHTHALMIC OINTMENT 0.3 %		3	
ciprofloxacin hcl ophthalmic solution 0.3 %	Ciloxan	1	
erythromycin ophthalmic ointment 5 mg/gm		1	
gatifloxacin ophthalmic solution 0.5 %	Zymaxid	1	
gentamicin sulfate ophthalmic ointment 0.3 %	Gentak	1	
gentamicin sulfate ophthalmic solution 0.3 %		1	
levofloxacin ophthalmic solution 0.5 %		1	
MOXEZA OPHTHALMIC SOLUTION 0.5 %		2	
moxifloxacin hcl ophthalmic solution 0.5 %	Vigamox	1	
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	Neo-Polycin	1	
neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1	Maxitrol	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	Maxitrol	1	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	Neosporin	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1		1	
ofloxacin ophthalmic solution 0.3 %	Ocuflax	1	
polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%	Polytrim	1	
PRED-G OPHTHALMIC SUSPENSION 0.3-1 %		3	
PRED-G S.O.P. OPHTHALMIC OINTMENT 0.3-0.6 %		3	
sulfacetamide-prednisolone ophthalmic solution 10-0.23 %		1	
TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 %		3	
TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 %		3	
tobramycin ophthalmic solution 0.3 %	Tobrex	1	
tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %	TobraDex	1	
TOBREX OPHTHALMIC OINTMENT 0.3 %		3	
Antiglaucoma Agents [Antiglaucoma]			
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %		2	
apraclonidine hcl ophthalmic solution 0.5 %	Iopidine	1	
AZOPT OPHTHALMIC SUSPENSION 1 %		2	ST
betaxolol hcl ophthalmic solution 0.5 %		1	
BETIMOL OPHTHALMIC SOLUTION 0.25 %, 0.5 %		3	
BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 %		3	
brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	Alphagan P	1	
carteolol hcl ophthalmic solution 1 %		1	
COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 %		2	
COSOPT PF OPHTHALMIC SOLUTION 22.3-6.8 MG/ML		3	
dorzolamide hcl ophthalmic solution 2 %	Trusopt	1	
dorzolamide hcl-timolol mal ophthalmic solution 22.3-6.8 mg/ml	Cosopt	1	
IOPIDINE OPHTHALMIC SOLUTION 1 %		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
levobunolol hcl ophthalmic solution 0.5 %	Betagan	1	
metipranolol ophthalmic solution 0.3 %		1	
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED 0.125 %		3	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	Isopto Carpine	1	
SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 %		2	
timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %	Timoptic-XE	1	
timolol maleate ophthalmic solution 0.25 %, 0.5 %	Timoptic	1	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %, 0.5 %		3	
Antiinflammatories [Antiinflamatorios]			
ACUVAIL OPHTHALMIC SOLUTION 0.45 %		3	
ALREX OPHTHALMIC SUSPENSION 0.2 %		3	
dexamethasone sodium phosphate ophthalmic solution 0.1 %		1	
diclofenac sodium ophthalmic solution 0.1 %		1	
DUREZOL OPHTHALMIC EMULSION 0.05 %		3	
FLAREX OPHTHALMIC SUSPENSION 0.1 %		3	
fluorometholone ophthalmic suspension 0.1 %	FML Liquifilm	1	
flurbiprofen sodium ophthalmic solution 0.03 %		1	
FML FORTE OPHTHALMIC SUSPENSION 0.25 %		3	
FML OPHTHALMIC OINTMENT 0.1 %		3	
ILEVRO OPHTHALMIC SUSPENSION 0.3 %		2	
ketorolac tromethamine ophthalmic solution 0.4 %	Acular LS	1	
ketorolac tromethamine ophthalmic solution 0.5 %	Acular	1	
LOTEMAX OPHTHALMIC GEL 0.5 %		3	
LOTEMAX OPHTHALMIC OINTMENT 0.5 %		3	
LOTEMAX OPHTHALMIC SUSPENSION 0.5 %		3	
MAXIDEX OPHTHALMIC SUSPENSION 0.1 %		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
NEVANAC OPHTHALMIC SUSPENSION 0.1 %		2	
PRED MILD OPHTHALMIC SUSPENSION 0.12 %		3	
prednisolone acetate ophthalmic suspension 1 %	Omnipred	1	
prednisolone sodium phosphate ophthalmic solution 1 %		1	
PROLENSA OPHTHALMIC SOLUTION 0.07 %		3	
Ophthalmic Agents, Others [Oftálmicos, Otros]			
NATACYN OPHTHALMIC SUSPENSION 5 %		3	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %		3	PA; QL (5.5 EA per 28 days)
RESTASIS OPHTHALMIC EMULSION 0.05 %		3	PA; QL (30 EA per 15 days)
trifluridine ophthalmic solution 1 %	Viroptic	1	
XIIDRA OPHTHALMIC SOLUTION 5 %		3	PA
Prostaglandins And Prostamides [Prostaglandinas Y Prostamidas]			
latanoprost ophthalmic solution 0.005 %	Xalatan	1	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %		2	
TRAVATAN Z OPHTHALMIC SOLUTION 0.004 %		2	
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 %		3	
Otic Agents [Óticos]			
Antibacterials [Antibacterianos]			
CIPRO HC OTIC SUSPENSION 0.2-1 %		3	
CIPRODEX OTIC SUSPENSION 0.3-0.1 %		2	
ciprofloxacin hcl otic solution 0.2 %	Cetraxal	1	
COLY-MYCIN S OTIC SUSPENSION 3.3-3-10-0.5 MG/ML		3	
neomycin-polymyxin-hc otic solution 3.5-10000-1	Cortisporin	1	
neomycin-polymyxin-hc otic suspension 3.5-10000-1		1	
ofloxacin otic solution 0.3 %	Floxin Otic	1	
Antiinflammatories [Antiinflamatorios]			
fluocinolone acetonide otic oil 0.01 %	DermOtic	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
hydrocortisone-acetic acid otic solution 1-2 %	Acetasol HC	1	
Otic, Miscellaneous [Óticos, Misceláneos]			
acetic acid otic solution 2 %		1	
acetic acid-aluminum acetate otic solution 2 %		1	
Respiratory Tract/Pulmonary Agents [Tracto Respiratorio]			
Antihistamines [Antihistamínicos]			
ALLEGRA ORAL TAB 180 MG, 60 MG; ORAL SUSP 30 MG/5ML		OTC	
ALLEGRA-D ORAL TAB SR 12HR 180-240 MG, 60-120 MG		OTC	
azelastine hcl nasal solution 0.1 %		1	
azelastine hcl nasal solution 0.15 %	Astupro	1	
cetirizine hcl oral cap 10 mg; oral tab 10 mg, 5 mg; oral chew tab 10 mg, 5mg; oral syrup 1 mg/ml; oral soln 1 mg/ml	ZyrTEC	OTC	
cetirizine-pseudoephedrine oral tab sr 12hr 5-120 mg	ZyrTEC	OTC	
cetirizine hcl oral syrup 1 mg/ml	ZyrTEC	1	ST
CLARINEX ORAL SYRUP 0.5 MG/ML		3	ST
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 2.5-120 MG		3	ST
CLARITIN ORAL CAP 10 MG; ORAL TAB 10 MG; ORAL CHEW TAB 5 MG; ORAL SYRUP 5 MG/5ML; ORALLY DISINTEGRATING TAB 5 MG; RAPIDLY DISINTEGRATING TAB 10 MG		OTC	
CLARITIN-D ORAL TAB SR 12HR 10-240 MG, 5-120 MG		OTC	
ciproheptadine hcl oral syrup 2 mg/5ml		1	
ciproheptadine hcl oral tablet 4 mg		1	
desloratadine oral tablet 5 mg	Claritinex	1	ST
desloratadine oral tablet dispersible 2.5 mg, 5 mg	Claritinex	1	ST
DYMISTA NASAL SUSPENSION 137-50 MCG/ACT		2	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
fexofenadine oral tab 180 mg, 60 mg; oral susp 30 mg/5ml	Allegra	OTC	
fexofenadine-pseudoephedrine oral tab sr 12hr 180-240 mg, 60-120 mg	Allegra-D	OTC	
levocetirizine dihydrochloride oral solution 2.5 mg/5ml	Xyzal	OTC	
levocetirizine dihydrochloride oral tablet 5 mg	Xyzal	OTC	
levocetirizine dihydrochloride oral solution 2.5 mg/5ml	Xyzal	1	ST
levocetirizine dihydrochloride oral tablet 5 mg	Xyzal	1	ST
loratadine oral cap 10 mg; oral tab 10 mg; oral chew tab 5 mg; oral syrup 5 mg/5ml; orally disintegrating tab 5 mg; rapidly disintegrating tab 10 mg	Claritin	OTC	
loratadine-pseudoephedrine oral tab sr 12hr 10-240 mg, 5-120 mg	Claritin-D	OTC	
olopatadine hcl nasal solution 0.6 %	Patanase	1	
pharbedryl oral capsule 50 mg		1	
TUSNEL ORAL CAPSULE 2-15-200 MG		3	
ZYRTEC ORAL CAP 10 MG; ORAL TAB 10 MG, 5 MG; ORAL CHEW TAB 10 MG, 5MG; ORAL SYRUP 1 MG/ML; ORAL SOLN 1 MG/ML; ORALLY DISINTEGRATING TAB 10 MG		OTC	
ZYRTEC-D ORAL TAB SR 12HR 5-120 MG		OTC	
Anti-Inflammatories, Inhaled Corticosteroids [Anti-Inflamatorios, Corticosteroides Inhalados]			
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE		2	
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT		2	
AEROSPAN INHALATION AEROSOL SOLUTION 80 MCG/ACT		3	ST
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT		2	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ASMANEX 30 METERED DOSES INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH		3	ST
ASMANEX 7 METERED DOSES INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/INH		3	ST
ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 200 MCG/ACT		3	ST
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/INH, 200-25 MCG/INH		2	
budesonide inhalation suspension 0.25 mg/2ml	Pulmicort	1	
budesonide inhalation suspension 0.5 mg/2ml	Pulmicort	1	
budesonide inhalation suspension 1 mg/2ml	Pulmicort	1	
budesonide nasal suspension 32 mcg/act	Rhinocort	OTC	
budesonide nasal suspension 32 mcg/act	Rhinocort Aqua	1	
DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT		3	
FLONASE SENSIMIST SUSPENSION 27.5 MCG/SPRAY NASAL		OTC	
FLONASE ALLERGY RELIEF SUSPENSION 50 MCG/ACT NASAL		OTC	
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BLIST, 250 MCG/BLIST, 50 MCG/BLIST		2	
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT		2	
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT		2	
flunisolide nasal solution 25 mcg/act (0.025%)		1	
fluticasone propionate nasal suspension 50 mcg/act		OTC	
fluticasone propionate nasal suspension 50 mcg/act	Flonase	1	
mometasone furoate nasal suspension 50 mcg/act	Nasonex	1	ST

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
NASACORT ALLERGY 24HR AEROSOL 55 MCG/ACT NASAL		OTC	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT, 90 MCG/ACT		3	ST
QNASL CHILDRENS NASAL AEROSOL SOLUTION 40 MCG/ACT		3	ST
QNASL NASAL AEROSOL SOLUTION 80 MCG/ACT		3	ST
QVAR INHALATION AEROSOL SOLUTION 40 MCG/ACT		2	
QVAR INHALATION AEROSOL SOLUTION 80 MCG/ACT		2	
RHINOCORT NASAL SUSPENSION 32 MCG/ACT		OTC	
SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT		2	
triamcinolone acetonide nasal aerosol 55 mcg/act	Nasacort	OTC	
triamcinolone acetonide nasal aerosol 55 mcg/act	Nasacort	1	
VERAMYST NASAL SUSPENSION 27.5 MCG/SPRAY		3	ST
Antileukotrienes [Antileukotrienos]			
montelukast sodium oral packet 4 mg	Singulair	1	
montelukast sodium oral tablet 10 mg	Singulair	1	
montelukast sodium oral tablet chewable 4 mg, 5 mg	Singulair	1	
zafirlukast oral tablet 10 mg, 20 mg	Accolate	1	
Bronchodilators, Anticholinergic [Broncodilatadores, Anticolinérgicos]			
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/INH		3	
ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT		3	
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT		2	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT		3	
ipratropium bromide inhalation solution 0.02 %		1	
ipratropium bromide nasal solution 0.03 %		1	
ipratropium bromide nasal solution 0.06 %		1	
ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml		1	
SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG		2	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT		2	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT		2	
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT		2	QL (1 EA per 30 days)
Bronchodilators, Phosphodiesterase Inhibitors (Xanthines) [Broncodilatadores, Inhibidores De La Fosfodiesterasa (Xantinas)]			
terbutaline sulfate oral tablet 2.5 mg, 5 mg		1	
Bronchodilators, Sympathomimetic [Broncodilatadores, Simpatomiméticos]			
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%		1	
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%		1	
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml		1	
albuterol sulfate oral syrup 2 mg/5ml		1	
albuterol sulfate oral tablet 2 mg, 4 mg		1	
epinephrine injection solution auto-injector 0.15 mg/0.3ml	EpiPen Jr	1	
epinephrine injection solution auto-injector 0.3 mg/0.3ml	EpiPen	1	
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/3ml	Xopenex	1	
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	Xopenex Concentrate	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
levalbuterol tartrate inhalation aerosol 45 mcg/act	Xopenex HFA	1	
PROAIR HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT		2	
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT		2	
PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT		2	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/DOSE		3	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT		2	
Cystic Fibrosis Agents [Agentes Para Fibrosis Quistica]			
BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML		5	PA
TOBI PODHALER INHALATION CAPSULE 28 MG		5	PA
tobramycin inhalation nebulization solution 300 mg/5ml	Tobi	4	PA
Mast Cell Stabilizers [Estabilizadores De Mastocitos]			
cromolyn sodium inhalation nebulization solution 20 mg/2ml		1	
Phosphodiesterase Inhibitors, Airways Disease [Inhibidores De Fosfodiesterasa]			
aminophylline intravenous solution 25 mg/ml		1	
difil-g forte oral liquid 100-100 mg/5ml		1	
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15ML		3	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 400 MG		3	
theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg	Theochron	1	
theophylline er oral tablet extended release 12 hour 450 mg		1	
theophylline er oral tablet extended release 24 hour 400 mg, 600 mg		1	
Pulmonary Antihypertensives [Anti-Hipertensivos Pulmonales]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
ADCIRCA ORAL TABLET 20 MG		5	PA
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG		4	PA
epoprostenol sodium intravenous solution reconstituted 0.5 mg	Veletri	4	PA
epoprostenol sodium intravenous solution reconstituted 1.5 mg	Flolan	4	PA
LETAIRIS ORAL TABLET 10 MG, 5 MG		4	PA
OPSUMIT ORAL TABLET 10 MG		4	PA
REMODULIN INJECTION SOLUTION 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML		5	PA
sildenafil citrate oral tablet 20 mg	Revatio	4	PA
TRACLEER ORAL TABLET 125 MG, 62.5 MG		5	PA
TYVASO STARTER INHALATION SOLUTION 0.6 MG/ML		5	PA
VENTAVIS INHALATION SOLUTION 10 MCG/ML, 20 MCG/ML		5	PA
Respiratory Tract Agents, Others [Tracto Respiratorio, Otros]			
acetylcysteine inhalation solution 10 %		1	
acetylcysteine inhalation solution 20 %		1	
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG		5	PA
benzonataate oral capsule 100 mg, 200 mg	Tessalon Perles	1	
biotuss oral liquid 10-15-300 mg/5ml		1	
biotuss pediatric oral liquid 2.5-5-50 mg/ml		1	
DECON-A ORAL ELIXIR 2-5 MG/5ML		3	
ESBRIET ORAL CAPSULE 267 MG		5	PA
ESBRIET ORAL TABLET 267 MG, 801 MG		5	PA
GILPHEX TR ORAL TABLET 10-388 MG		3	
giltuss oral liquid 10-28-388 mg/5ml		1	
giltuss pediatric oral liquid 2.5-7.5-88 mg/ml		1	
GILTUSS TR ORAL TABLET 10-28-388 MG		3	
GLASSIA INTRAVENOUS SOLUTION 1000 MG/50ML		5	PA

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
hydrocod polst-cpm polst er oral suspension extended release 10-8 mg/5ml	Tussionex	1	
NEOTUSS PLUS ORAL LIQUID 7.5-4-30 MG/5ML		3	
NORTUSS-EX ORAL LIQUID 20-200 MG/5ML		3	
OFEV ORAL CAPSULE 100 MG, 150 MG		5	PA
promethazine-codeine oral syrup 6.25-10 mg/5ml		1	
promethazine-dm oral syrup 6.25-15 mg/5ml		1	
promethazine-phenyleph-codeine oral syrup 6.25-5-10 mg/5ml		1	
pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml	Bromfed DM	1	
PULMOZYME INHALATION SOLUTION 1 MG/ML		5	PA
SEMPREX-D ORAL CAPSULE 8-60 MG		3	
sodium chloride inhalation nebulization solution 0.9 %		1	
TYZINE NASAL SOLUTION 0.05 %		3	
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG		5	PA
Skeletal Muscle Relaxants [Relajantes Musculoesqueléticos]			
Skeletal Muscle Relaxants [Relajantes Musculoesqueléticos]			
carisoprodol oral tablet 250 mg, 350 mg	Soma	1	
chlorzoxazone oral tablet 500 mg	Parafon Forte DSC	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg		1	
metaxalone oral tablet 800 mg	Metaxall	1	
methocarbamol oral tablet 500 mg	Robaxin	1	
methocarbamol oral tablet 750 mg	Robaxin-750	1	
orphenadrine citrate er oral tablet extended release 12 hour 100 mg		1	
orphenadrine citrate injection solution 30 mg/ml		1	
Sleep Disorder Agents [Desordenes Del Sueño]			
GABA Receptor Modulators [Moduladores Del Receptor De GABA]			

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
estazolam oral tablet 1 mg, 2 mg		1	QL (1 TAB per 1 day)
eszopiclone oral tablet 1 mg, 2 mg, 3 mg	Lunesta	1	QL (1 TAB per 1 day)
flurazepam hcl oral capsule 15 mg, 30 mg		1	QL (1 CAP per 1 day)
temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg	Restoril	1	QL (1 CAP per 1 day)
triazolam oral tablet 0.125 mg	Halcion	1	QL (1 TAB per 1 day)
triazolam oral tablet 0.25 mg	Halcion	1	QL (2 TAB per 1 day)
zaleplon oral capsule 10 mg	Sonata	1	QL (2 CAP per 1 day)
zaleplon oral capsule 5 mg	Sonata	1	QL (1 CAP per 1 day)
zolpidem tartrate er oral tablet extended release 12.5 mg, 6.25 mg	Ambien CR	1	ST; QL (1 TAB per 1 day)
zolpidem tartrate oral tablet 10 mg, 5 mg	Ambien	1	QL (1 TAB per 1 day)
zolpidem tartrate sublingual tablet sublingual 1.75 mg, 3.5 mg	Intermezzo	1	QL (1 TAB per 1 day)
Sleep Disorder, Other [Desórdenes Del Sueño, Otros]			
dexmedetomidine hcl intravenous solution 200 mcg/2ml	Precedex	1	
modafinil oral tablet 100 mg, 200 mg	Provigil	1	PA
ROZEREM ORAL TABLET 8 MG		3	QL (1 TAB per 1 day)
SILENOR ORAL TABLET 3 MG, 6 MG		3	QL (1 TAB per 1 day)
XYREM ORAL SOLUTION 500 MG/ML		5	PA
Therapeutic Nutrients/Minerals/Electrolytes [Nutrientes Terapéuticos/Minerales/Electrolitos]			
Antidotes [Antídotos]			
sodium polystyrene sulfonate oral powder	Kionex	1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
sodium polystyrene sulfonate oral suspension 15 gm/60ml	Kionex	1	
sodium polystyrene sulfonate rectal suspension 50 gm/200ml		1	
Electrolyte/Mineral Replacement [Remplazo De Electrolitos/Minerales]			
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ		3	
KLOR-CON ORAL PACKET 25 MEQ		3	
levocarnitine intravenous solution 200 mg/ml	Carnitor	1	
levocarnitine oral solution 1 gm/10ml	Carnitor	1	
levocarnitine oral tablet 330 mg	Carnitor	1	
magnesium sulfate injection solution 50 %		1	
phospha 250 neutral oral tablet 155-852-130 mg		1	
pot bicarb-pot chloride oral tablet effervescent 25 meq		1	
potassium bicarbonate oral tablet effervescent 25 meq	K-Prime	1	
potassium chloride crys er oral tablet extended release 10 meq	Klor-Con M10	1	
potassium chloride crys er oral tablet extended release 20 meq	Klor-Con M20	1	
potassium chloride er oral capsule extended release 10 meq	Klor-Con Sprinkle	1	
potassium chloride er oral capsule extended release 8 meq	Micro-K	1	
potassium chloride er oral tablet extended release 10 meq	K-Tab	1	
potassium chloride er oral tablet extended release 8 meq	Klor-Con	1	
potassium chloride intravenous solution 0.4 meq/ml, 10 meq/100ml, 2 meq/ml, 20 meq/100ml, 40 meq/100ml		1	
potassium chloride oral packet 20 meq		1	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)		1	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
sodium chloride injection solution 0.9 %, 2.5 meq/ml		1	
sodium chloride intravenous solution 0.45 %, 0.9 %		1	
sodium chloride irrigation solution 0.9 %	Curity Sterile Saline	1	
Electrolytes/Minerals Modifiers [Modificadores De Enzimas/Modificadores]			
CHEMET ORAL CAPSULE 100 MG		3	
deferoxamine mesylate injection solution reconstituted 500 mg	Desferal	4	PA
EXJADE ORAL TABLET SOLUBLE 125 MG, 250 MG, 500 MG		5	PA
FERRIPROX ORAL SOLUTION 100 MG/ML		5	PA
FERRIPROX ORAL TABLET 500 MG		5	PA
JADENU ORAL TABLET 180 MG, 360 MG, 90 MG		5	PA
JADENU SPRINKLE ORAL PACKET 180 MG, 360 MG, 90 MG		5	PA
Vitamins [Vitaminas]			
aminobenzoate potassium oral packet 2 gm		1	
AQUASOL A INTRAMUSCULAR SOLUTION 50000 UNIT/ML		3	
ascorbic acid injection solution 500 mg/ml		1	
b complex vitamins injection solution		1	
b-plex oral tablet	Milco-B-Forte	1	
corvita oral tablet 1.25 mg		1	
DIALYVITE 3000 ORAL TABLET 3 MG		3	
DIALYVITE 5000 ORAL TABLET 5 MG		3	
DIALYVITE/ZINC ORAL TABLET		3	
FOLBEE PLUS CZ ORAL TABLET 5 MG		3	
folbee plus oral tablet		1	
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION		3	
M.V.I. ADULT INTRAVENOUS INJECTABLE		3	
M.V.I. PEDIATRIC INTRAVENOUS SOLUTION RECONSTITUTED		3	

Drug Name (Nombre del Medicamento)	Reference (Referencia)	Level (Nivel)	Instructions (Instrucciones)
MEPHYTON ORAL TABLET 5 MG		3	
multivitamin/fluoride oral solution 0.25 mg/ml	Floriva Plus	1	
multi-vitamin/fluoride/iron oral solution 0.25-10 mg/ml		1	
mvc-fluoride oral tablet chewable 0.5 mg		1	
mynephrocaps oral capsule 1 mg		1	
nephronex oral tablet		1	
NUTRIVIT ORAL LIQUID		3	
phytonadione injection solution 1 mg/0.5ml		1	
POTABA ORAL CAPSULE 500 MG		3	
pyridoxine hcl injection solution 100 mg/ml		1	
RENATABS ORAL TABLET 1 MG		3	
RENATABS WITH IRON ORAL 1 & 100 MG		3	
sodium ascorbate injection solution 250 mg/ml	Ortho-CS 250	1	
SUPERVITE ORAL LIQUID	Biotalan Clear	3	
SUPPORT ORAL LIQUID		3	
SUPPORT 500 ORAL CAPSULE		3	
thiamine hcl injection solution 100 mg/ml		1	
TL G-FOL OS ORAL TABLET 500-1.1 MG		3	
TRI-VIT/FLUORIDE/IRON ORAL SOLUTION 0.25-10 MG/ML		3	
tri-vitamin/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml		1	
urosex oral tablet		1	
vic-forte oral capsule		1	
vit b3-azelac-turm-fa-b6-zn-cu oral tablet		1	
VITAFOL ORAL TABLET		3	
VITAL-D RX ORAL TABLET 1 MG		3	
vitamin d (ergocalciferol) oral capsule 50000 unit	Drisdol	1	
vitamin k1 injection solution 10 mg/ml		1	

Parte III – Apéndices / Part III - Appendixes

Apéndice I – Terapias Escalonadas / Appendix I – Step Therapies

ST Description	System will search use of Step 1 drugs for	STEP	Drugs
ADHD - Non Stimulant	30 days in 365 days	STEP 1	Amphetamines
			Dexmethylphenidate
			Methylphenidate
		STEP 2	Atomoxetine / Strattera
ADHD - Stimulants	30 days in 365 days	STEP 1	Amphetamine
			Amphetamine-Dextroamphetamine IR
			Dexmethylphenidate
			Dextroamphetamine
			Methamphetamine
			Methylphenidate
		STEP 2	Amphetamine-Dextroamphetamine / Adderall XR
			Lisdexamfetamine Dimesylate / Vyvanse
Amlodipine/Olmesartan; Amlodipine/Valsartan; Amlodipine/Valsartan HCT	30 days in 365 days	STEP 1	ACE Inhibitors
			Angiotensin II Recetor Antagonists
			Dihydropyridine CCB
			Diurectics
		STEP 2	Amlodipine-Olmesartan / Azor
			Amlodipine-Valsartan / Exforge
			Amlodipine-Valsartan-Hydrochlorothiazide / Exforge HCT
ARB	30 days in 365 days	STEP 1	Irbesartan +/- htcz
			Losartan +/- htcz
			Valsartan +/- htcz 1st
		STEP 2	Azilsartan / Edarbi
			Azilsartan-Chlorthalidone / Edarbyclor
			Candesartan / Atacand
			Candesartan-Hydrochlorothiazide / Atacand HCT
			Olmesartan / Benicar
			Olmesartan-Hydrochlorothiazide / Benicar HCT
			Telmisartan / Micardis
			Telmisartan-Hydrochlorothiazide / Micardis HCT
Brinzolamide	15 days in 365 days	STEP 1	Dorzolamide

ST Description	System will search use of Step 1 drugs for	STEP	Drugs
		STEP 2	Brinzolamide / Azopt
Budesonide Inhal	1 prescription in 365 days	STEP 1	Arnuity Ellipta
			Flovent
			Qvar
		STEP 2	Budesonide Inhal Aero Powd / Pulmicort
Carvedilol SR	30 days in 365 days	STEP 1	Carvedilol IR
		STEP 2	Carvedilol Phosphate Cap SR / Coreg CR
Celecoxib	15 days in 365 days	STEP 1	Nonsteroidal Anti-Inflammatory Agents (NSAIDs)**
		STEP 2	Celecoxib / Celebrex
Desvenlafaxine	30 days in 365 days	STEP 1	Duloxetine
			Venlafaxine
		STEP 2	Desvenlafaxine Succinate Tab SR / Pristiq
			Desvenlafaxine Tab SR / Khedezla
DPP-4	60 days in 365 days	STEP 1	Biguanides
			Sulfonylureas
			Glitazones
		STEP 2	Alogliptin / Nesina
			Alogliptin-Metformin / Kazano
			Linagliptin / Tradjenta
			Linagliptin-Metformin / Jentadueto / Jentadueto XR
			Saxagliptin / Onglyza
			Saxagliptin-Metformin / Kombiglyze XR
			Sitagliptin / Januvia
			Sitagliptin-Metformin / Janumet / Janumet XR
DPP-4 & SGLT-2	60 days in 365 days	STEP 1	DPP-4 (eg. Empagliflozin)
			SGLT-2 (eg. Linagliptin)
		STEP 2	Empagliflozin-Linagliptin / Glyxambi
Dronedarone	30 days in 365 days	STEP 1	Amiodarone
		STEP 2	Dronedarone / Multaq
Eplerenone	30 days in 365 days	STEP 1	Spironolactone
			Spironolactone & Hydrochlorothiazide
		STEP 2	Eplerenone / Inspira
Ezetimibe	60 days in 365 days	STEP 1	Statins (eg. atorvastatin, lovastatin, rosuvastatin, pravastatin, simvastatin)
		STEP 2	Ezetimibe / Zetia
Flunisolide HFA Inhal	1 prescription in 365	STEP 1	Arnuity Ellipta

ST Description	System will search use of Step 1 drugs for	STEP	Drugs
	days	STEP 1	Flovent
			Qvar
			STEP 2 Flunisolide / Aerospan
Fluoxetine DR	30 days in 365 days	STEP 1	Fluoxetine
		STEP 2	Fluoxetine HCl Cap Delayed Release / Prozac Weekly
Glitazones	60 days in 365 days	STEP 1	Biguanides
			Sulfonylureas
		STEP 2	Pioglitazone / Actos
			Pioglitazone HCl-Glimepiride / Duetact
			Pioglitazone HCl-Metformin / Actoplus met / Actoplus met XT
GLP-1	60 days in 365 days	STEP 1	Biguanides
			Glitazones
			Sulfonylureas
		STEP 2	Dulaglutide / Trulicity
			Exenatide Extended Release / Bydureon
			Exenatide / Byetta
			Liraglutide / Victoza
Levetiracetam (SR)	30 days in 365 days	STEP 1	Levetiracetam
		STEP 2	Levetiracetam Tab SR / Keppra XR
Long Acting Opioids	7 days in 15 days	STEP 1	Short Acting opioids
		STEP 2	Fentanyl TD Patch / Duragesic
Memantine SR	30 days in 365 days	STEP 1	Memantine
		STEP 2	Memantine HCl Cap SR / Namenda XR
Metformin Osmotic /Modified Release	30 days in 365 days	STEP 1	Metformin
		STEP 2	Metformin HCl Tab SR 24HR Osmotic / Fortamet
Miglitol	60 days in 365 days	STEP 1	Acarbose
		STEP 2	Miglitol / Glyset
Mirabegron	30 days in 365 days	STEP 1	Urinary Antispasmodic - Antimuscarinics (Oxybutinin, Tolterodine)
		STEP 2	Mirabegron Tab SR / Myrbetriq
Mometasone Furoate Inhal	1 prescription in 365 days	STEP 1	Arnuity Ellipta
			Flovent
			Qvar
		STEP 2	Mometasone Furoate Inhal Aerosol Suspension/ Asmanex HFA
			Mometasone Furoate Inhal Powd / Asmanex
Nasal Corticosteroid	1 prescription in 365	STEP 1	Budesonide

ST Description	System will search use of Step 1 drugs for	STEP	Drugs
	days		Flunisolide Fluticasone Propionate Triamcinolone Acetonide OTCs (Budesonide / Rhinocort, Fluticasone / Flonase Allergy or Flonase Sensymist, Triamcinolone / Nasacort)
		STEP 2	Beclomethasone Dipropionate Nasal Aerosol / Qnasl Mometasone Furoate Nasal Susp / Nasonex Veramyst
Nebivolol	30 days in 365 days	STEP 1	Alpha-Beta Blockers Beta Blockers Cardio-Selective
		STEP 2	Nebivolol / Bystolic
Non-Sedating Antihistamines	15 days in 365 days	STEP 1	OTCs (Loratadine / Claritin, Loratadine-PSE, Claritin-D, Fexofenadine / Allegra, Fexofenadine-PSE / Allegra-D, Cetirizine / Zyrtec, Cetirizine-PSE / Zyrtec-D, Levocetirizine / Xyzal)
		STEP 2	Desloratadine & Pseudoephedrine Tab SR / Clarinex D Desloratadine / Clarinex Cetirizine HCl Oral Soln / Zyrtec Levocetirizine / Xyzal
Ocular Allergies	15 days in 365 days	STEP 1	OTCs (Ketotifen / Zaditor) Olopatadine Ophth Soln 0.1 %
		STEP 2	Alcaftadine / Lastacift Azelastine / Optivar Emedastine / Emadine Olopatadine / Pataday
Oral biphosphonates	28 days in 365 days	STEP 1	Alendronate Tab
		STEP 2	Alendronate Oral Soln / Fosamax Alendronate -Cholecalciferol / Fosamax Plus D Ibandronate / Boniva Risedronate / Actonel Risedronate / Atelvia
Paliperidone palmitate (Trinza)	120 days in 365 days	STEP 1	Paliperidone Palmitate IM / Invega Sustenna
		STEP 2	Paliperidone Palmitate IM / Invega Trinza
Pimecrolimus /	15 days in 365 days	STEP 1	Corticosteroids - Topical**

ST Description	System will search use of Step 1 drugs for	STEP	Drugs
Tacrolimus			Lactic Acid (Ammonium Lactate)
		STEP 2	Pimecrolimus / Elidel
			Tacrolimus / Protopic
PPIs	30 days in 365 days	STEP 1	Lansoprazole Rx Omeprazole Rx Pantoprazole RX OTCs (Lansoprazole / Prevacid OTC, Omeprazole / Prilosec OTC, Esomeprazole / Nexium OTC, Omeprazole-Sodium Bicarbonate / Zegerid OTC)
		STEP 2	Dexlansoprazole C/ Dexilant
			Esomeprazole / Nexium
			Lansoprazole / Prevacid Solutab
			Omeprazole-Sodium Bicarbonate / Zegerid
			Pantoprazole / Protonix Oral Pack
			Rabeprazole / Aciphex
		STEP 1	Anticonvulsants
			Duloxetine
			Tricyclic antidepressants
		STEP 2	Pregabalin / Lyrica
Quetiapine SR	30 days in 365 days	STEP 1	Quetiapine
		STEP 2	Quetiapine Fumarate Tab SR / Seroquel XR
Rasagiline	30 days in 365 days	STEP 1	Selegiline
		STEP 2	Rasagiline Mesylate / Azilect
Repaglinide	60 days in 365 days	STEP 1	Nateglinide
		STEP 2	Repaglinide Tab
Ropinirole SR	30 days in 365 days	STEP 1	Ropinirole
		STEP 2	Ropinirole Hydrochloride Tab SR / Requip XL
Rotigotine	30 days in 365 days	STEP 1	Pramipexole
			Ropinirole
		STEP 2	Rotigotine TD Patch / Neupro
SGLT-2 Inhibitors	60 days in 365 days	STEP 1	Biguanides
			Sulfonylureas
			Glitazones
		STEP 2	Canagliflozin / Invokana
			Canagliflozin-Metformin / Invokamet / Invokamet XR

ST Description	System will search use of Step 1 drugs for	STEP	Drugs
			Empagliflozin / Jardiance Empagliflozin-Metformin / Synjardy / Synjardy XR
Simvastatin 80 mg	360 days in 365 days	STEP 1	Ezetimibe-Simvastatin Tab 10-80 MG Simvastatin Tab 80 MG
		STEP 2	Ezetimibe-Simvastatin Tab 10-80 MG Simvastatin Tab 80 MG
Statins	60 days in 365 days	STEP 1	Atorvastatin Lovastatin Tab IR Pravastatin Rosuvastatin Simvastatin
		STEP 2	Ezetimibe-Simvastatin / Vytorin Fluvastatin / Lescol Fluvastatin Sodium Tab SR / Lescol XL Lovastatin Tab SR / Altopen Pitavastatin Calcium / Livalo
Triptans	30 days in 365 days	STEP 1	Sumatriptan
		STEP 2	Eletriptan / Relpax
Zolpidem	60 days in 365 days	STEP 1	Zaleplon Zolpidem
		STEP 2	Zolpidem Tartrate Tab CR / Ambien CR

Apéndice II – Límites de Especialidad / Appendix II – Specialty Limits (SL)

En el formulario hay medicamentos asociados a las iniciales **SL**. **SL** significa que dichos medicamentos requieren que un especialista evalúe el paciente y los recete. La siguiente tabla muestra cuales son estos productos e indica el especialista que debe prescribirlos.

*The formulary includes drugs associated to the **SL** abbreviation. **SL** means that those medications require that a specialist evaluates the patient and prescribe them. The following table shows which are those products and the specialist that must prescribe them.*

Producto (Product)	Especialista (Specialist)
Antihemophilic & Coagulation Factors	Hematólogo /Hematologist

Apéndice III – Solicitud de Excepción Médica / Appendix III - Medical Exception Application

Nombre del Paciente y Representante Personal (si aplica): _____

Núm. Contrato _____

Núm. de Grupo: _____

Se solicita la aprobación de:

- Medicamento no está incluido en el formulario
- Cubierta continuada para medicamento que se descontinuar
- Excepción a un procedimiento de manejo de medicamento (ei, terapia escalonada)
- Excepción a un procedimiento de limitación de dosis

Razones para la solicitud de excepción médica:

- En el formulario no figura un medicamento clínicamente aceptable para tratar la condición del paciente.
- El medicamento que procede conforme a la terapia escalonada es ineficaz para la condición o el paciente, es probable que cause daño al paciente o ya el paciente se encontraba en un nivel más avanzado bajo otro plan médico.
- La dosis disponible para medicamento probablemente es ineficaz para la condición o el paciente.

Historial breve del paciente:

Diagnóstico primario relacionado con el medicamento de receta objeto de la solicitud (incluya código y descripción):

Descripción de la necesidad médica de medicamento para el cual se solicita la excepción:
(Incluya hoja adicional de ser necesario)

Nombre de la Persona que expide la receta

de Proveedor (NPI)

Firma

Fecha

Forma: CSS-AS-04-00

Índice / Index

A

abacavir sulfate 69
 abacavir sulfate-lamivudine 70
 abacavir-lamivudine-zidovudine... 70
 Abaneu-SL 81
 Abilify 65
 ABILIFY MAINTENA 65
 ABSORICA 95
 acamprosate calcium 39
 ACANYA 96
 acarbose 72
 Acarbose 143
 Accolate 132
 Accupril 83
 Accuretic 83
 ACE Inhibitors 141
 acebutolol hcl 84
 acetaminophen-codeine 35
 acetaminophen-codeine #2 35
 acetaminophen-codeine #3 35
 acetaminophen-codeine #4 35
 Acetasol HC 129
 acetazolamide 87
 acetic acid 129
 acetic acid-aluminum acetate.... 129
 acetylcysteine 135
 Acifex 145
 Aciphex 105
 acitretin 99
 ACTEMRA 122
 Actigall 102
 Actonel 124, 144
 Actoplus met 143
 Actoplus Met 74
 ACTOPLUS MET XR 72
 Actos 74, 143
 Acular 127
 Acular LS 127
 ACUVAIL 127
 acyclovir 68
 acyclovir sodium 68
 ACZONE 95
 ADAGEN 100
 Adalat CC 86
 adapalene 95
 adapalene-benzoyl peroxide 95
 ADCIRCA 135
 Adderall 90, 91, 141
 Adderall XR 90, 141
 ADEMPAS 135
 ADHD - Non Stimulant 141
 ADHD - Stimulants 141
 Adriamycin 59

Adrucil 59
 ADVAIR DISKUS 130
 ADVAIR HFA 130
 ADVATE 77
 adynovate 77
 Aerospan 143
 AEROSSPAN 130
 AFINITOR 60
 AFINITOR DISPERZ 60
 AFSTYLA 77
 Aggrenox 81
 Agrylin 81
 AKYNZEOL 53
 Ala Scalp 112
 ALBENZA 62
 albuterol sulfate 133
 Alcaftadine 144
 alclometasone dipropionate 108
 ALCORTIN A 97
 Aldactazide 87
 ALDACTAZIDE 87
 Aldactone 87
 Aldara 99
 ALDURAZYME 100
 ALECENSA 60
 Alendronate 144
 alendronate sodium 123
 alfuzosin hcl er 106
 ALINIA 62
 Alkeran 58
 Allegra 130, 144
 ALLEGRA 129
 Allegra-D 130, 144
 ALLEGRA-D 129
 allopurinol 11, 23, 54
 almotriptan malate 56
 Alogliptin 142
 alogliptin benzoate 72
 Alogliptin-Metformin 142
 alogliptin-metformin hcl 72
 alosetron hcl 103
 Alphagan P 126
 ALPHAGAN P 126
 ALPHANATE/VWF
 COMPLEX/HUMAN 77
 ALPHANINE SD 77
 alprazolam 71
 alprazolam er 71
 ALPROLIX 77
 ALREX 127
 Altace 83
 Altoprev 146
 ALTOPREV 88
 amantadine hcl 63
 Amaryl 73
 Ambien 137, 146
 Ambien CR 137, 146
 Amerge 57
 AMICAR 80
 amikacin sulfate 40
 amiloride hcl 87
 amiloride-hydrochlorothiazide 87
 aminobenzoate potassium 139
 aminophylline 134
 Amiodarone 142
 amiodarone hcl 83
 AMITIZA 103
 amitriptyline hcl 52
 Amlodipine 141
 amlodipine besy-benazepril hcl 85
 amlodipine besylate 85
 amlodipine besylate-valsartan 85
 amlodipine-atorvastatin 85
 amlodipine-olmesartan 85
 Amlodipine-Olmesartan 141
 Amlodipine-Valsartan 141
 amlodipine-valsartan-hctz 85
 Amlodipine-Valsartan-
 Hydrochlorothiazide 141
 ammonium lactate 98
 Ammonium Lactate 145
 amoxapine 52
 amoxicillin 43
 amoxicillin-pot clavulanate 43, 44
 amoxicillin-pot clavulanate er 43
 Amphetamine 141
 amphetamine-dextroamphetamine 90, 91
 Amphetamine-Dextroamphetamine 141
 Amphetamine-Dextroamphetamine
 IR 141
 Amphetamines 141
 ampicillin 44
 ampicillin sodium 44
 AMPYRA 93
 Anafranil 52
 anagrelide hcl 81
 Analpram HC 102
 Analpram-HC 102
 ANALPRAM-HC 102
 Anaprox DS 34
 ANASCORP 120
 anastrozole 60
 Ancobon 54
 ANDRODERM 114
 AndroGel 115
 ANDROGEL 114
 ANDROGEL PUMP 114
 ANGELIQ 115
 ANORO ELLIPTA 132

Antabuse	39
ANTARA.....	88
Antihemophilic & Coagulation	
Factors	147
antivenin latroductus mactans....	120
antivenin micrurus fulvius.....	120
Anusol-HC.....	102
ANZEMET	53
APEXICON E.....	108
APIDRA	75
APIDRA SOLOSTAR.....	75
APOKYN	63
apraclonidine hcl	126
aprepitant	53
APRISO.....	123
APTIVUS.....	70
AQUASOL A	139
ARALAST NP	135
Arava.....	122
ARCALYST	122
Aricept.....	49
Arimidex	60
ariPIPrazole	65
Arixtra	76
Arnuity Ellipta.....	142, 143
ARNUITY ELLIPTA.....	130
Aromasin	60
Arthrotec.....	33
Asacol HD	123
ascorbic acid.....	139
Asmanex	143
ASMANEX 30 METERED DOSES	131
ASMANEX 7 METERED DOSES	131
Asmanex HFA	143
ASMANEX HFA.....	131
aspirin-dipyridamole er.....	81
Astepro	129
Atacand	82, 141
Atacand HCT	82, 141
Atelvia.....	124, 144
atenolol	84
atenolol-chlorthalidone	84
Ativan.....	72
Atomoxetine	141
ATOMOXETINE HCL	91, 92
Atorvastatin.....	146
atorvastatin calcium.....	88
atovaquone	62
atovaquone-proguanil hcl.....	62
Atralin.....	96
ATRIPLA	70
atropine sulfate.....	101
atropine sulfate (pf).....	101
ATROVENT HFA	132
AUBAGIO	93
Augmentin	43
AUGMENTIN	44

Augmentin ES-600.....	43
Augmentin XR	43
Avalide	82
Avapro	82
Avar Cleanser.....	97
Avar LS Cleanser	97
Avar-e Emollient	97
Avelox	46
Avodart	106
AVONEX	93
AVONEX PEN	93
AVONEX PREFILLED.....	93
Axert.....	56
Axid	103
Axiron.....	115
Aygestin.....	116
azathioprine	118
Azelastine	144
azelastine hcl	124, 129
AZELEX.....	95
Azilect	64, 145
Azilsartan.....	141
Azilsartan-Chlorthalidone.....	141
azithromycin.....	45
Azopt.....	142
AZOPT	126
Azor	85, 141
Azulfidine	123
Azulfidine EN-tabs	123

B

b complex vitamins	139
bacitracin	40, 125
bacitracin-polymyxin b	125
bacitra-neomycin-polymyxin-hc .	125
baclofen	67
Bactrim.....	46
Bactrim DS	46
Bactroban	97
balsalazide disodium	123
Baraclude	67
BARACLUDE	67
BASAGLAR KWIKPEN	75
BEBULIN	77
Beclomethasone	144
BELVIQ	94
BELVIQ XR	94
benazepril hcl.....	83
benazepril-hydrochlorothiazide ..	83
BENEFIX	77
Benicar	82, 141
Benicar HCT	82, 141
BENLYSTA	122
Bentyl	101
BenzaClin with Pump	96
Benzamycin	96
benzonataate	135

benzoyl peroxide-erythromycin	96
benztropine mesylate	63
BESIVANCE	125
Betagan	127
betamethasone dipropionate	108
betamethasone dipropionate aug	108
betamethasone sod phos & acet .	55
betamethasone valerate.....	108
Betapace AF	84
BETASERON	93
betaxolol hcl	84, 126
bethanechol chloride.....	106
BETHKIS	134
BETIMOL	126
BETOPTIC-S	126
BEVESPI AEROSPHERE	132
bexarotene	62
Biaxin	45
Biaxin XL Pac	45
bicalutamide	59
BICILLIN C-R	44
BICILLIN C-R 900/300	44
BICILLIN L-A	44
BiferaRx	80
Biguanides	142, 143, 145
BILTRICIDE	62
bio-statin	53
BIO-STATIN	53
Biotalan Clear	140
biotuss	135
biotuss pediatric	135
bisoprolol fumarate	84
bisoprolol-hydrochlorothiazide....	84
bleomycin sulfate	59
BLEPHAMIDE	125
BLEPHAMIDE S.O.P.....	125
Boniva	124, 144
BOSULIF	61
BOTOX	93
bp 10-1.....	96
b-plex	139
BREO ELLIPTA	131
BRILINTA	81
brimonidine tartrate	126
Brinzolamide	141, 142
Bromfed DM.....	136
bromocriptine mesylate	63
BUCALSEP	95
budesonide.....	123, 131
Budesonide	142, 143, 144
bumetanide	87
Bumex.....	87
Buphenyl	101
BUPHENYL	101
buprenorphine	34
buprenorphine hcl	39
buprenorphine hcl-naloxone hcl...	39
bupropion hcl	50

bupropion hcl er (sr).....	50
bupropion hcl er (xl)	50
buspirone hcl	71
butalbital-acetaminophen.....	38
butalbital-apap-caff-cod.....	35
butalbital-apap-cafffeine.....	38
butalbital-asa-caff-codeine.....	35
butalbital-asa-cafffeine	38
butorphanol tartrate	35
Butrans	34
Bydureon	143
BYDUREON	72
Byetta.....	143
BYETTA 10 MCG PEN	72
BYETTA 5 MCG PEN.....	73
Bystolic	144
BYSTOLIC	84

C

cabergoline	117
CABOMETYX	61
Caduet	85
Cafergot.....	56
Calan.....	86
Calan SR / Isoptin SR	86
calcipotriene.....	99
calcitonin (salmon)	123
calcitriol.....	99, 123
calcium acetate (phos binder)	107
CAMBIA.....	56
Canagliflozin	145
CANASA.....	123
Cancidas	53
Candesartan	141
candesartan cilexetil	82
candesartan cilexetil-hctz.....	82
Candesartan-Hydrochlorothiazide	141
CAPASTAT SULFATE	58
capecitabine.....	59
CAPEX	109
CAPITAL/CODEINE	35
CAPRELSA.....	61
captopril	83
captopril-hydrochlorothiazide	83
Carac	99
Carafate.....	104
CARAFATE.....	104
carbamazepine	48
carbamazepine er	48
Carbatrol.....	48
carbidopa.....	64
carbidopa-levodopa	64
carbidopa-levodopa er.....	64
carbidopa-levodopa-entacapone ..	64
Cardizem	86
Cardizem CD	86

Cardura.....	82
CARIMUNE NF	120
carisoprodol	136
carnitor	138
Carnitor	138
carteolol hcl.....	126
Cartia XT	86
carvedilol	84
Carvedilol	142
Carvedilol IR	142
Casodex	59
caspofungin.....	53
Catapres	81
Catapres-TTS	81
Cedax	42
cefaclor	42
cefaclor er	42
cefadroxil	42
cefazolin sodium	42
cefdinir	42
cefditoren pivoxil	42
cefpeme hcl.....	42
cefpodoxime proxetil.....	42
cefprozil	42
ceftazidime	42
ceftibuten.....	42
Ceftin.....	43
CEFTIN	42
ceftriaxone sodium.....	42, 43
cefuroxime axetil	43
cefuroxime sodium.....	43
Celebrex	142
CeleBREX	33
celecoxib	33
Celecoxib.....	142
Celestone Soluspan.....	55
CeleXA.....	51
CellCept.....	119
CEM-UREA.....	99
cephalexin.....	43
CERDELGA	100
CEREZYME	100
Cerisa Wash	96
Cerovel	99
cetirizine	129
Cetirizine	144
cetirizine hcl	129
cetirizine-pseudoephedrine	129
Cetralx	128
cevimeline hcl	95
CHEMET	139
chlordiazepoxide hcl	71
chlordiazepoxide-amitriptyline	71
chlordiazepoxide-clidinium.....	101
chlorhexidine gluconate	95
chloroquine phosphate.....	62
chlorothiazide.....	88
chlorpromazine hcl.....	64

chlorpropamide	73
chlorthalidone	88
chlorzoxazone	136
CHOLBAM	104
cholestyramine	89
cholestyramine light	89
chorionic gonadotropin	117
CIALIS	107
ciclopirox	97
ciclopirox olamine.....	97
CidalEaze	38
cilostazol.....	81
Ciloxyan	125
CILOXAN.....	125
cimetidine	103
cimetidine hcl	103
CINRYZE	118
Cipro	45, 46
CIPRO HC	128
Cipro XR	46
CIPRODEX	128
ciprofloxacin	45, 46
ciprofloxacin hcl.....	45, 125, 128
ciprofloxacin-ciproflox hcl er	46
citalopram hydrobromide.....	50, 51
claravis	95
Clarinex	129, 144
CLARINEX	129
CLARINEX-D 12 HOUR	129
clarithromycin	45
clarithromycin er	45
Claritin	130, 144
CLARITIN	129
Claritin0-D	130
CLARITIN-D	129
ClearLax	104
Cleocin	40, 41, 96
CLEOCIN	40
Cleocin Phosphate	41
CLEOCIN PHOSPHATE	40
Cleocin-T	96
Climara	115
CLIMARA PRO	115
Clindacin-P	96
clindamycin hcl	40
clindamycin palmitate hcl	40
clindamycin phos-benzoyl perox..	96
clindamycin phosphate	41, 96
clindamycin-tretinoin	96
clobetasol propionate	109
clobetasol propionate e	109
Clobex	109
Clobex Spray	109
cloxcortolone pivalate	109
Cloderm	109
clomipramine hcl	52
clonazepam	47
clonidine hcl	81

clonidine hcl er.....92
 clopidogrel bisulfate81
 clorazepate dipotassium71, 72
 clotrimazole.....53, 97
 clotrimazole-betamethasone .. 97, 98
 clozapine66
 Clozaril66
 COAGADEX77
 COARTEM63
 codeine sulfate36
 Colazal.....123
 colchicine.....11, 23, 54
 colchicine-probenecid.....11, 23, 55
 Colcrys.....11, 23, 54
 Colestid.....89
 Colestid Flavored89
 colestipol hcl89
 colistimethate sodium41
 Colocort102
 Coly-Mycin M41
 COLY-MYCIN S128
 Colyte with Flavor Packs.....103
 COMBIGAN126
 COMBIPATCH.....115
 COMBIVENT RESPIMAT133
 Combivir71
 COMETRIQ (100 MG DAILY DOSE)61
 COMETRIQ (140 MG DAILY DOSE)61
 COMETRIQ (60 MG DAILY DOSE)61
 COMPLERA.....70
 Compro.....65
 Comtan.....63
 Concerta.....92
 CONDYLOX98
 COPAXONE94
 Cordran.....111
 CORDRAN.....109
 Coreg84, 142
 Coreg CR142
 COREG CR.....84
 Corgard.....85
 Cortef.....55
 CORTIFOAM102
 cortisone acetate.....55
 Cortisporin.....128
 CORTISPORIN96
corvita139
 COSENTYX119
 COSENTYX SENSOREADY 300 DOSE119
 Cosopt126
 COSOPT PF126
 Coumadin.....77
 Cozaar82
 CREON.....101
 CRESEMPA.....53

Crestor89
 CRINONE116
 CRIXIVAN70
 CROFAB120
 cromolyn sodium102, 124, 134
 Curity Sterile Saline139
 Cutivate111
 CUVITRU120
 cyanocobalamin80
 cyclobenzaprine hcl136
 cycloserine58
 Cyklokapron80
 Cymbalta51
 cyproheptadine hcl129
 CYSTADANE100
 CYSTAGON99
 CYTOGAM120
 Cytomel117
 Cytotec104
 Cytovene67

D

dacarbazine59
 danazol114
 Dantrium67
 dantrolene sodium67
 dapsone58
 DARAPRIM63
 darifenacin hydrobromide er.....106
 Daypro34
 DDAVP114
 DDAVP Rhinal Tube114
 DECON-A135
 deferoxamine mesylate139
 Deltasone56
 DELZICOL123
 Demadex87
 Demerol37
 DEMEROL36
 DEMSER86
 DENAVIR68
 Depakene48
 Depakote47
 Depakote ER47
 Depakote Sprinkles47
 DEPEN TITRATABS106
 Depo-Medrol55
 DEPO-MEDROL55
 Depo-Testosterone114
 Derma-Smoothe/FS Body110
 Derma-Smoothe/FS Scalp110
 Dermatop112
 DermOtic128
 DESCovy70
 Desferal139
 desipramine hcl52
 desloratadine129

Desloratadine144
 desmopressin ace rhinal tube114
 desmopressin ace spray refrig ...114
 desmopressin acetate114
 desmopressin acetate spray.....114
 desonide109
 DesOwen109
 desoximetasone109, 110
 Desvenlafaxine142
 desvenlafaxine er51
 desvenlafaxine succinate er51
 Desvenlafaxine Tab SR142
 Detrol106
 Detrol LA106
 dexamethasone55
DEXAMETHASONE INTENSOL .55
 dexamethasone sodium phosphate55, 127
 Dexedrine91
 Dexilant145
DEXILANT104
 Dexlansoprazole145
 dexmedetomidine hcl137
 Dexmethylphenidate141
 dexmethylphenidate hcl92
 dexmethylphenidate hcl er92
 dextroamphetamine sulfate91
 dextroamphetamine sulfate er....91
 DIALYVITE 3000139
 DIALYVITE 5000139
 DIALYVITE/ZINC139
 Diastat AcuDial47
 Diastat Pediatric47
 diazepam47, 72
 Dibenzyline87
 diclofenac potassium33
 diclofenac sodium33, 99, 127
 diclofenac sodium er.....33
 diclofenac-misoprostol33
 dicloxacillin sodium44
 dicyclomine hcl101
 didanosine69
 Differin95
difil-g forte134
 diflorasone diacetate.....110
 Diflucan54
 diflunisal33
 digoxin86
 dihydroergotamine mesylate56
 Dihydropyridine CCB141
 Dilantin49
DILANTIN48
 Dilantin Infatabs49
 Dilauidid36
 diltiazem hcl86
 diltiazem hcl er86
 diltiazem hcl er beads85
 diltiazem hcl er coated beads.....86
 Diovan82

Diovan HCT	82	Effexor XR.....	51	ERIVEDGE.....	59
DIPENTUM	123	EFFIENT	81	Erygel.....	96
diphenhydramine hcl	52	Efudex.....	99	EryPed 200	45
diphenoxylate-atropine	102	ELAPRASE	100	ERYPED 400	45
Diprolene	108	Elavil	52	ERY-TAB	45
Diprolene AF	108	Eldepryl.....	64	ERYTHROCIN LACTOBIONATE	45
dipyridamole	81	ELELYSO	100	ERYTHROCIN STEARATE	45
disopyramide phosphate	83	Eletriptan	146	erythromycin	96, 125
disulfiram	39	eletriptan hydrobromide	56	erythromycin base.....	45
Ditropan XL.....	106	Elidel	145	erythromycin ethylsuccinate	45
DIURIL.....	88	ELIDEL	98	Erythromycin Stearate.....	45
divalproex sodium.....	47	Elimite	63	ESBRIET	135
divalproex sodium er	47	ELIQUIS	76	escitalopram oxalate.....	51
docetaxel	59	ELIXOPHYLLIN.....	134	Esgic	38
dofetilide	84	ELMIRON	106	Esomeprazole.....	145
donepezil hcl.....	49	Elocon	112	esomeprazole magnesium.....	104
Dorzolamide	141	ELOCTATE	78	est estrogens-methyltest	115
dorzolamide hcl	126	Emadine	144	est estrogens-methyltest hs	115
dorzolamide hcl-timolol mal	126	EMADINE	125	estazolam.....	137
Dovonex	99	EMCYT	59	Estrace.....	115
doxazosin mesylate	82	Emedastine	144	ESTRACE	115
doxepin hcl.....	52	Emend	53	estradiol.....	115
doxercalciferol	124	Emend Tri-Pack.....	53	estradiol-norethindrone acet.....	115
doxorubicin hcl.....	59	Empagliflozin	142, 146	ESTRING	115
Doxy 100	46	Empagliflozin-Linagliptin	142	ESTROGEL	115
doxycycline	46	Empagliflozin-Metformin.....	146	estropipate	115
doxycycline hyclate	46	EMSAM	50	eszopiclone	137
doxycycline monohydrate	46	EMTRIVA	69	ethambutol hcl	58
Dramamine	52	EMVERM.....	62	ethyl chloride	38
Drisdol.....	140	Enablex.....	106	etidronate disodium	124
dronabinol	53	enalapril maleate.....	83	etodolac	33
Dronedarone	142	enalapril-hydrochlorothiazide	83	etodolac er	33
DROXIA.....	59	ENBREL	119	etoposide	60
DUAVEE.....	115	ENBREL SURECLICK	119	EUFLEXXA	124
Duetact	74, 143	Endocet	37, 38	Evista	116
Dulaglutide	143	enoxaparin sodium.....	76	EVOTAZ	71
DULERA.....	131	entacapone	63	Evoxac	95
Duloxetine	142, 145	entecavir.....	67	EXELDERM	98
duloxetine hcl.....	51	Entocort EC.....	123	Exelon	49
Duragesic	35, 143	ENTRESTO	87	exemestane	60
DUREZOL.....	127	ENTYVIO	119	Exenatide	143
dutasteride	106	EPCLUSIA	67	Exforge	85, 141
dutasteride-tamsulosin hcl	106	Epiduo	95	Exforge HCT	85, 141
Dyazide.....	87	EPIDUO FORTE	95	EXJADE	139
DYMISTA	129	epinephrine	133	EXODERM	98
E		EpiPen	133	EXTAVIA	94
E.E.S. 400.....	45	EpiPen Jr.....	133	ezetimibe	89
EC-Naprosyn	34	Epitol	48	Ezetimibe.....	142, 146
econazole nitrate	98	Epivir	69	ezetimibe-simvastatin	88
Edarbi	141	eplerenone	87	Ezetimibe-Simvastatin.....	146
EDARBI	82	Eplerenone	142		
Edarbyclor	141	EPOGEN	79		
EDARBYCLOR	82	epoprostenol sodium	135		
EDURANT	68	Epzicom	70		
EEMT	115	ERAXIS	53		
EEMT HS	115	ergoloid mesylates	49		
		ERGOMAR	56		
		ergotamine-caffeine	56		

FEIBA	78
FEIBA NF	78
Feldene.....	34
felodipine er	86
Femara	60
fenofibrate	88
fenofibrate micronized	88
fenofibric acid	88
fentanyl	35
fentanyl citrate (pf)	36
Fentanyl TD Patch	143
ferocon.....	80
FERRIPROX.....	139
Ferrlecit.....	81
ferrocite plus	80
FERRO-PLEX HEMATINIC.....	80
fexofenadine	130
Fexofenadine	144
fexofenadine-pseudoephedrine	130
FINACEA.....	95
finasteride.....	106
Fioricet	35, 38
Fioricet/Codeine	35
Fiorinal	35, 38
Fiorinal/Codeine #3.....	35
Flagyl	41
FLAREX	127
flavoxate hcl	106
FLEBOGAMMA DIF.....	120
flecainide acetate	84
FLECTOR	33
Flolan	135
Flomax	106
Flonase.....	131, 144
FLONASE	131
Flonase Allergy.....	144
Flonase Sensymist	144
Floriva Plus	140
Flovent.....	142, 143
FLOVENT DISKUS	131
FLOVENT HFA.....	131
Floxin Otic	128
fluconazole	54
flucytosine	54
fludrocortisone acetate	110
Flumadine	70
flumazenil	39
flunisolide	131
Flunisolide	142, 143, 144
fluocinolone acetonide.....	110, 128
fluocinolone acetonide body	110
fluocinolone acetonide scalp	110
fluocinonide	110, 111
fluocinonide-e	111
fluorometholone	127
fluorouracil.....	59, 99
Fluoxetine.....	143
fluoxetine hcl.....	51
Fluoxetine HCl Cap Delayed Release	143
fluphenazine decanoate	64
fluphenazine hcl	65
flurandrenolide	111
flurazepam hcl	137
flurbiprofen	33
flurbiprofen sodium	127
flutamide.....	59
Fluticasone.....	144
fluticasone propionate	111, 131
Fluvastatin.....	146
fluvastatin sodium	89
fluvastatin sodium er.....	89
fluvoxamine maleate.....	51
FML	127
FML FORTE.....	127
FML Liquifilm	127
Focalin	92
Focalin XR.....	92
folbee plus.....	139
FOLBEE PLUS CZ.....	139
folic acid.....	80
fondaparinux sodium	76
Fortamet	74
Fortaz.....	42
FORTAZ	43
FORTEO	124
Fortesta	114
Fosamax	123, 144
Fosamax Plus D	144
FOSAMAX PLUS D	124
FOSCAVIR	67
fosinopril sodium	83
fosinopril sodium-hctz.....	83
Fosrenol.....	107
FOSRENOl	107
FRAGMIN.....	76
Frova.....	56
frovatriptan succinate	56
Furadantin	41
furosemide	87
FUSION PLUS.....	80
FUZEON.....	69
 G	
gabapentin	47, 48
galantamine hydrobromide	49
galantamine hydrobromide er.....	49
GAMASTAN S/D	120
GAMMAGARD	121
GAMMAGARD S/D LESS IGA	121
GAMMAKED	121
GAMMAPLEX	121
GAMUNEX-C	121
ganciclovir sodium	67
Gastrocrom	102
gatifloxacin	125
gemfibrozil.....	88
GENOTROPIN	113
GENOTROPIN MINIQUICK	113
Gentak	125
gentamicin sulfate	40, 96, 125
GENVOYA	71
Geodon	66
GILENYA	94
GILOTRIF	61
GILPHEX TR	135
giltuss	135
giltuss pediatric	135
GILTUSS TR.....	135
GLASSIA	135
Gleevec	61
GLEOSTINE	58
glimepiride	73
glipizide	73
glipizide er	73
glipizide-metformin hcl.....	73
GLUCAGEN HYPOKIT	74
GLUCAGON EMERGENCY	74
Glucophage	74
Glucophage XR	74
Glucotrol	73
Glucotrol XL	73
Glucovance	73
Glumetza	143
glyburide	73
glyburide micronized	73
glyburide-metformin	73
glycopyrrolate	101
Glynase	73
Glyset	74, 143
Glyxambi	142
GLYXAMBI	73
Golytely	104
GOLYTELY	103
granisetron hcl	53
GRANIX	79
griseofulvin microsize	54
griseofulvin ultramicrosize	54
Gris-PEG	54
guanfacine hcl	81
guanfacine hcl er	92
guanidine hcl	57
 H	
Halcion	137
Haldol	65
Haldol Decanoate	65
halobetasol propionate	111
HALOG	111
haloperidol	65
haloperidol decanoate	65
haloperidol lactate	65

HARVONI	68
Hectorol	124
HELIXATE FS	78
hematinic/folic acid	80
Hemax	81
HEMETAB	80
Hemmoxex-HC	102
Hemocyte Plus	81
Hemocyte-F	80
HEMOFIL M	78
HEPAGAM B	121
heparin sodium (porcine)	77
heparin sodium (porcine) pf	77
HERCEPTIN	62
HEXALEN	58
Hiprex	41
HIZENTRA	121
HUMALOG	75
HUMALOG KWIKPEN	75
HUMALOG MIX 50/50	75
HUMALOG MIX 50/50 KWIKPEN	75
HUMALOG MIX 75/25	75
HUMALOG MIX 75/25 KWIKPEN	75
HUMATE-P	78
HUMATROPE	113
HUMIRA	119
HUMIRA PEN-PSORIASIS STARTER	119
HUMULIN	75
HUMULIN R U-500 (CONCENTRATED)	75
HUMULIN R U-500 KWIKPEN	75
hydralazine hcl	90
Hydrea	59
hydrochlorothiazide	88
hydrocodone polst-cpm polst er	136
hydrocodone-acetaminophen	36
hydrocodone-ibuprofen	36
hydrocortisone	55, 102, 112
hydrocortisone ace-pramoxine..	102, 111
hydrocortisone acetate	102
hydrocortisone butyr lipo base	111
hydrocortisone butyrate	111, 112
hydrocortisone valerate	112
hydrocortisone-acetic acid	129
hydromorphone hcl	36
hydroxocobalamin	80
hydroxychloroquine sulfate	63
hydroxyurea	59
hydroxyzine hcl	71
hydroxyzine pamoate	71
hyoscyamine sulfate	101
hyoscyamine sulfate er	101
HYPERRHEP B S/D	121
HYPERRHO S/D	121
HYPERTET S/D	121
HYQVIA	121
Hyzaar	82

I	
Ibandronate	144
ibandronate sodium	124
IBRANCE	60
Ibudone	36
ibuprofen	33
ICLUSIG	61
IDELVION	78
ifex 150 forte.	80
ILEVRO	127
imatinib mesylate	61
IMBRUVICA	61
imipenem-cilastatin	43
imipramine hcl	52
imipramine pamoate	52
imiquimod	99
Imitrex	57
Imitrex STATdose Refill	57
Imitrex STATdose System	57
Imodium	102
IMO GAM RABIES-HT	121
Imuran	118
INCRELEX	113
indapamide	88
Inderal LA	85
INDOCIN	33
indomethacin	33
indomethacin er	33
INFLECTRA	119
INFUVITE PEDIATRIC	139
INLYTA	61
Inspra	87, 142
INTEGRA F	81
INTEGRA PLUS	81
INTELENCE	68
Intermezzo	137
INTRON A	67
Intuniv	92
INVANZ	43
Invega	66, 144
Invega Sustenna	144
INVEGA SUSTENNA	66
Invega Trinza	144
INVEGA TRINZA	66
INVIRASE	70
Invokamet	145
INVOKAMET	73
Invokamet XR	145
INVOKAMET XR	73
Invokana	145
INVOKANA	73
Iopidine	126
IOPIDINE	126
ipratropium bromide	133
ipratropium-albuterol	133
irbesartan	82
Irbesartan	141

irbesartan-hydrochlorothiazide	82
ISENTRESS	68
ISENTRESS HD	68
isometheptene-dichloral-apap	56
isoniazid	58
Isopto Carpine	127
Isordil	90
ISORDIL TITRADOSE	90
isosorbide dinitrate	90
isosorbide dinitrate er	90
isosorbide mononitrate	90
isosorbide mononitrate er	90
isradipine	86
itraconazole	54
ivermectin	62
IXINITY	78

J

JADENU	139
JADENU SPRINKLE	139
JAKAFI	61
Jalyn	106
Janumet	142
JANUMET	73
Janumet XR	142
JANUMET XR	73
Januvia	142
JANUVIA	73
Jardiance	146
JARDIANCE	73
Jentadueto	142
JENTADUETO	73
Jentadueto XR	142
JENTADUETO XR	73

K

Kaletra	71
KALETRA	71
Kapvay	92
Kazano	72, 142
Keflex	43
KENALOG	55
Keppra	47, 143
Keppra XR	47, 143
KeriCort 10	112
ketoconazole	54, 98
ketoprofen	34
ketoprofen er	33
ketorolac tromethamine	34, 127
ketotifen	125
Ketotifen	144
Khedezl	51
KINERET	119
Kionex	137, 138
Klaron	97
KlonoPIN	47

Klor-Con	138
KLOR-CON.....	138
Klor-Con M10	138
KLOR-CON M15	138
Klor-Con M20	138
Klor-Con Sprinkle.....	138
KOATE-DVI.....	78
KOGENATE FS.....	78
KOGENATE FS BIO-SET.....	78
Kombiglyze XR.....	142
KOMBIGLYZE XR.....	73
KORLYM	74
KOVALTRY	78
K-PHOS NO 2	105
K-Prime.....	138
K-Tab	138
k-tan plus	81
KUVAN	100

L

Iabetalol hcl.....	84
Lac-Hydrin.....	98
Lactic Acid.....	145
lactulose	103
lactulose encephalopathy	103
LaMICtal	48
LaMICtal ODT	48
LaMICtal XR	48
LamISIL	54
lamivudine	69
lamivudine-zidovudine.....	71
lamotrigine.....	48
lamotrigine er.....	48
Lanoxin	86
LANOXIN.....	86
Iansoprazole	104
Lansoprazole	145
Lansoprazole Rx	145
Ianthanum	107
LANTUS	76
LANTUS SOLOSTAR.....	76
Lasix.....	87
Lastacraft.....	144
LASTACRAFT	125
Iatanoprost	128
LATUDA	66
Ieflunomide.....	122
LEMTRADA	94
Lescol	89
Lescol XL.....	89
LETAIRIS	135
Ietrozole	60
leucovorin calcium	60
LEUKERAN.....	58
LEUKINE	80
Ieuprolide acetate.....	117
Ievalbuterol hcl.....	133

Ievalbuterol tartrate	134
Levaquin.....	46
LEVEMIR.....	76
LEVEMIR FLEXTOUCH.....	76
levetiracetam	47
Levetiracetam	143
levetiracetam er.....	47
LEVITRA	107
levobunolol hcl.....	127
levocarnitine.....	138
Levacetirizine.....	144
levocetirizine dihydrochloride	130
levofloxacin	46, 125
levoleucovorin calcium	60
levoleucovorin calcium pf.....	60
levothyroxine sodium.....	116
Levsin	101
Levsin/SL.....	101
Lexapro.....	51
LEXIVA	70
LIALDA	123
Librax	101
lidocaine	38
lidocaine hcl	38
lidocaine hcl (pf)	38
lidocaine viscous	38
lidocaine-hydrocortisone ace....	102
lidocaine-prilocaine	38
Lidoderm	38
Linagliptin	142
Linagliptin-Metformin	142
Lincocin	41
lincomycin hcl	41
lindane	63
linezolid.....	41
LINZESS	103
iothyronine sodium.....	117
Lipitor	88
Lipofen.....	88
Liraglutide.....	143
Lisdexamfetamine Dimesylate ...	141
lisinopril.....	83
lisinopril-hydrochlorothiazide	83
lithium	72
lithium carbonate	72
lithium carbonate er	72
Lithobid	72
Livalo.....	146
LIVALO	89
Locoid	111, 112
LOCOID	112
Locoid Lipocream.....	111
Lodine	33
Lodosyn	64
Lofibra.....	88
Lomotil	102
LONSURF	60
loperamide hcl	102

Lopid	88
lopinavir-ritonavir.....	71
Lopressor	85
Lopressor HCT	85
Loprox	97
loratadine.....	130
Loratadine	144
loratadine-pseudoephedrine.....	130
lorazepam.....	72
Lorcet	36
Losartan.....	141
losartan potassium.....	82
losartan potassium-hctz	82
LOTEMAX	127
Lotensin	83
Lotensin HCT	83
Lotrel	85
Lotrimin	97
Lotrisone.....	97, 98
Lotronex	103
lovastatin	89
Lovastatin	146
Lovastatin Tab IR	146
Lovaza	89
Lovenox	76
loxapine succinate	65
LUMIGAN	128
Lunesta	137
LUPRON DEPOT (1-MONTH) ...	117
LUPRON DEPOT (3-MONTH) ...	117
LUPRON DEPOT (4-MONTH) ...	117
LUPRON DEPOT (6-MONTH) ...	118
LUPRON DEPOT-PED (1-MONTH)	118
LUPRON DEPOT-PED (3-MONTH)	118
Luxiq.....	108
LYNPARZA	61
Lyrica	145
LYRICA	47
LYSODREN	117

M

M.V.I. ADULT	139
M.V.I. PEDIATRIC	139
Macrobid.....	41
Macrodantin	41
magnesium sulfate	138
Malarone	62
maprotiline hcl	51
Marinol	53
MARPLAN	50
MATULANE	58
Mavik	83
Maxalt	57
Maxalt-MLT	57
MAXIDEX	127

Maxipime	42	methylprednisolone sodium succ.	55	morphine sulfate (concentrate)	37
Maxitrol	125	metipranolol	127	morphine sulfate (pf).....	37
Maxzide	88	metoclopramide hcl.....	52	morphine sulfate er	35
Maxzide-25	88	metolazone	88	MOXEZA	125
meclizine hcl	52	metoprolol succinate er	85	moxifloxacin hcl	46, 125
meclofenamate sodium	34	metoprolol tartrate.....	85	MS Contin.....	35
Medrol.....	55	metoprolol-hydrochlorothiazide	85	Multaq	142
MEDROL.....	55	MetroCream	96	MULTAQ	84
medroxyprogesterone acetate ...	116	MetroGel.....	97	MULTIGEN.....	81
mefenamic acid	34	MetroLotion	97	MULTIGEN PLUS	81
mefloquine hcl	63	metronidazole	41, 96, 97	multivitamin/fluoride	140
Megace ES	116	Mevacor	89	multi-vitamin/fluoride/iron	140
megestrol acetate	116	mexiletine hcl	84	mupirocin	97
MEKINIST	61	Miacalcin	123	mupirocin calcium	97
meloxicam	34	MIACALCIN	124	mvc-fluoride	140
melphalan.....	58	Micardis	82, 141	Myambutol.....	58
Memantine	143	Micardis HCT	82, 141	MYCAMINE.....	54
memantine hcl	50	Micro-K	138	Mycobutin.....	58
MENEST	116	Microzide	88	mycophenolate mofetil	119
MENTAX	98	midazolam hcl.....	72	mycophenolate sodium	119
meperidine hcl	36, 37	midodrine hcl	82	Myfortic	119
MEPHYTON	140	MIGERGOT	56	mynephrocaps	140
Mepron	62	miglitol.....	74	Myrbetriq	143
mercaptopurine	59	Miglitol.....	143	MYRBETRIQ	106
mesalamine.....	123	Migranal.....	56	Mysoline	48
Mesalamine.....	123	Milco-B-Forte	139	MYTESI	102
mesalamine-cleanser	123	MILLIPRED	55		
MESNEX	60	Mimvey	115		
Mestinon.....	58	Mimvey Lo	115	N	
MESTINON.....	58	Minipress	82	na ferric gluc cplx in sucrose	81
Metadate ER.....	92	Minitran.....	90	nabumetone	34
Metaxall	136	Minivelle.....	115	nadolol	85
metaxalone	136	Minocin	46	nafcillin sodium	44
Metformin	143, 145	minocycline hcl	46, 47	naftifine hcl	98
metformin hcl	74	minocycline hcl er	46	Naftin.....	98
metformin hcl er.....	74	minoxidil.....	90	NAFTIN.....	98
metformin hcl er (osm)	74	Mirabegron	143	NAGLAZYME	100
Methamphetamine	141	Mirapex	64	nalbuphine hcl	37
methazolamide	87	Mirapex ER	64	naloxone hcl	40
methenamine hippurate	41	mirtazapine	50	naltrexone hcl	40
METHERGEINE.....	106	MIRVASO.....	97	Namenda	50, 143
methimazole	118	misoprostol.....	104	Namenda Titration Pak	50
methocarbamol.....	136	mitoxantrone hcl	94	Namenda XR	143
methotrexate	119	Mobic	34	NAMENDA XR.....	50
methotrexate sodium	122	modafinil	137	NAMENDA XR TITRATION PACK	50
methotrexate sodium (pf)	122	Moderiba	67	NAMZARIC	49
methoxsalen	99	MODERIBA.....	67	Naprelan	34
methoxsalen rapid.....	99	Mometasone	143, 144	NAPRELAN	34
methscopolamine bromide.....	101	mometasone furoate.....	112, 131	Naprosyn	34
methyldopa	81	Mondoxyne NL	46	naproxen	34
Methylin	93	MONOCLOATE-P	78	naproxen dr	34
Methylphenidate	141	Monodox	46	naproxen sodium	34
methylphenidate hcl.....	93	MONONINE	79	naproxen sodium er	34
methylphenidate hcl er	92, 93	montelukast sodium	132	naratriptan hcl	57
methylphenidate hcl er (cd)	92	MONUROL.....	41	Nardil	50
methylphenidate hcl er (la)	92	Morgidox.....	46	Nasacort	132, 144
methylprednisolone.....	55	morphine sulfate.....	37	NASACORT	132
methylprednisolone acetate.....	55				

Nasonex	131, 144
NATACYN	128
nateglinide	74
Nateglinide	145
Nebivolol	144
NEBUPENT	63
nefazodone hcl	51
neomycin sulfate	40
neomycin-bacitracin zn-polymyx	125
neomycin-polymyxin-dexameth	125
neomycin-polymyxin-gramicidin	125
neomycin-polymyxin-hc	126, 128
Neo-Polycin	125
Neo-Polyclin HC	125
neosalus	99
Neosporin	125
NEOTUSS PLUS	136
nephronex	140
Neptazane	87
Nesina	72, 142
Neuac	96
NEULASTA	80
NEULASTA ONPRO	80
NEUPOGEN	80
Neupro	145
NEUPRO	64
NEURIN-SL	81
Neurontin	47, 48
NEVANAC	128
nevirapine	69
nevirapine er	68
NEXAVAR	61
Nexium	145
NexIUM	104
NEXIUM	104
Nexium OTC	145
niacin er (antihyperlipidemic)	89
NIACOR	89
Niaspan	89
nicardipine hcl	86
nifedipine	86
nifedipine er	86
nifedipine er osmotic release	86
Nilandron	59
nilutamide	59
nimodipine	86
NINLARO	60
nisoldipine er	86
NITRO-BID	90
Nitro-Dur	90
NITRO-DUR	90
nitrofurantoin	41
nitrofurantoin macrocrystal	41
nitrofurantoin monohyd macro	41
nitroglycerin	90
nitroglycerin er	90
Nitrolingual	90
Nitrostat	90
Nitro-Time	90
nizatidine	103
Nizoral	98
Nodolor	56
Nolix	111
Norco	36
NORDITROPIN FLEXPRO	113
norethindrone acetate	116
Norpace	83
NORPACE CR	84
Norpramin	52
nortriptyline hcl	52
NORTUSS-EX	136
Norvasc	85
NORVIR	70
NOVOEIGHT	79
NOVOLOG	76
NOVOLOG FLEXPEN	76
NOVOLOG MIX 70/30	76
NOVOLOG MIX 70/30 FLEXPEN	76
NOVOLOG PENFILL	76
NOVOSEVEN RT	79
NOXAFILE	54
NuFol	81
Nulytely with Flavor Packs	103
NUTRIVIT	140
NUTROPIN AQ NUSPIN 10	113
NUTROPIN AQ NUSPIN 20	113
NUTROPIN AQ NUSPIN 5	113
NUWIQ	79
nystatin	54, 98
nystatin-triamcinolone	98
Nystop	98
O	
obizur	79
OCTAGAM	121
octreotide acetate	118
Ocuflox	126
ODEFSEY	71
OFEV	136
ofloxacin	126, 128
olanzapine	66
olanzapine-fluoxetine hcl	66
Olmesartan	141
olmesartan medoxomil	82
olmesartan medoxomil-hctz	82
Olmesartan-Hydrochlorothiazide	141
Olopatadine	144
olopatadine hcl	125, 130
Olux	109
omega-3-acid ethyl esters	89
omeprazole	104
Omeprazole	145
Omeprazole Rx	145
omeprazole-sodium bicarbonate	104, 105
Omeprazole-Sodium Bicarbonate	145
Omnipred	128
OMNITROPE	113
ondansetron	53
ondansetron hcl	53
Onglyza	142
ONGLYZA	74
Opana	38
OPANA	37
OPSUMIT	135
Optivar	144
Oracea	46
ORACIT	105
Oralone	95
Orap	65
ORENCIA	119
ORENCIA CLICKJECT	119
ORFADIN	100, 101
orphenadrine citrate	136
orphenadrine citrate er	136
Ortho-CS 250	140
oseltamivir phosphate	70
OSPHENA	116
oxacillin sodium	44
oxaliplatin	60
Oxandrin	114
oxandrolone	114
oxaprozin	34
oxazepam	72
oxcarbazepine	48
oxiconazole nitrate	98
Oxistat	98
OXISTAT	98
Oxsoralen Ultra	99
Oxybutinin	143
oxybutynin chloride	106
oxybutynin chloride er	106
oxycodone hcl	37
oxycodone hcl er	35
oxycodone-acetaminophen	37, 38
OxyCONTIN	35
oxymorphone hcl	38
P	
Pacerone	83
paliperidone er	66
Paliperidone Palmitate	144
Pamelor	52
Pamine	101
Pamine Forte	101
PANCREAZE	101
PANDEL	112
PANRETIN	62
Pantoprazole	145
Pantoprazole RX	145
pantoprazole sodium	105

Parafon Forte DSC	136
paricalcitol	124
Parlodel	63
Parnate	50
paromomycin sulfate	40
paroxetine hcl	51
paroxetine hcl er.....	51
PASER	58
Pataday	125
Patanase	130
Patanol	125
Paxil	51
PAXIL.....	51
Paxil CR	51
PCE.....	45
Pediapred.....	56
peg 3350/electrolytes	103
peg 3350-kcl-na bicarb-nacl	103
peg-3350/electrolytes	104
PEGASYS	122
PEGASYS PROCLICK.....	122
PEGINTRON	122
PEG-INTRON REDIPEN	122
pegylax	104
penicillin g procaine	44
penicillin v potassium.....	44
Penlac.....	97
PENTAM	63
PENTASA	123
pentoxifylline er	87
Pepcid.....	103
Percocet	37
Peridex	95
PERJETA	62
permethrin	63
perphenazine	65
perphenazine-amitriptyline.....	65
PERTZYE.....	102
pharbedryl	130
Phenadox	52
phenazopyridine hcl.....	106
phenelzine sulfate	50
Phenergan.....	52, 53
phenobarbital.....	48
phenoxybenzamine hcl	87
Phentyek	49
phenytoin.....	49
phenytoin sodium.....	49
phenytoin sodium extended.....	49
PhosLo	107
phospha 250 neutral	138
phosphasal	41
PHOSPHOLINE IODIDE.....	127
phytonadione	140
pilocarpine hcl.....	95, 127
Pimecrolimus	144, 145
pimozide	65
pindolol	85
Pioglitazone	143
pioglitazone hcl.....	74
pioglitazone hcl-glimepiride	74
Pioglitazone HCl-Glimepiride	143
Pioglitazone HCl-Metformin.....	143
pioglitazone hcl-metformin hcl....	74
piperacillin sod-tazobactam so....	44
piroxicam	34
Pitavastatin Calcium	146
Plaquenil.....	63
Plavix	81
PLEGRIDY	94
PLEGRIDY STARTER PACK.....	94
podofilox	98
Polycin	125
polyethylene glycol 3350.....	104
polymyxin b-trimethoprim.....	126
Polytrim.....	126
POMALYST	59
Ponstel.....	34
pot bicarb-pot chloride.....	138
POTABA.....	140
potassium bicarbonate	138
potassium chloride	138
potassium chloride crys er	138
potassium chloride er	138
potassium citrate er	105
potassium citrate-citric acid	105
PRADAXA	77
Pramipexole	145
pramipexole dihydrochloride.....	64
pramipexole dihydrochloride er	64
Pramosone.....	111
PRAMOSONE	112
PRAMOSONE E	112
Prandin	74
Prasugrel HCl	81
Pravachol	89
Pravastatin	146
pravastatin sodium.....	89
prazosin hcl.....	82
Precedex	137
Precose	72
PRED MILD	128
PRED-G.....	126
PRED-G S.O.P.....	126
prednicarbate	112
prednisolone	55
prednisolone acetate	128
prednisolone sodium phosphate	55, 56, 128
Prednisone	56
PREDNISONE INTENSOL	56
PRE-FOLIC	81
Pregabalin	145
Pregnyl.....	117
PREMARIN	116
PREMPHASE	116
PREMPRO	116
Prevacid.....	104, 145
PREVACID	105
Prevacid OTC	145
Prevacid SoluTab	145
PREVACID SOLUTAB	105
Prevalite.....	89
PREZCOBIX	71
PREZISTA	70
PRIFTIN	58
PriLOSEC	104
PRILOSEC	105
Prilosec OTC	145
Prilox LP	38
primaquine phosphate	63
Primaxin IV.....	43
primidone	48
Pristiq	51, 142
PRIVIGEN	121
PROAIR HFA	134
PROAIR RESPICLICK	134
probenecid	11, 23, 55
Procardia	86
Procardia XL	86
prochlorperazine	65
prochlorperazine edisylate	65
prochlorperazine maleate	65
PROCORT	102
PROCRIT	80
PROCTOFOAM HC	102
PROFERRIN-FORTE	81
PROFILNINE SD	79
progesterone micronized	116
PROGLYCEM	74
PROLENSA	128
PROLIA	124
PROMACTA.....	80
promethazine hcl	52, 53
promethazine-codeine	136
promethazine-dm	136
promethazine-phenyleph-codeine	136
Promethegan	53
Prometrium	116
propafenone hcl	84
propafenone hcl er	84
propranolol hcl	85
propranolol hcl er	85
propranolol-hctz.....	85
propylthiouracil	118
Proscar	106
PROTECTIRON	81
Protonix	105
PROTONIX	105
Protopic	98, 145
protriptyline hcl	52
PROVENTIL HFA	134
Provera	116
Provigil	137

PROZac 51
 Prozac Weekly 143
 pseudoeph-bromphen-dm 136
 Pulmicort 131, 142
 PULMICORT FLEXHALER 132
 PULMOZYME 136
 PUREFE PLUS 81
 PYLERA 102
 pyrazinamide 58
 Pyridium 106
 pyridostigmine bromide 58
 pyridostigmine bromide er 58
 pyridoxine hcl 140

Q

Qnasl 144
 QNASL 132
 QNASL CHILDRENS 132
 QSYMIA 95
 Qualaquin 63
 Questran 89
 Quetiapine 145
 quetiapine fumarate 66
 quetiapine fumarate er 66
 QUILLICHEW ER 93
 QUILLIVANT XR 93
 quinapril hcl 83
 quinapril-hydrochlorothiazide 83
 quinidine gluconate er 84
 quinidine sulfate 84
 quinine sulfate 63
 Qvar 142, 143
 QVAR 132

R

Rabeprazole 145
 rabeprazole sodium 105
 raloxifene hcl 116
 ramipril 83
 RANEXA 87
 ranitidine hcl 103
 RAPAFLO 106
 Rasagiline 145
 rasagiline mesylate 64
 Razadyne 49
 Razadyne ER 49
 Rea Lo 39 99
 Rea Lo 40 99
 Rebetol 67
 REBIF 94
 REBIF REBIDOSE 94
 REBIF REBIDOSE TITRATION
PACK 94
 REBIF TITRATION PACK 94
 Reclast 124
 RECOMBINATE 79

RECTIV 102
 Regenecare HA 38
 Reglan 52
 REGRANEX 99
 RELAGARD 106
 RELENZA DISKHALER 70
 Relpax 56, 146
 Remeron 50
 Remeron SolTab 50
 REMICADE 120
 REMODULIN 135
 RENAGEL 107
 RENATABS 140
 RENATABS WITH IRON 140
 Renvela 107
 repaglinide 74
 Repaglinide 145
 Requip 64, 145
 Requip XL 64, 145
 DESCRIPTOR 69
 RESTASIS 128
 RESTASIS MULTIDOSE 128
 Restoril 137
 Retin-A 96
 Retin-A Micro 96
 Retrovir 69
 RETROVIR 69
 Revatio 135
 REVLIMID 59
 REYATAZ 70
 Rhinocort 131, 144
 RHINOCORT 132
 Rhinocort Aqua 131
 RHOGAM ULTRA-FILTERED
PLUS 121
 RHOPHYLAC 121
 RIBASPHERE 67
 RIBASPHERE RIBAPAK 67
 ribavirin 67, 71
 RIDAURA 122
 rifabutin 58
 Rifadin 58
 RIFAMATE 58
 rifampin 58
 RIFATER 58
 Rilutek 93
 riluzole 93
 rimantadine hcl 70
 RIMSO-50 106
 Risedronate 144
 risedronate sodium 124
 RisperDAL 66
 RISPERDAL CONSTA 66
 RisperDAL M-TAB 66
 risperidone 66
 Ritalin 92, 93
 Ritalin LA 92
 RITALIN LA 93
 RITUXAN 62

rivastigmine 49
 rivastigmine tartrate 49
 rixubis 79
 rizatriptan benzoate 57
 Robaxin 136
 Robaxin-750 136
 Robinul 101
 Robinul-Forte 101
 Rocaltrol 123
 Rocephin 42
 Ropinirole 145
 ropinirole hcl 64
 ropinirole hcl er 64
 Rosuvastatin 146
 rosuvastatin calcium 89
 Rotigotine TD Patch 145
 Rowasa 123
 Roxicodone 37
 ROZEREM 137
 Rythmol SR 84

S

Sabril 48
 SABRIL 48
 SAIZEN 113
 SAIZEN CLICK.EASY 113
 Salagen 95
 salsalate 34
 SandoSTATIN 118
 SANDOSTATIN LAR DEPOT 118
 SANTYL 99
 SAPHRIS 66
 SAVELLA 93
 SAVELLA TITRATION PACK 93
 Saxagliptin 142
 Saxagliptin-Metformin 142
 scalacort 112
 Scopolamine 53
 Selegiline 145
 selegiline hcl 64
 selenium sulfide 99
 SELZENTRY 69
 SEMPREX-D 136
 SENSI PAR 117
 SEREVENT DISKUS 134
 Seromycin 58
 SEROquel 66
 Seroquel XR 145
 SEROquel XR 66
 SEROSTIM 113
 sertraline hcl 51
 sevelamer carbonate 107
 SFROWASA 123
 Shohls Modified 105
 sildenafil citrate 135
 SILENOR 137
 silver sulfadiazine 97

SIMBRINZA	127
SIMPONI	120
SIMPONI ARIA.....	120
simvastatin	89
Simvastatin	146
Sinemet	64
Sinemet CR.....	64
Singulair	132
SIRTURO	58
Sitagliptin.....	142
Sitagliptin-Metformin.....	142
SIVEXTRO	41
SKLICE	63
sod citrate-citric acid.....	105
sodium ascorbate.....	140
sodium chloride	136, 139
sodium phenylbutyrate	101
sodium polystyrene sulfonate....	137, 138
Solaraze	99
SOLU-CORTEF.....	56
Solu-MEDROL.....	55
SOLU-MEDROL	56
Soma.....	136
SOMATULINE DEPOT	118
SOMAVERT.....	118
Sonata	137
SOOLANTRA	99
Soriatane	99
Sorine	84
sotalol hcl	84
sotalol hcl (af)	84
SOVALDI	68
Spectracef.....	42
SPIRIVA HANDIHALER.....	133
SPIRIVA RESPIMAT	133
spironolactone	87
Spironolactone.....	142
Spironolactone & Hydrochlorothiazide.....	142
spironolactone-hctz.....	87
Sporanox	54
SPORANOX	54
SPRYCEL	61
Stalevo	64
Starlix.....	74
stavudine	69
STAXYN	107
STELARA	120
STIMATE	114
STIOLTO RESPIMAT	133
STIVARGA	61
Strattera.....	91, 92, 141
streptomycin sulfate.....	40
STRIBILD	71
STRIVERDI RESPIMAT.....	134
Stromectol.....	62
SUBOXONE	39
sucralfate.....	104
Sucralfate	104
Sular.....	86
sulfacetamide sodium.....	97
sulfacetamide sodium-sulfur.....	97
sulfacetamide-prednisolone	126
SulfaCleanse 8/4.....	97
sulfadiazine	46
sulfamethoxazole-trimethoprim	46
SULFAMYLYON	41
sulfasalazine	123
Sulfatrim Pediatric.....	46
Sulfonylureas	142, 143, 145
sulindac	34
sumatriptan	57
Sumatriptan.....	146
sumatriptan succinate	57
sumatriptan succinate refill	57
SUPERVITE.....	140
support.....	140
support-500.....	140
SUPREP BOWEL PREP KIT	104
SUSTIVA	69
SUTENT	61
SYLATRON.....	60
SYMAX DUOTAB.....	101
Symax-SR	101
SYMBICORT	132
Symbax.....	66
SYMLINPEN 120	74
SYMLINPEN 60.....	74
SYNAGIS	121
Synalar.....	110
SYNAREL	118
Synjardy.....	146
SYNJARDY	74
Synjardy XR	146
SYNJARDY XR	74
Synthroid	116
SYNTHROID.....	117
SYNViSC	124
SYNViSC ONE.....	124
 T	
TABLOID	60
tacrolimus	98
Tacrolimus.....	144, 145
TAFINLAR	61
Tagamet	103
Tamiflu	70
TAMIFLU	70
tamoxifen citrate	59
tamsulosin hcl.....	106
TANDEM F	81
Tanzeum	143
Tapazole.....	118
TARCEVA	61
Targretin	62
TARGETIN	62
Tarka	83
Taron-Crystals	105
TASIGNA.....	61
Tasmar	63
Taxotere	59
tazarotene	95
Tazorac	95
TAZORAC	95, 96
Taztia XT	85
TECFIDERA	94
TEGretol	48
TEGretol-XR	48
TEKTURNA	87
TEKTURNA HCT	87
telmisartan.....	82
Telmisartan	141
telmisartan-hctz	82
Telmisartan-Hydrochlorothiazide	141
temazepam	137
Temodar	60
Temovate	109
temozolomide	60
Tencon	38
Tenoretic	84
Tenormin	84
Terazol 7	54
terazosin hcl	82
terbinafine hcl	54
terbutaline sulfate	133
terconazole	54
Tessalon Perles	135
testosterone	114, 115
testosterone cypionate	114
testosterone enanthate	114
tetracycline hcl	47
TEXACORT	112
THALOMID	59
THEO-24	134
Theochron	134
theophylline er	134
Thermazene	97
thiamine hcl	140
thioridazine hcl	65
thiothixene	65
Tiazac	85
Tigan	53
TIGAN	53
Tikosyn	84
timolol maleate	85, 127
Timoptic	127
TIMOPTIC OCUDOSE	127
Timoptic-XE	127
TIVICAY	68
tizanidine hcl	67
TL G-FOL OS	140
tl-hem 150	81
Tobi	134

TOBI PODHALER	134
TobraDex	126
TOBRADEX	126
TOBRADEX ST	126
tobramycin	126, 134
tobramycin sulfate	40
tobramycin-dexamethasone	126
Tobrex	126
TOBREX	126
Tofranil	52
tolcapone	63
tolmetin sodium	34
Tolterodine	143
tolterodine tartrate	106
tolterodine tartrate er	106
Topamax	48
Topamax Sprinkle	48
Topicort	109, 110
topiramate	48
Toprol XL	85
torsemide	87
TOVIAZ	106
TRACLEER	135
Tadjenta	142
TRADJENTA	74
tramadol hcl	38
tramadol hcl er	35
tramadol hcl er (biphasic)	35
tramadol-acetaminophen	38
trandolapril	83
trandolapril-verapamil hcl er	83
tranexamic acid	80
TRANSDERM-SCOP (1.5 MG)	53
Tranxene-T	72
tranylcypromine sulfate	50
TRAVATAN Z	128
trazodone hcl	51
TRECATOR	58
TRELSTAR	118
TRELSTAR MIXJECT	118
tretinoin	62, 96
tretinoin microsphere	96
TREXIMET	57
Triamcinolone	144
triamicinolone acetonide	95, 112, 113, 132
Triamcinolone Acetonide	144
triamterene-hctz	87, 88
TRIANEX	113
triazolam	137
Tricor	88
Triderm	112
trifluoperazine hcl	65
trifluridine	128
Triglide	88
trihexyphenidyl hcl	63
Trileptal	48
Trilipix	88
trimethobenzamide hcl	53
trimethoprim	41
TRIUMEQ	71
TRI-VIT/FLUORIDE/IRON	140
tri-vitamin/fluoride	140
Trizivir	70
TRULICITY	74
Trusopt	126
TRUVADA	71
TUDORZA PRESSAIR	133
TUSNEL	130
Tussionex	136
TYBOST	68
TYKERB	61
Tylenol with Codeine #3	35
Tylenol with Codeine #4	35
TYSABRI	94
TYVASO STARTER	135
TYZINE	136
 U	
UCERIS	102, 123
ULORIC	11, 23, 55
Ultracet	38
Ultram	35, 38
Ultram ER	35
Ultravate	111
Uramaxin	99
urea	99
urea nail	99
Urecholine	106
uretron d/s	41
Uribel	41
Urocit-K 10	105
Urocit-K 15	105
Urocit-K 5	105
uro-mp	41
urosex	140
Uroxatral	106
Urso 250	103
Urso Forte	103
ursodiol	102, 103
 V	
Vagifem	115
valacyclovir hcl	68
Valcyte	67
valganciclovir hcl	67
Valium	72
valproate sodium	48
valproic acid	48
valsartan	82
Valsartan	141
Valsartan HCT	141
valsartan-hydrochlorothiazide	82
Valtrex	68
Vancocin HCl	41
vancomycin hcl	41
Vandazole	41
Vanos	110
VARIZIG	122
VASCEPA	89
Vaseretic	83
Vasotec	83
Vectical	99
Veletri	135
VELPHORO	107
VEMLIDY	67
VENCLEXTA	61
VENCLEXTA STARTING PACK	61
Venlafaxine	142
venlafaxine hcl	51
venlafaxine hcl er	51
VENTAVIS	135
VERAMYST	132
verapamil hcl	86
verapamil hcl er	86
Verdrocet	36
Verelan	86
Verelan PM	86
VESICARE	106
Vfend	54
Vfend IV	54
VIAGRA	107
Vibramycin	46
VIBRAMYCIN	47
vic-forte	140
Vicodin	36
Vicodin ES	36
Vicodin HP	36
Victoza	143
VICTOZA	74
VIDEX	69
Videx EC	69
vigabatrin	48
Vigamox	125
VIMIZIM	100
VIMPAT	49
vinblastine sulfate	60
VIRACEPT	70
Viramune	68, 69
Viramune XR	68
Virazole	71
VIREAD	69
Viroptic	128
virt-vite	81
Vistaril	71
vit b3-azelac-turm-fa-b6-zn-cu	140
vitalfol	140
VITAL-D RX	140
vitamin d (ergocalciferol)	140
vitamin k1	140
VITEKTA	68
Vivelle-Dot	115

Vogelxo Pump	115
Voltaren	33
VONVENDI	79
voriconazole.....	54
VOTRIENT	62
VPRIIV	100
Vytorin.....	88, 146
VYVANSE	91

W

warfarin sodium.....	77
WELCHOL	89
Wellbutrin SR.....	50
Wellbutrin XL	50
Westcort	112
WILATE	79
WINRHO SDF	122

X

Xalatan	128
XALKORI.....	62
Xanax.....	71
Xanax XR	71
XARELTO	77
XARELTO STARTER PACK.....	77
XELJANZ.....	120
XELJANZ XR	120
Xeloda.....	59
XIFAXAN	103
XiIDRA	128
XOLAIR	136
Xopenex	133, 134
Xopenex Concentrate.....	133
Xopenex HFA	134
XTANDI	59
Xylocaine.....	38

Xylocaine-MPF	38
Xylon	36
XYNTHA	79
XYNTHA SOLOFUSE	79
XYREM.....	137
Xyzal	130, 144

Z

Zaditor.....	125, 144
ZADITOR.....	125
zafirlukast	132
zaleplon	137
Zaleplon.....	146
Zanaflex.....	67
Zantac.....	103
ZANTAC	103
ZARXIO	80
ZAVESCA	100
Zebutal.....	38
Zegerid.....	104, 105, 145
ZEGERID	105
Zegerid OTC	145
ZELBORAF	62
Zemplar	124
ZENPEP	102
Zenedi.....	91
ZEPATIER.....	68
Zerit	69
Zestoretic.....	83
Zestril	83
Zetia	89, 142
Ziac	84
Ziagen	69
ZIAGEN	69
Ziana	96
zidovudine	69
Zinacef	43

ZINACEF	43
ZIOPTAN	128
ziprasidone hcl.....	66
Zithromax	45
Zithromax Z-Pak.....	45
ZMAX	45
Zocor	89
Zofran.....	53
Zofran ODT	53
zoledronic acid.....	124
ZOLINZA	60
zolmitriptan.....	57
Zoloft	51
Zolpidem.....	146
zolpidem tartrate.....	137
zolpidem tartrate er	137
ZOMACTON	114
Zomig	57
ZOMIG	57
Zomig ZMT	57
ZORBTIVE	114
Zosyn	44
Zovirax	68
ZOVIRAX.....	68
ZUBSOLV.....	39, 40
ZYDELIG	60
Zyloprim.....	11, 23, 54
Zymaxid	125
ZyPREXA	66
ZyPREXA Zydis.....	66
Zyrtec	144
ZyrTEC	129
ZYRTEC	130
ZYRTEC-D	130
ZYTIGA.....	59
Zyvox	41
ZYVOX.....	41

Aviso: Informando a los Individuos sobre los requisitos de no discriminación y acceso y la declaración de no discriminación: El Discrimen Esta En Contra De La Ley

| Triple-S Salud, Inc. cumple con las leyes federales de derechos civiles aplicables y no discrimina, no excluye a las personas ni las trata de forma diferente por motivos de raza, color, origen nacional, edad, sexo o incapacidad.

| Triple-S Salud, Inc.

- Proporciona mecanismos auxiliares y servicios gratuitos a las personas con incapacidades para comunicarse efectivamente con nosotros, tales como:
 - Intérpretes en lenguaje de señas certificados,
 - Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, entre otros).
- Proporciona servicios de traducción gratuitos a personas cuyo primer idioma no es el español, tales como:
 - Intérpretes certificados,
 - Información escrita en otros idiomas.

Si necesita recibir estos servicios, contacte a un Representante de Servicio.

Si considera que Triple S Salud, Inc. no le ha provisto estos servicios o han discriminado de cualquier otra manera por motivos de raza, origen nacional, color, edad, sexo o incapacidad, comuníquese con:

Oficina de Cumplimiento y Privacidad
P.O. Box 11320, San Juan, PR 00922-9905
Teléfono: (787) 620-1919 ext. 4183
Fax: (787) 993-3260
Correo electrónico: privacidad@sspr.com

Puede presentar su querella en persona, por correo, fax o correo electrónico. Si necesita ayuda para presentar su querella, un Representante de Servicio está disponible para ayudarle.

Usted puede presentar su querella por violación a los derechos civiles con el Departamento de Salud y de Recursos Humanos de Estados Unidos, Oficina de Derechos Civiles de forma electrónica a través de su portal: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, por correo, o por teléfono al:

200 Independence Ave, SW Room 509F, HHH Bldg Washington, D.C. 20201
Teléfono: 1-800-368-1019, TDD: 1-800-537-7697

Call the customer service number on your ID card for assistance.

請撥打您 ID 卡上的客服號碼以尋求中文協助。

Gọi số dịch vụ khách hàng trên thẻ ID của quý vị để được hỗ trợ bằng Tiếng Việt.

한국어로 도움을 받고 싶으시면 ID 카드에 있는 고객 서비스 전화번호로 문의해 주십시오.

Para sa tulong sa Tagalog, tumawag sa numero ng serbisyo sa customer na nasa inyong ID card.

Обратитесь по номеру телефона обслуживания клиентов, указанному на Вашей идентификационной карточке, для помощи на русском языке.

العربية باللغة المساعدة على للحصول هويتك بطاقة على الموجود العملاء خدمة برقم اتصل.

Rele nimewo sèvis kliyantèl ki nan kat ID ou pou jwenn èd nan Kreyòl Ayisyen.

Pour une assistance en français du Canada, composez le numéro de téléphone du service à la clientèle figurant sur votre carte d'identification.

Ligue para o número de telefone de atendimento ao cliente exibido no seu cartão de identificação para obter ajuda em português.

Aby uzyskać pomoc w języku polskim, należy zadzwonić do działu obsługi klienta pod numer podany na identyfikatorze.
日本語でのサポートは、IDカードに記載のカスタマーサービス番号までお電話でお問い合わせください。

Per assistenza in italiano chiamate il numero del servizio clienti riportato nella vostra scheda identificativa.

Rufen Sie den Kundendienst unter der Nummer auf Ihrer ID-Karte an, um Hilfestellung in deutscher Sprache zu erhalten.
برای دریافت راهنمایی به زبان فارسی ، با شماره خدمات مشتری که بر روی کارت شناسایی شما درج شده است تماس بگیرید.

Notice: Informing individuals about nondiscrimination and accessibility requirements and nondiscrimination statement: Discrimination is Against the Law

| Triple-S Salud, Inc. complies with applicable federal civil rights laws and does not discriminate, exclude people or treat individuals differently because of race, color, national origin, age, disability, or sex.

| Triple-S Salud, Inc.

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters,
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters,
 - Information written in other languages.

If you need these services, contact a Customer Service Representative.

If you believe that Triple S Salud, Inc. has failed to provide these services or has discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Compliance and Privacy Office
P. O. Box 11320, San Juan, PR 00922-9905
Telephone: (787) 620-1919 ext. 4183
Fax: (787) 993-3260
E-mail: privacidad@ssspr.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, a Service Representative is available to help you.

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

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201
Telephone: 1-800-368-1019, TDD: 1-800-537-7697

Para obtener asistencia en español, llame al servicio de atención al cliente al número que aparece en su tarjeta de identificación.

請撥打您 ID 卡上的客服號碼以尋求中文協助。

Gọi số dịch vụ khách hàng trên thẻ ID của quý vị để được hỗ trợ bằng Tiếng Việt.

한국어로 도움을 받고 싶으시면 ID 카드에 있는 고객 서비스 전화번호로 문의해 주십시오.

Para sa tulong sa Tagalog, tumawag sa numero ng serbisyo sa customer na nasa inyong ID card.

Обратитесь по номеру телефона обслуживания клиентов, указанному на Вашей идентификационной карточке, для помощи на русском языке.

العربية باللغة المساعدة على الحصول على بطاقة على الموجود العلاء خدمة برقم اتصل.

Rele nimewo sèvis kliyantèl ki nan kat ID ou pou jwenn èd nan Kreyòl Ayisyen.

Pour une assistance en français du Canada, composez le numéro de téléphone du service à la clientèle figurant sur votre carte d'identification.

Ligue para o número de telefone de atendimento ao cliente exibido no seu cartão de identificação para obter ajuda em português.

Aby uzyskać pomoc w języku polskim, należy zadzwonić do działu obsługi klienta pod numer podany na identyfikatorze.

日本語でのサポートは、IDカードに記載のカスタマーサービス番号までお電話でお問い合わせください。

Per assistenza in italiano chiamate il numero del servizio clienti riportato nella vostra scheda identificativa.

Rufen Sie den Kundendienst unter der Nummer auf Ihrer ID-Karte an, um Hilfestellung in deutscher Sprache zu erhalten.

برای دریافت راهنمایی به زبان فارسی ، با شماره خدمات مشتری که بر روی کارت شناسایی شما درج شده است تماس بگیرید