

GUIDELINES FOR HEALTHCARE PROFESSIONALS



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Vision Statement

No financial barriers to healthcare.

Mission Statement

To provide funding for specified healthcare benefits, health promotion, health projects and pharmacy services in a sustainable, efficient and customer centric environment.

Statement of Values

At the National Health Fund, we are committed to the highest standards of honesty, integrity and quality. We will at all times be professional in discharging our responsibilites and be guided by noble moral and ethical standards.

Message from the CEO

Dear Healthcare Provider,

This publication serves as a guide for healthcare professionals to assist National Health Fund (NHF) beneficiaries obtain services provided by the Fund.

It provides a complete list of the benefits covered in relation to the NHF Card and the Jamaica Drugs for the Elderly Programme (JADEP) Card. Details include the conditions, pharmaceuticals, diabetic supplies, respiratory devices and diagnostic tests and the limits covered by NHF as at April 30, 2018. In addition, we have included useful information to assist you, our partner, in the delivery of our benefits. The most current information regarding our products and processes are available on the NHF website www.nhf.org.jm

This year, 2018, NHF celebrates its 15th Anniversary. Since its inception in 2003, the NHF's role in the delivery of healthcare in Jamaica has expanded and as at March 2018 NHF now has full responsibility for the management of all public pharmacies in Jamaica. In 2004 NHF took over the administration of the JADEP programme; in 2011 the Fund was given added responsibilities for the management of the procurement,

warehousing and distribution of pharmaceutical and medical sundries for the public health sector. In 2013 the NHF was charged to administer the Government of Jamaica Health (GOJ) Card.

In order to increase access points for pharmaceutical services for public patients, the NHF also expanded the Public Private Sector Pharmacy Partner Programme to 52 partner pharmacies. Under this programme, which began in December 2016, the filling of prescriptions for public patients is outsourced to selected private pharmacies; this is expected to decrease waiting time for public patients. This programme again requires the help of our healthcare professionals for the delivery of improved services to our clients.

We thank all healthcare professionals who have partnered with us throughout the years and as we look to the future our vision is for no financial barriers to health care and supporting the provision of quality healthcare services to the Jamaican populace.

Everton W. Anderson
CHIEF EXECUTIVE OFFICER

The Role of the Medical Doctor

Persons seeking to access NHFCard Individual Benefits must have their condition diagnosed by a registered medical doctor in the private or public sector. This must be one of the sixteen (16) chronic illnesses which the NHF covers.

The registered medical doctor shall certify the person's chronic illness(es) by completing section C of the NHFCard Application form. This shall include an indication of whether the condition is mild or severe.

The registered medical doctor shall ensure that their name, signature, office address, telephone number and Medical Council of Jamaica registration number are captured on the form.

Where there is a change in the severity of a patient's condition, and/ or diagnosis of a new chronic illness

covered, the registered medical doctor shall complete and certify the NHFCard Change Form to have the change effected.

The registered medical doctor shall ensure that their name and Medical Council of Jamaica registration number are clearly spelt and written legibly on the prescriptions to facilitate processing of claims.

THE MEDICAL PRACTITIONER
DETERMINES THE DEGREE OF
ILLNESS AND THE NHFCARD
PROGRAMME ALLOWS FOR MILD
AND SEVERE LIMITS UNDER
EACH CONDITION. THE MAXIMUM
ALLOWANCE OF EACH DRUG
UNDER THESE CATEGORIES IS
STATED IN THIS BOOKLET.

The Role of the NHF Pharmacy Provider

The National Health Fund provides individual benefits to beneficiaries who have been diagnosed with any of the chronic diseases covered and these conditions must be certified by a registered medical doctor.

The Pharmacist plays an important role in the delivery of individual benefits to the beneficiaries. Persons registered with the NHF must submit their NHFCard along with a valid prescription to access benefits.

The NHF does not provide support for Over-The-Counter purchases except for diabetic supplies and respiratory devices. Only prescriptions for items on the NHF Drug List can be covered.

The Pharmacy Provider is required to have available all records of NHF transactions, such as valid prescriptions and signed drug bills, which must be properly filed together and easily retrievable for inspection by the Provider Auditors of the NHF. Original prescriptions should be made available where possible for the audit and copies should not be written specifically for this purpose. Claims for diabetic supplies and respiratory devices will be audited against the signed bills. Audits will be routinely conducted at any time

during the year and providers may be given notice prior to the visit.

The NHF shall reimburse providers a stipulated amount for each item dispensed, in accordance with the Individual Benefits List and the business rules which set the limits and boundaries.

Providers are required to collect from the beneficiary a co-payment which is the difference in the retail price and the subsidy that NHF provides for the medication.

Providers shall conduct transactions with the NHF using a computerized on-line transaction system. The system adjudicates claims in real-time by validating the authenticity of the provider, the beneficiary and the benefit.

Providers have a responsibility to ensure that the submitted claims are for the proprietary labels of drugs that are dispensed to the beneficiaries and NHF's requirements are adhered to during the claims adjudication process. In addition, providers must ensure that the National Drug Codes (NDCs) are correctly mapped to the corresponding pharmaceuticals in their database. The accurate

input of the following during claims processing is critical to the maintenance of database integrity.

- (i) Correct programme
- (ii) Prescriber (name on prescription and drug bill must correspond)
- (iii) Provider number for location
- (iv) Drug Quantity
- (v) Days supply
- (vi) Beneficiary's Card

Any discrepancies discovered could lead to transaction reversals by the NHF and subsidy adjustments would be made where necessary, to subsequent provider payments. Also, further investigations could result in negative consequences.

The NHF Pharmacy Provider is an important member of the healthcare team and provides a critical service in the management and treatment of patients' chronic illnesses. This is achieved through the consistent provision of quality pharmaceuticals, and professional counselling which emphasizes the importance of medication adherence. Pharmacists are strategically placed to inform and remind beneficiaries of the key components of Medication Adherence: the right medication, at the right dose, at the right time of day, for the prescribed period. With

the increased focus on the practice of Pharmaceutical Care, the realization of optimal health can be a reality. The benefits to be derived include but are not limited to:

- Decreased medication errors.
- Increased patient compliance with medication regimen.
- Better chronic disease state management.
- Lessen cost to the patient and community.
- Strong pharmacist-patient relationship.
- Positive health, social and economic outcomes.

Important Information for the Pharmacist

- Ensure that you enter the
 accurate number of days to be
 dispensed for the drug in the
 days supply field. If you enter
 less or more days than required,
 this will affect the overall
 drug benefit allotted to the
 beneficiary.
- If a transaction results in an error message "diagnosis mismatch", where necessary, encourage the beneficiary to have a Change Form completed and the new diagnosis certified by the Medical Practitioner in order to have their record updated and allow access to the prescribed medication.
- Once a claim transaction is approved, the beneficiary is unable to obtain further supplies of the drug within the same day.
- Each beneficiary is allowed an early refill of his/her medication.
 A beneficiary may return for a drug refill when a specified number of days have passed since the last refill. The refill policy was recently revised for greater clarity and the refill time is now standardised for two categories of claims. The refill details are outlined below:
 - Claims with days supply up to 10 days - patients can return 2 days before

- completion, that is, a refill is due on or after Day 8.
- Claims with days supply exceeding 10 days patients can return 4 days before completion. For example if a 30-day supply of Metformin was dispensed on January 1st, The earliest date of refill would be January 26 Also where a 15-day supply was dispensed, the next refill would be due on Day 11.
- Ensure that the correct
 National Drug codes (NDCs)
 are entered for all drugs on
 the Pharmacy drug database
 in order to prevent transaction
 errors, inaccurate payments
 to Providers, and inaccurate
 subsidy benefits to beneficiaries.
 Consult the list of NHF approved
 drugs on the intranet, NHFi.
- Ensure that the prescribing doctor selected for claims processing is the same doctor that wrote the prescription for the drug being claimed.
- The Prescriber ID Validation forms a part of the Claims
 Transaction Processing System and is intended to improve the efficiency and effectiveness of the NHF's audit function and claims processing. For the successful adjudication of claims,

- for each drug dispensed, the name of the correct prescribing doctor must be submitted.
- Claims reversals can be done at your location up to three (3) days after submission of transaction. Please contact your software provider if your system is unable to facilitate this process. If the three days have passed or the reversal is unsuccessful, the Transaction Adjustment Form is to be completed in full, name and signature of pharmacist affixed, and submitted via fax number 754-2640 or email to customercare@nhf.org. jm. Providers are encouraged to confirm receipt of reversal forms by NHF's Customer Care Representatives. Once the Customer Care Department is in receipt of the Transaction Adjustment Form, the provider will be contacted when the reversal has been done.
- Beneficiaries are entitled to diabetic supplies once they have a claim history of at least one approved claim for an antidiabetic drug. In relation to insulin syringes, the beneficiary must be on insulin therapy in order to access this benefit. If the diabetes is not controlled with medication but with diet, the beneficiary must submit a letter of confirmation from the

- physician.
- Beneficiaries enrolled for asthma and who are users of asthma inhalers can obtain NHF subsidies for respiratory devices such as asthma spacers and masks.
- Ensure that your computer is updated promptly with the changes to the NHF/JADEP schedule of benefits. The Individual Benefits List is located on the NHF Intranet and the website www.nhf.org.jm.
- Providers are encouraged to view NHF drug updates and NHF and JADEP drug lists on the NHF website.
- The JADEP and NHFCards are the property of the NHF and should not be kept at the pharmacy but in the possession of the registered cardholder.
- Where a beneficiary card is printed with an expiration date, the said date should be disregarded. The Beneficiary's card remains active and valid for life and should be returned to the National Health Fund where a beneficiary becomes deceased.
- Providers have a responsibility to advise the Provider Relations Department of any changes to the pharmacy details such as location, ownership, name of pharmacy and registering pharmacist that are made

subsequent to the issuance of the Provider Agreement. In order for these changes to be effected, the Provider Application Change Form should be completed and returned with the requisite documents to the NHF. Consult the NHF website for information on the documents required for each change.

- There are instances in which the subsidy for a pharmaceutical is higher than the retail price. In these instances, the NHFCard subsidy will cover 95% of the submitted cost, and the beneficiary's co-payment will be 5%.
- There may be instances of drug failures or adverse reactions with medications. If you become aware of any such cases, please participate in the Drug Monitoring Programme..

 Complete a "Pharmwatch"

 Ministry of Health Drug

 Monitoring Form, which can be obtained from the Standards & Regulation Division, Ministry of Health, and submit as directed.
- Beneficiaries who are travelling overseas and requesting a drug advance must take into the NHF office:
 - (i) A travel itinerary with departure and return dates.

- (ii) A valid and current prescription.
- (iii) Cards (NHFCard and/or JADEP)
- If the member is unable to visit the NHF office, a letter must be written outlining the following details which must be faxed or emailed to the Customer Care Department -customercare @ nhf.org.jm.
 - a. travel itinerary with departure and return dates
 - b. card numbers
 - c. amount of medication being requested

Note: Maximum quantity allowable – three months.
Processing time – 24 hours.
However, if a prescription refill is due, this process may not be necessary.

National Health Fund Intranet (NHFi)

The NHF intranet is a website designed to facilitate the information needs of health care professionals. To access the services offered by this site you will have to log in using your provider number as user name and password. If you are unable to access the site, please contact the Provider Relations Department. Registration is limited only to individuals in the health care industry, who are registered as a NHF Provider.

This interface allows users to:

 Verify drug list for JADEP and NHFCard

- View statement history for the past six (6) months
- Submit JADEP orders electronically
- View prescriber IDs (Medical Council of Jamaica registration number).
- Use NDC Drug Search to verify NDCs
- Access improved service as the NHF is able to respond instantaneously to online queries.

Rejection Messages

The following are the frequent rejection messages received:-

ERROR 1: NON-MATCHED PHARMACY NUMBER

The provider number is not registered in the Transaction Processing System. Contact NHF Customer Care Department

ERROR 2: NDC NOT COVERED

The drug is not listed in the drug database or the incorrect NDC is entered in the pharmacy database. Consult the list of NHF approved drugs on intranet NHFi.

ERROR 3: PATIENT/CARDHOLDER I.D. NAME MISMATCH

Beneficiary has submitted wrong benefit card or the version of card processed by pharmacist is different from that seen in the system.

ERROR 4: PROVIDER NOT CONTRACTED WITH PLAN ON DATE OF SERVICE

Pharmacist uses wrong Provider I.D./Number to swipe benefit card.

ERROR ${\bf 5}$: PLAN LIMITATIONS EXCEEDED - The explanation can be one of the following:-

- The amount entered exceeds the drug limit for the current go-day period because the quantity allowed has been exhausted or the amount entered exceeds the drug balance.
- Pharmacist has entered the incorrect number of days in the days supply field which has exceeded the daily limit.
 Enter the correct days supply and resubmit.
- –The prescribed daily dosage exceeds the daily limit relating to the category of illness for which the beneficiary was enrolled. Advise the beneficiary to have a change form completed

ERROR 5: REFILL TOO SOON

The beneficiary has returned too early for a drug refill.

ERROR 6: DRUG-DIAGNOSIS MISMATCH

The beneficiary is not enrolled for the illness for which the drug is prescribed. Advise the beneficiary to have a Change Form completed.

ERROR 7: NO PRIOR APPROVED INSULIN/DIABETIC DRUG BENEFIT

The beneficiary is not eligible for diabetic supplies as he/she has no prior record of an approved claim for an anti-diabetic drug.

ERROR 8: "M/I PRESCRIBER I.D". (the prescriber is not listed in the database).

Ensure that you enter Prescriber ID (Doctor's Medical Council of Jamaica Registration number) indicated on the prescription to process same. If the transaction results in an error message, kindly visit the NHF Intranet to view the list of registered prescribers.

ERROR9: NON-MATCHED PRESCRIBER I.D.

The prescribing doctor is not approved by the NHF for this specific drug. The drug claim is only payable if the prescribing doctor is a specialist and is listed in the NHF's database

ERROR 10: MEMBER NOT FOUND ON FILE

Contact the NHF Customer Care Department

NHFCard

Diabetic Supplies Programme

Instructions for NHFCard holders to obtain Glucometers and Insulin Penfill Applicators.

The beneficiary must decide on the specific item he/she wishes to obtain. A list of the items available is published and the beneficiary may seek advice from their medical doctor or pharmacist on their purpose and use.

STEP Call the NHF Customer Service 1-888-DIAL NHF (342-5643) and provide them with the following information:—

- name
- NHFCard number
- the name/brand of the item you wish to obtain
- contact telephone number
- The NHF will validate your information to ensure that you are a beneficiary enrolled for Diabetes

Once the status has been verified, the NHF will pass on the following information to the appropriate distributor:-

- name
- NHFCard number
- name/brand of the item you wish to obtain
- contact telephone number

The distributor shall contact the beneficiary to determine where andwhen delivery shall be made, within three weeks.

Glucometers provided by Distributors in collaboration with NHF:-

- Accuchek Performa Glucometer Lasco
- Accuchek Active Glucometer Lasco
- Advocate Redi-Code Plus Glucometer Servi-Care LTD
- Advocate Redi-Code Plus Blood Glucose Monitoring System -Qualcare
- Freestyle Optium Neo Glucometer Massy Distribution

- Freestyle Precision Neo Glucometer Massy Distribution
- On Call Plus Glucometer Health Care Marketing
- On Call Plus Simple Blood Glucose Monitoring System Health Care Marketing
- Standard Diagnostic (SD) Codefree Glucometer Recharged Distributors
- TRUEbalance Glucometer Jamaica Hospital Supplies
- True Results Glucometer T. Geddes Grant

Other diabetic supplies provided free of charge include:

• Humapen - Health Brands Ltd.

NB. Beneficiaries shall be entitled to a glucometer every two years.

NHF HbA1c Benefit for Diabetics

The haemoglobin A1c test (also called H-b-A-one-c) is a simple lab test that shows the average blood glucose level over the last 3 months in order to determine if a person's blood glucose level is within the normal range. It is the best measurement that can be used by a health care provider to monitor the blood glucose level in diabetics.

The NHF covers the Hb A1c (A1c) test as a NHFCard benefit. The objectives are:

- To provide a measurement of blood glucose level at the point of care to efficiently and adequately monitor glycemic control.
- To reduce the cost of HbA1c test to beneficiaries and thereby increasing the frequency of tests done.
- Improve the management and care of diabetics in order to reduce the long term complications and associated costs.

NHF diabetics are allowed four A1c tests annually and each second test is allowed every ninety (90) days. Non-diabetics are allowed one test annually. NHF will pay a subsidy of four hundred (\$400.00) per A1c test to the provider.

The Nyco Card Reader II or Standard Diagnostic (SD) A1c Care instruments are available on loan to medical practitioners, hospitals, pharmacies and laboratories for use at the point of care. These providers will purchase the tests kits and all consumables from the local distributor of the respective instrument.

The NHFCard beneficiary is able to access the A1c benefit at participating providers (hospitals, laboratories, medical practitioners, pharmacies and other authorized medical facilities.).

The NHF will ensure that providers are trained in the proper use and care of the instruments. Providers may claim the subsidy payment from the NHF electronically or manually and the beneficiary will make a co-payment which will be the difference between the cost of the test at the provider and the NHF subsidy.

Breast Receptor Studies

Breast Cancer Receptor Studies has been covered on the NHFCard benefits since April 2014. Breast cancer cells are tested to determine receptor status, whether they have hormone receptors or biological therapy receptors.. This test is a diagnostic procedure done in the laboratory.

The NHFCard covers a maximum of two tests for NHF's beneficiaries diagnosed with Breast Cancer.

Payments to Pharmacy Providers

The NHF will reimburse the provider for all valid claims within fourteen calendar days after the claims are electronically adjudicated. The e-payment facility is the method of payment to all providers.

Benefits of e-payment include:

- Fast and secure receipt of funds (fastest method of payment in Jamaica)
- Immediate availability of funds for use
- Eliminates the possibility of lost or misplaced cheques
- The ability to receive large value and time critical funds

Providers should contact the Provider Relations Department if there are any queries.

NHF Co-ordination of Benefits (NHFCoB)

The NHFCoB is a mechanism which has been in place since June 2008 and was developed to make it easier for NHF provider pharmacies to efficiently process prescriptions using multiple healthcards from various carriers. It reduces the administrative burden on pharmacies and also improves efficiency and reduces cost.

NHFCoB enables NHF beneficiaries to maximize their health insurance benefits and further reduce their out-of-pocket payments. NHF beneficiaries, who have multiple health cards and are filling a prescription for a drug covered by the NHF, need only present one of their cards at a NHF participating pharmacy that also participates in the CoB programme. The pharmacist only needs to swipe a single card from either the NHF or another health insurance carrier to adjudicate the claim, and the beneficiary will be able to obtain drug benefits from all cards for which he/she is registered.

Provider pharmacies participating in the programme submit claims electronically to the NHF so that there is only one payor rather than several claims sent to various carriers

In order to become a NHFCoB Provider you can submit a written request to NHF and contact your software provider to enquire about the computer application to facilitate the Coordination of Benefits, (NHFCoB) for NHF beneficiaries, who are members of other health insurance plans. We encourage you to become providers for this programme, as very soon, the beneficiaries will be demanding this service.

Please remember, that the NHFCard can be utilized in pharmacies within the public sector.

For more information call 1-888-DIAL NHF (342-5643) or visit our website at www.nhf.org.jm.

NHFCard Individual Benefits - Conditions Covered

NHF Pharmaceutical Benefits directly address the needs of persons with chronic diseases by providing financial support for the specified drugs that are prescribed by medical practitioners for the listed conditions:

- 1. Arthritis
- 2. Asthma
- 3. Benign Prostatic Hyperplasia (BPH)
- 4. Breast Cancer
- 5. Diabetes Mellitus
- 6. Epilepsy
- 7. Glaucoma
- 8. High Cholesterol (dyslipidemia)
- 9. Hypertension
- 10. Ischaemic Heart Disease
- 11. Major Depression
- 12. Prostate Cancer
- 13. Psychosis
- 14. Rheumatic Fever/Heart Disease
- 15. Sickle Cell Disease
- 16. Vascular Disease

NHFCard Dosage Limits

For Pharmaceuticals and Devices

Arthritis	Drug Limits Mild	Severe	Freq.
Aceclofenac Tablets 100mg	200mg	200mg	day
Aceclofenac CR Tablets 200mg	200mg	200mg	day
Aceclofenac & Paracetamol			
Tablets 100mg/500mg	2 tabs	2 tabs	day
Acemetacin Tablets 6omg, 9omg	120mg	18omg	day
Adalimumab 40 mg Inj.			
Pack of 2	N/A	3 packs	qtr
Azathioprine Tablets 50mg	N/A	100mg	day
Celecoxib Capsule			
100mg, 200mg	200mg	400mg	day
Deflazacort tablets 6mg	12mg	18mg	day
	36o tabs	540 tabs	annum
Deflazacort Tablets 3 omg	N/A	90 tabs	annum
Diclofenac Tablets 50mg, 25mg,			
46.5mg, 75mg	150mg	200mg	day
Diclofenac Oral Susp.			
9mg/5ml x 120ml	54mg	81mg	day
Diclofenac Drops	3 bottles	6 bottles	qtr
Diclofenac & Vits. B1, B6,			
B ₁₂ N Tablets	3 tabs	3 tabs	day
Diclofenac & Vits B1, B6,			
B12 XR Tablets	1 tab	1 tab	day
Dexketoprofen Tablets 25 mg	75mg	75mg	day
Etoricoxib Tablets 6 omg,			
90mg, 120mg	9omg	120mg	day
Etanercept 25mg injection kit	N/A	6 kits	qtr
Etanercept 25mg injection	NIZA		
Single Vial	N/A	24 vials	qtr
Etanercept 50mg injection kit Etanercept 50mg injection	N/A	3 kit	qtr
Single Syringe	N/A	12 Syr	qtr
Golimumab 5omg/o.5ml injection		•	•
Single auto-injector	150mg	150mg	qtr
Hydroxychloroquine Sulphate	- -		•
Tablets 200mg	400mg	400mg	day
Ibuprofen Tablets 400mg, 600mg	1600mg	2400mg	day
Indomethacin Capsules 50mg	150mg	200mg	day
Infliximab 100mg injection	N/A	6 vials	qrt

Drug Limits Mild	Severe	Freq.
1сар	1сар	day
20mg 7.5mg	20mg 15mg	day day
90mg 1000mg 20mg	240mg 1250mg 40mg	qtr day day
5mg N/A	6omg	day day Complete
N/A	12 G	treatment Complete treatment
2400mg	2400mg	qtr
N/A 120 caps	12 vials 240 caps	qrt qtr
120 tabs 60 tabs 9 bots	240 tabs 120 tabs	qtr qtr qtr
180 tabs	240 tabs	qtr
Drug Limits		
Mild	Severe	Freq.
3 inhalers 3 inhalers	6 inhalers 6 inhalers	qtr qtr
3 inhalers	6 inhalers	qtr
180 caps.	180 caps.	qtr
6 Pks 4 packs	6 Pks 4 packs	qtr qtr
	mild 1cap 2omg 7.5mg 9omg 1ooomg 2omg 15mg 5mg N/A N/A 240omg N/A 120 caps 120 tabs 60 tabs 9 bots. 180 tabs Drug Limits Mild 3 inhalers 3 inhalers 3 inhalers 180 caps.	MildSevere1cap1cap2omg 7.5mg2omg 15mg9omg 1000mg 20mg 15mg240mg 1250mg 40mg 60mg5mg N/A60mg 12GN/A12G2400mg 120 caps2400mgN/A12 vials 240 caps120 tabs 60 tabs 9 bots.240 tabs 120 tabs 9 bots.180 tabs240 tabsDrug Limits MildSevere3 inhalers 3 inhalers 3 inhalers6 inhalers 6 inhalers 6 inhalers3 inhalers 180 caps.180 caps.6 Pks6 Pks

Asthma cont'd	Drug Limits Mild	Severe	Freq.
Budesonide Neb. Soln. Single Amp.	1 amp	1 amp	day
Deflazacort tablets 6mg	•	18mg	day for
Deliazacort tablets oring	12mg (360 tabs)	(54otabs)	180 days per year
Deflazacort tablets 30mg Fenoterol Inhaler 100mcg/dose	N/a	90 tabs 6 inhalers	annum
Fenoterol Syrup 2.5mg/5ml	3 inhalers 7.5mg (15ml)	7.5mg (15ml)	qtr day
Fluticasone Inhaler 50mcg/dose 60 Doses	6 inhalers	12 inhalers	qtr
Fluticasone Inhaler 50mcg/dose 120 Doses	3 inhalers	6 inhalers	qtr
Fluticasone Inhaler 125mcg, 25omcg/dose - 60 Doses Fluticasone & Vilanterol Powder	6 inhalers	12 inhalers	qtr
for Inhalation 100mcg/25mcg 30Doses Fluticasone & Vilanterol Powder	3 inhalers	3 inhalers	qtr
for Inhalation 200mcg/25mcg 30 Doses Formoterol Caps Pwd. for	3 inhalers	3 inhalers	qtr
Inhalation 12 mcg-Single Cap Formoterol Caps Pwd. for	180 caps.	180 caps.	qtr
Inhalation 12 mcg-Pack	6 Pks	6 Pks	qtr
Formoterol & Budesonide Inhaler 4.5mcg/16omcg-6o Doses	3 inhalers	6 inhalers	qtr
Formoterol & Budesonide Inhaler 4.5mcg/16omcg-120 Doses	3 inhalers	3 inhalers	qtr
Formoterol & Budesonide Inhaler 4.5mcg/8omcg-120 Doses	3 inhalers	3 inhalers	qtr
Formoterol & Budesonide Inhaler 4.5mcg/8omcg- 6o Doses	3 inhalers	6 inhalers	qtr
Formoterol & Budesonide Inhaler gmcq/32omcq- 60 Doses	3 inhalers	6 inhalers	qtr
Formoterol & Budesonide Inhaler 6mcg/100mcg-120doses	3 inhalers	3 inhalers	qtr
Formoterol & Budesonide inhaler 6mcg/200mcg- 120doses Ipratropium Bromide Nebulizing	3 inhalers	3 inhalers	qtr
Soln. 250mcg/ml	3 bottles	6 bottles	qtr

Asthma cont′d	Drug Limits Mild	Severe	Freq.
Ipratropium Bromide Inhaler	a inhalore	6 inhalers	atr
20mcg/Dose Levocetirizine Dihydrochloride &	3 inhalers	o iiiiidieis	qtr
Montelukast Sodium Tablets 5mg/10mg	1 tab	1 tab	day
Levosalbutamol Inhaler 50mcg/dose – 200 Doses	3 inhalers	6 inhalers	qtr
Montelukast Tablet 4mg, 5mg, 10mg	5mg	10mq	day
Montelukast Oral Granules 4mg	1 pk	ı pk	day
Prednisolone Tablets 5mg Prednisolone Syrup 15mg/5ml,	15mg	4omg	day
10mg/5ml, 5mg/5ml	15mg	4omg	day
Prednisone Tablets 5mg	15mg	4omg	day
Salbutamol Tablets 4mg	12mg	16mg	day
Salbutamol Syrup 2mg/5ml	6mg	8mg	day
Salbutamol Inhaler 100mcg/Dose Salbutamol Nebulizing	3 inhalers	6 inhalers	qtr
Solution 0.5%	3 bottles	6 bottles	qtr
Salbutamol Nebulizing			
Solution o.1% - pack	3 pks	6 pks	qtr
Salbutamol Nebulizing			
Solution o.2% - pack	3 pks	3 pks	qtr
Salbutamol & Beclomethasone			
Inhaler	3 inhalers	6 inhalers	qtr
Salbutamol & Ipratropium			
Inhaler 120mcg/20mcg Salbutamol & Ipratropium Inh.	3 inhalers	6 inhalers	qtr
Solution - Pack Salbutamol & Ipratropium Inh.	3 pks	3 pks	qtr
Solution - Single vial	6o vials	6o vials	qtr
Salmeterol Inhaler 25mcg	3 inhalers	6 inhalers	qtr
Salmeterol & Fluticasone Inhaler	J		4
25mcg/5omcg, 5omcg/10omcg,			
50mcg/250mcg, 50mcg/500mcg			
6o Doses	3 inhalers	6 inhalers	qtr
Salmeterol & Fluticasone Inhaler	3		'
25mcg/50mcg, 25mcg/125mcg,			
25mcg/25omcg, 5omcg/25omcg			
120 doses	3 inhalers	3 inhalers	qtr
Tiotropium Caps Pwd for	-	-	
Inhalation	3 pks	3 pks	qtr

Asthma Respiratory Devices	Drug Limits Mild	Severe	Freq.
Asthma spacer	1	1	3 years
Asthma mask	1	1	annum
Asthma spacer & mask combined	1	1	3 years
Benign Prostatic	Drug Limits Mild	Severe	Freq.
Hyperplasia (BPH)		0	-
Doxazosin Tablets 2mg, 4mg	4mg	8mg	day
Dutasteride Capsule o.5mg Dutasteride & Tamsulosin	o.5mg	o.5mg	day
Capsules o.5mg/o.4mg	1 cap	1 сар	day
Finasteride Tablets 5mg	5mg	5mg	day
Silodosin Capsules 4mg	2 caps	2 caps	day
Silodosin Capsules 8mg	1 cap	1 cap	day
Tamsulosin Tablets o.4mg Terazosin Tablets 1mg, 2mg,	o.4mg	o.8mg	day
5mg, 10mg	5mg	10mg	day
Terazosin Starter Pack	1 pk	1 pk	qtr
	Drug Limits		
	_		
Breast Cancer	Mild	Severe	Freq.
Breast Cancer Anastrozole Tablets1mg Cyclophosphamide Inj. 200mg,	_	Severe 1mg	Freq. day
Anastrozole Tablets1mg	Mild		
Anastrozole Tablets1mg Cyclophosphamide Inj. 200mg,	Mild	1mg	day Complete treatment Complete
Anastrozole Tablets1mg Cyclophosphamide Inj. 200mg, 500mg, 1gm Docetaxel Inj. 20mg, 80 mg,	Mild 1mg 7200mg	1mg 7200mg	day Complete treatment
Anastrozole Tablets1mg Cyclophosphamide Inj. 200mg, 500mg, 1gm Docetaxel Inj. 20mg, 80 mg, 120mg	Mild 1mg 7200mg 1080mg	1mg 7200mg 1080mg	day Complete treatment Complete treatment Complete treatment (1080mg) Complete treatment
Anastrozole Tablets1mg Cyclophosphamide Inj. 200mg, 500mg, 1gm Docetaxel Inj. 20mg, 80 mg, 120mg Docetaxel Inj. 20mg	Mild 1mg 7200mg 1080mg 54 vials	1mg 7200mg 1080mg 54 vials	day Complete treatment Complete treatment Complete treatment (1080mg) Complete
Anastrozole Tablets1mg Cyclophosphamide Inj. 200mg, 500mg, 1gm Docetaxel Inj. 20mg, 80 mg, 120mg Docetaxel Inj. 20mg Docetaxel Inj. 80mg	Mild 1mg 7200mg 1080mg 54 vials	1mg 7200mg 1080mg 54 vials 14 vials	day Complete treatment Complete treatment Complete treatment (1080mg) Complete treatment (1080mg) Complete treatment

Breast Cancer cont'd	Drug Limits Mild	Severe	Freq.
Fluorouracil Inj. 250mg, 500mg, 1gm Fulvestrant inj. 250mg/5mL Gemcitabine Hydrochloride	400mg 28 vials	2400mg 28 vials	month annum
inj. 200mg, 1G	40G	40G	Complete treatment
Goserelin Inj. 3.6mg Goserelin Inj. 10.8mg Letrozole Tablets 2.5mg	3 vials 1 vial 2.5mg	3 vials 1 vial 2.5mg	qtr qtr day
Leuprolide Inj. 3.75mg, 7.5mg Leuprolide Inj. 11.25mg Methotrexate Inj. 50mg, 1gm	3 vials 1 vial 600mg	3 vials 1 vial 600mg	qtr qtr qtr
Methotrexate Tablets 2.5mg, 10mg Paclitaxel Inj.all strengths	200mg 1800mg	200mg 1800mg	month Complete
Tamoxifen Citrate Tablets 10mg, 20mg	20mg	4omg	treatment day
Breast Cancer - Adjunct	Drug Limits Mild	Severe	Freq.
Breast Cancer - Adjunct Tramadol Capsules 50 mg Tramadol L.A.Tablets 100mg Tramadol Drops Tramadol & Acetaminophen Tablets	•	240 caps 120 tabs 12 bots.	qtr qtr qtr
Adjunct Tramadol Capsules 50 mg Tramadol L.A.Tablets 100mg Tramadol Drops Tramadol & Acetaminophen	Mild 120 caps 60 tabs 9 bots.	240 caps 120 tabs	qtr qtr
Adjunct Tramadol Capsules 50 mg Tramadol L.A.Tablets 100mg Tramadol Drops Tramadol & Acetaminophen Tablets Tramadol Effervescent Tablets	Mild 120 caps 60 tabs 9 bots. 180 tabs	240 caps 120 tabs 12 bots. 240 tabs	qtr qtr qtr qtr
Adjunct Tramadol Capsules 50 mg Tramadol L.A.Tablets 100mg Tramadol Drops Tramadol & Acetaminophen Tablets Tramadol Effervescent Tablets 50mg Diabetes Acarbose Tablets 25mg, 50mg, 100mg	Mild 120 caps 60 tabs 9 bots. 180 tabs 120 tabs Drug Limits	240 caps 120 tabs 12 bots. 240 tabs	qtr qtr qtr qtr
Adjunct Tramadol Capsules 50 mg Tramadol L.A.Tablets 100mg Tramadol Drops Tramadol & Acetaminophen Tablets Tramadol Effervescent Tablets 50mg Diabetes Acarbose Tablets 25mg, 50mg,	Mild 120 caps 60 tabs 9 bots. 180 tabs 120 tabs Drug Limits Mild	240 caps 120 tabs 12 bots. 240 tabs 240 tabs	qtr qtr qtr qtr qtr

Diabetes cont'd	Drug Limits Mild	Severe	Freq.
Gliclazide Tablets MR 30mg,			
MR 6omg	6omg	120mg	day
Glimepiride Tablets 3mg	1 tab	2 tabs	day
Glimepiride Tablets 2mg, 4mg	4mg	8mg	day
Glimepiride & Metformin Tablets		J	,
All strengths	1 tab	2 tabs	day
Glipizide Tablets C.R. 10mg,			,
5mg	10mg	20mg	day
Insulin Inj. (all labels) 100u/ml	3	3	,
10ml vial	6 vials	9 vials	qtr
Insulin Penfill/Pen Inj. (all labels)		3	'
3ml x 5	6 pks	6 pks	qtr
Insulin Penfill/Pen Inj. (all labels)	1-	r -	1-
1.5ml x 5	9 pks	12 pks	qtr
Insulin Penfill/Pen Inj. (all labels)	J P.1.5	p.13	9
Single 3ml	21Cart/Pens	30 Cart/Pens	qtr
Insulin Penfill/Pen Inj. (all labels)	ZICarqi Ciis	30 carqrens	90
Single 1.5ml	42 Cart	6o Cart	qtr
Linagliptin Tablets 5mg	1 tab	1tab	day
Metformin Tablets 500mg,	1 (05	100	auy
850mg, 1000mg	1700mg	3000mg	day
Metformin XR Tablets 500mg	1500mg	2000mg	day
Metformin & Glibenclamide	1,001119	20001119	auy
Tablets 250mg/1.25mg	2 tabs	4 tabs	day
Metformin & Glibenclamide	2 (003	4 (00)	auy
Tablets 500mg/2.5mg	2 tabs	4 tabs	day
Metformin & Glibenclamide	2 (003	4 (abs	uay
Tablets 500mg/5mg	2 tabs	4 tabs	day
Metformin & Glibenclamide	2 (abs	4 (abs	uay
Tablets 1000mg/5mg	2 tabs	3 tabs	day
Pioglitazone Tablets 15mg,	2 (003	3 (ab)	uay
	aoma	/ Fma	day
30mg, 45mg	3omg	45mg	uay
Pioglitazone & Metformin SR	a + > b	2 +2 bs	day
Tablets 15mg/500mg Pioglitazone & Metformin SR	1 tab	3 tabs	day
	4+ab	- +ab	day
Tablets 30mg/500mg	1tab	1 tab	day
Repaglinide Tablets 1mg, 2mg	6mg	16mg	day
Saxagliptin & Metformin	- 4-6-	- 4-6-	da
Chlorhidrate Tablets 2.5mg/1G	2 tabs	2 tabs	day
Saxagliptin & Metformin			٠ اـ
Chlorhidrate Tablets 5mg/1G	1 tab	1 tab	day
Sitagliptin Tablets 25mg, 50mg,			.i
100mg	100mg	100mg	day

Diabetes cont'd	Drug Limits Mild	Severe	Freq.
Sitagliptin & Metformin Tablets			
50mg/50omg Sitagliptin & Metformin Tablets	2 tabs	2 tabs	day
50mg/1000mg	2 tabs	2 tabs	day
Vildagliptin 50mg Vildagliptin and Metformin HCl 50mg/500mg, 50mg/850mg,	2 tabs	2 tabs	day
5omg/1000mg	2 tabs	2 tabs	day
	Drug Limits		
Diabetes - Adjunct	Mild	Severe	Freq.
Atorvastatin Tablets 10mg, 20mg,			
4omq	20mg	8omg	day
Candesartan Tablets 8mg, 16mg,			/
32mg	16mg	32mg	day
Candesartan & Hydrochlorothiazide	9		
16mg/12.5mg	1 tab	1 tab	day
Candesartan & Hydrochlorothiazide			
32mg/12.5mg	45tabs	9otabs	qtr
Candesartan & Hydrochlorothiazide			
32mg/25mg	45tabs	9otabs	qtr
Captopril Tablets 12.5mg, 25mg,	=====	10000	davi
50mg Carbamazepine Tablets 100mg,	5omg	100mg	day
200mg, 400mg	1200mg	2000mg day	
Carbamazepine Susp. 100mg/5ml	600mg	1000mg	day
Enalapril Tablets 2.5mg, 5mg,	ooonig	10001119	auy
10mg, 20mg	20mg	4omg	day
Enalapril & Hydrochlorothiazide	3	. 3	,
Tablets 10mg/25mg,			
20mg/12.5mg	1 tab	2 tabs	day
Ezetimibe Tablets 10mg	10mg	10mg	day
Ezetimibe and Simvastatin			
Tablets all strengths	1 tab	1 tab	day
Fosinopril Tablets 5mg, 10mg	5mg	10mg	day
Fosinopril & Hydrochlorothiazide			
Tablets	1 tab	2 tabs	day
20mg/12.5mg			
Fluvastatin Tablets 20mg,	, oma	9ama	day
4omg, XL 8omg	4omg	8omg	day

Diabetes - Adjunct cont'd	Drug Limits Mild	Severe	Freq.
Gabapentin Capsules 100mg, 300mg, 400mg Gemfibrozil Tablets 600mg Irbesartan Tablets 150mg, 300mg	1200mg 1200mg 150mg	3600mg 1200mg 300mg	day day day
Irbesartan & Hydrochlorothiazide Tablets 150mg/12.5mg	ı tab	1 tab	day
Irbesartan & Hydrochlorothiazide Tablets 300mg/12.5mg Irbesartan & Hydrochlorothiazide	45 tabs	90 tabs	qtr
Tablets 300mg/25mg	45 tabs	90 tabs	qtr
Ketanserin Gel. 78gm Lisinopril Tablets 2.5mg, 5mg,	6 tubes	6 tubes	annum
10mg, 20mg Lisinopril & Hydrochlorothiazide	20mg	4omg	day
Tablets 20mg/-12.5mg Losartan Tablets 25mg, 50mg,	1 tab	2 tabs	day
100mg Losartan & Hydrochlorothiazide	50mg	100mg	day
Tablets 100mg/25mg Losartan & Hydrochlorothiazide	45 tabs	90 tabs	qtr
Tablets- 100mg/12.5mg Losartan & Hydrochlorothiazide	45 tabs	90 tabs	qtr
Tablets - 50mg/12.5mg Lovastatin Tablets 20mg, 40mg Nicotinic Acid CR Tablets	1 tab 20mg	2 tabs 6omg	day day
500mg, 750mg Oxcarbazepine Tablets 300mg,	1.59	2.0g	day
600mg Oxcarbazepine Susp. 300mg/5ml Perindopril Tablets 2mg, 4mg Perindopril Tablets 5mg, 10mg Perindopril & Indopenido Tablets	1200mg 600mg 4mg 5mg	2400mg 1200mg 8mg 10mg	day day day day
Perindopril & Indapamide Tablets 2.5mg/o.625mg Perindopril & Indapamide Tablets	1 tab	1 tab	day
5mg/1.25mg Perindopril & Indapamide Tablets	1 tab	1 tab	day
10mg/2.5mg Pravastatin Tablets 10mg, 20mg,	45 tabs	90 tabs	qtr
4omg	20mg	4omg	day

Diabetes - Adjunct cont'd	Drug Limits Mild	Severe	Freq.
Pregabalin Capsules 50mg, 75mg,			
150mg, 300mg	300mg	6oomg	day
Quinalapril Tablets 5mg, 10mg,			
20mg	20mg	4omg	day
Ramipril Tablets 2.5mg, 5mg,			
10mg	10mg	20mg	day
Ramipril & Hydrochlorothiazide			
Tablets 2.5-12.5mg	2 tabs	4 tabs	day
Rosuvastatin Tablets 5mg, 10mg,			
20mg, 40mg	20mg	4omg	day
Simvastatin Tablets 10mg, 20mg	20mg	4omg	day
Simvastatin Tablets 4omg	20mg	8omg	day
Telmisartan Tablets 8 omg	8omg	8omg	day
Telmisartan & Hydrochlorothiazide			
Tablets- 8omg/12mg	1 tab	1 tab	day
Telmisartan & Hydrochlorothiazide			
Tablets- 8omg/25mg	1 tab	1 tab	day
Valsartan Tablets 4omg, 8omg,			
160mg, 320mg	16omg	320mg	day
Valsartan & Hydrochlorothiazide			
Tablets - 8omg/12.5mg	1 tab	1 tab	day
Valsartan & Hydrochlorothiazide			
Tablets- 16omg/12.5mg	1 tab	1 tab	day
Valsartan & Hydrochlorothiazide			
Tablets- 16omg/25mg	1 tab	1 tab	day
Valsartan & Hydrochlorothiazide			
Tablets 320mg/12.5mg	45 tabs	90 tabs	qtr
Valsartan & Hydrochlorothiazide			
Tablets 320mg/25mg	45 tabs	90 tabs	qtr
Zinc Hyaluronate Gel 15g	12 tubes	24 tubes	annum
	Drug Limits		
Diabetic Supplies	Mild	Severe	Freq.
Glucometer Strips 50s	3 boxes	3 boxes	qtr
Insulin Pen Needles 100s	200 Ndls.	200 Ndls.	qtr
Insulin Syringes	180 syrs.	180 syrs.	
Lancets 100s, 200s	200 Syrs.	200 Syrs.	qtr atr
Urine Test Strips 50s	2 Packs	2 Packs	qtr qtr
Urine Test Strips 100s	1 Pack	1 Packs	
Ottile test stribs 1002	TIGCK	TLACK	qtr

Epilepsy	Drug Limits Mild	Severe	Freq.
Carbamazepine 100mg, 200mg,			
400mg	1200mg	2000mg	day
Carbamazepine Susp. 100mg/5ml Divalproex Sodium Tablets	6oomg	1000mg	day
250mg, 500mg Gabapentin Capsules 100mg,	2000mg	2500mg	day
300mg, 400mg Lamotrigine Tablets 25mg, 50mg,	1200mg	36oomg	day
100mg, 150mg Levetiracetam Tablets 500mg,	200mg	400mg	day
1000mg	2000mg	3000mg	day
Levetiracetam Solution 10% Oxcarbazepine Tablets 300mg,	6 bots	9 bots	qtr
6oomg	1200mg	2400mg	day
Oxcarbazepine Susp. 300mg/5ml	6oomg	1200mg	day
Phenobarbital Tablets 30mg	9omg	18omg	day
Phenytoin Capsules 100mg, 50mg Pregabalin Capsules 50mg, 75mg,	300mg	500mg	day
150mg, 300mg Sodium Valproate Capsules	300mg	6oomg	day
200mg, 300mg, 500mg Sodium Valproate Syrup	2000mg	2500mg	day
200mg/5ml	2000mg	2500mg	day
Valproic Acid Syrup 250mg/5ml Topiramate Tablets 25mg, 50mg,	2000mg	2500mg	day
100mg	200mg	400mg	day
Valproic Acid Capsules 250mg	2000mg	2500mg	day
	Drug Limits	_	_
Glaucoma	Mild	Severe	Freq.
Acetazolamide Tablets 250mg Betaxolol Eye drops 0.25%,	750mg	1000mg	day
o.5% - 5ml Betaxolol Eye drops o.25%	3 vials	6 vials	qtr
10ml	3 vials	3 vials	qtr
Bimatoprost Eye Drops o.o1%	3 vials	3 vials	qtr
Bimatoprost Eye Drops 0.03% Brimonidine Eye Drops 0.15%,	3 vials	6 vials	qtr
o.2% - 5ml Brimonidine Eye Drops o.15%	3 vials	6 vials	qtr
ıoml	3 vials	3 vials	qtr

Glaucoma cont'd	Drug Limits Mild	Severe	Freq.
Brimonidine & Timolol Eye Drops			
o.2% o.5% - 5ml	3 vials	6 vials	qtr
Brinzolamide Eye Drops 1 %			
5ml	3 vials	6 vials	qtr
Brinzolamide Eye Drops 1 %			
10ml	3 vials	3 vials	qtr
Brinzolamide 1% and Timolol			
o.5% - 5ml	3 vials	6 vials	qtr
Canabis Sativa Eye Drops	3 vials	6 vials	qtr
Dorzolamide Eye Drops 2%	3 vials	6 vials	qtr
Dorzolamide & Timolol Eye Drops	3 vials	6 vials	qtr
Latanoprost Eye Drops o.oo5%	3 vials	6 vials	qtr
Latanoprost & Timolol Eye Drops	3 vials	6 vials	qtr
Levobunolol Eye Drops 0.5%			
5ml	3 vials	6 vials	qtr
Levobunolol Eye Drops 0.5%			
10ml	3 vials	3 vials	qtr
Pilocarpine Eye Drops 1%, 2%,			
3%, 4%	3 vials	6 vials	qtr
Tafluprost Eye Drops	3 vials	3 vials	qtr
Timolol Eye Drops 0.25%, 0.5%			
5ml	3 vials	6 vials	qtr
Timolol Eye Drops 0.25%, 0.5%			
10ml	3 vials	3 vials	qtr
Timolol Eye Gel 0.1%	3 vials	6 vials	qtr
Travoprost Eye Drops o.oo4%	3 vials	6 vials	qtr
Travoprost & Timolol Eye Drops			
0.004%/0.5%	3 vials	6 vials	qtr
Unoprostone Isopropyl Eye Drops			
0.12%	3 vials	6 vials	qtr
	Drug Limits		
High Cholesterol	Mild	Severe	Freq.
Atorvastatin Tablets 10mg,			
20mg, 40mg	20mg	8omg	day
Ezetimibe Tablets 10mg	10mg	10mg	day
Ezetimibe and Simvastatin	3	J	,
Tablets- all strengths	1 tab	1 tab	day
Fluvastatin Tablets 20mg, 40mg,		·	/
XL 8omq	4omg	8omg	day
Gemfibrozil Tablets 600mg	1200mg	1200mg	day
Lovastatin Tablets 20mg, 40mg	20mg	6omg	day
J. 1 J	_	,	,

	Drug Limits		
High Cholesterol	Mild	Severe	Freq.
Nicotinic Acid CR Tablets			
500mg, 750mg	1500mg	2000mg	day
Pravastatin Tablets 10mg,	3	J	,
20mg, 40mg	20mg	4omg	day
Rosuvastatin Tablets 5mg,			
10mg, 20mg, 40mg	20mg	4omg	day
Simvastatin Tablets 10mg, 20mg	20mg	4omg	day
Simvastatin Tablets 40mg	20mg	8omg	day
	Drug Limits		
Hypertension	Mild	Severe	Freq.
Amlodipine Tablets 5mg, 10mg	5mg	10mg	day
Amlodipine & Atenolol Tablets	51119	101119	day
5mg/5omg	ı tab	2 tabs	day
Amlodipine & Atorvastatin Tabs	1 tab	2 tabs	day
5mg/10mg, 5mg/20mg			,
Amiloride & Hydrochlorothiazide			
Tablets	1 tab	2 tabs	day
5mg/5omg			
S -Amlodipine & Hydrochlorothiazio			
Tablets	1 tab	2 tabs	day
2.5mg/12.5mg			
Amlodipine, Indapamide &	r. I.	1.1	
Perindopril Tablets 10mg/2.5mg/5mg	1 tab	1 tab	day
Amlodipine, Indapamide & Perindopril Tablets			
10mg/2.5mg/10mg	1 tab	1 tab	day
Amlodipine & Lisinopril Tabs	1 tab	2 tabs	day
5mg/10mg, 10mg/20mg	1 (45	2 (455	aay
S -Amlodipine & Losartan Tablets			
2.5mg/50mg	1 tab	2 tabs	day
Amlodipine & Valsartan Tablets	1 tab	2 tabs	day
5mg/8omg, 5mg/16omg			
Amlodipine & Valsartan Tablets			
5mg/320mg, 10mg/160mg,	_		
10mg/320mg	45 tab	90 tabs	90 days
Amlodipine & Valsartan &			
Hydrochlorothiazide Tablets			
5mg/16omg/12.5mg,	1 tab	2 tabs	day.
5mg/16omg/25mg Amlodipine & Valsartan &	T (QD	2 ldDS	day
Hydrochlorothiazide Tablets			
Try at oct motor muzice tablets			

Hypertension cont'd	Drug Limits Mild	Severe	Freq
10mg/160mg/12.5mg, 10mg/ 160mg/25mg, 10mg/320mg/25mg Atenolol Tablets 25mg, 50mg,	45 tab	90 tabs	90 days
100mg Atenolol & Chlorthalidone Tablets	50mg	100mg	day
50mg/12.5mg Atenolol & Chlorthalidone Tablets	1 tab	2 tabs	day
100mg/25mg Atenolol & Nifedipine Tablets	45 tabs	90 tabs	qtr
5omg/2omg	1 tab	2 tabs	day
S (-) Atenolol Tablets 25mg	1 tab	2 tabs	day
S (-) Atenolol Tablets 50mg	1 tab	1 tab	day
Bendrofluazide Tablets 2.5mg,			,
5mg Bendrofluazide & Reserpine	2.5mg	5mg	day
Tablets 5mg/0.15mg Bisoprolol Tablets 2.5mg, 5mg,	2 tab	2 tab	day
10mg Bisoprolol & AmlodipineTablets	5mg	20mg	day
5mg\5mg Bisoprolol & AmlodipineTablets	1 tab	2 tabs	day
10mg\5mg Bisoprolol & Hydrochlorothiazide	1 tab	2 tabs	day
Tablets 2.5mg/6.25mg Bisoprolol & Hydrochlorothiazide	1 tab	2 tabs	day
Tablets 5mg/6.25mg Bisoprolol & Hydrochlorothiazide	1 tab	2 tabs	day
Tablets 10mg/6.25mg Candesartan Tablets 8mg, 16mg,	1 tab	2 tabs	day
32mg Candesartan & Hydrochlorothiazide	16mg	32mg	day
16mg/12.5mg Candesartan & Hydrochlorothiazide	1 tab	1 tab	day
32mg/12.5mg Candesartan & Hydrochlorothiazide	45 tabs	90 tabs	qtr
32mg/25mg Captopril Tablets 12.5mg, 25 mg,	45 tabs	90 tabs	qtr
50mg Carvedilol Tablets 6.25mg, 12.5mg,	50mg	100mg	day
25mg	25mg	100mg	day
Diltiazem Tablets 30mg, 60mg	- 3	36omg	day
Diltiazem Retard Tablets 90mg,	24omg	3001119	uay
180mg	24omg	36omg	day

Hypertension cont'd	Drug Limits Mild	Severe	Freq.
Enalapril Tablets 2.5mg, 5mg,			
10mg, 20mg	20mg	4omg	day
Enalapril & Hydrochlorothiazide			
Tablets 10mg/25mg	1 tab	2 tabs	day
Enalapril & Hydrochlorothiazide			
Tablets 20mg/12.5mg	1 tab	2 tabs	day
Eplerenone Tablets 25mg, 50mg	5omg	100mg	day
Felodipine CR Tablets 5mg, 10mg	5mg	10mg	day
Fosinopril Tablets 10mg, 20mg	20mg	4omg	day
Fosinopril & Hydrochlorothiazide			
Tablets 20mg/12.5mg	1 tab	2 tabs	day
Furosemide Tablets 40mg	4omg	8omg	day
Hydralazine Tablets 25mg, 50mg	50mg	200mg	day
Hydrochlorothiazide Tablets 25mg,			
50mg	50mg	100mg	day
Indapamide SR Tablets 1.5mg,			
2.5mg	1 tab	1 tab	day
Indapamide & Amlodipine			
1.5mg/5mg	1 tab	1tab	day
Indapamide & Amlodipine			
1.5mg/10mg	-	1tab	day
Irbesartan Tablets 150mg, 300mg	150mg	300mg	day
Irbesartan & Amlodipine (SR)			
Tablets 150mg\5mg	1 tab	2 tabs	day
Irbesartan & Amlodipine (SR)			
Tablets 300mg\5mg	1 tab	1 tab	day
Irbesartan & Amlodipine Tablets			
300mg\10mg	-	1 tab	day
Irbesartan & Hydrochlorothiazide			
Tablets 150mg/12.5mg	1 tab	1 tab	day
Irbesartan & Hydrochlorothiazide			
Tablets 300mg/12.5mg	45 tabs	90 tabs	qtr
Irbesartan & Hydrochlorothiazide			
Tablets 300mg/25mg	45 tabs	90 tabs	qtr
Isradipine Tablets 2.5mg	5mg	10mg	day
Isradipine Capsules SRO 5mg	5mg	10mg	day
Lacidipine Tablets 4mg	4mg	6mg	day
Lisinopril Tablets 2.5mg, 5mg,			
10mg, 20mg	20mg	4omg	day
Lisinopril & Hydrochlorothiazide		-	
Tablets 20mg/12.5mg	1 tab	2 tabs	day
Losartan Tablets 25mg, 50mg,			

Umartansian cont/d	Drug Limits		_
Hypertension cont'd	Mild	Severe	Freq.
100mg	50mg	100mg	day
Losartan & Amlodipine Tablets	-	_	-
5omg\5mg	1 tab	2 tabs	day
Losartan & Amlodipine Tablets			
100mg\5mg	1 tab	1 tab	day
Losartan & Hydrochlorothiazide			
Tablets 50mg/12.5mg	1 tab	2 tabs	day
Losartan & Hydrochlorothiazide			
Tablets 100mg/12.5mg	45 tabs	90 tabs	qtr
Losartan & Hydrochlorothiazide			
Tablets 100mg/25mg	45 tabs	90 tabs	qtr
Methyldopa Tablets 250mg,			
500mg	1000mg	2000mg	day
Metoprolol Tablets 50mg, 100mg,			
200mg	200mg	400mg	day
S (-) Metoprolol Succinate Tablets			
25mg	2 tab	4 tabs	day
S (-) Metoprolol Succinate Tablets			
5omg	1 tab	2 tabs	days
Nebivolol Tablets 5mg, 10mg	5mg	10mg	day
Nifedipine (Retard) Tablets 10mg,		_	
20mg, 30mg, 60mg	6omg	8omg	day
Perindopril Tablets 2mg, 4mg	4mg	8mg	day
Perindopril Tablets 5mg, 10mg	5mg	10mg	day
Perindopril & Amlodipine Tablets			
5mg/5mg	1 tab	2 tab	day
Perindopril & Amlodipine Tablets			
5mg/10mg, 10mg/5mg,			
10mg/10mg	45 tab	90 tabs	90 days
Perindopril & Indapamide Tablets	r. b	r - b	.1
2.5mg/o.625mg	1 tab	1 tab	day
Perindopril & Indapamide Tablets			ala
5mg/1.25mg	1 tab	1 tab	day
Perindopril & Indapamide Tablets	. = +aba	- o + o b o	~+~
10mg/2.5mg	45 tabs	90 tabs	qtr
Potassium Chloride Tablets 600mg Propranolol Tablets, 10mg, 20mg,	1800mg	2400mg	day
40mg, 80mg	160mg	220ma	day
. 5.	16omg	320mg	day
Quinalapril Tablets 5mg, 10mg,	aoma	/ omc	day
20mg Ramipril Tablets 2.5mg, 5mg,	20mg	4omg	day
5:- 5:	10mg	aome	day
10mg	10mg	20mg	day

Hypertension cont'd	Drug Limits Mild	Severe	Freq.
Ramipril & Amlodipine Capsules			
5mg/5mg	1 tab	2 tabs	day
Ramipril & Amlodipine Capsules			
10mg/5mg	1tab	2 tabs	day
Ramipril & Amlodipine Capsules			
10mg/10mg	1 tab	1 tab	day
Ramipril & Hydrochlorothiazide			
Tablets 2.5mg/12.5mg	2 tabs	4 tabs	day
Ramipril & Hydrochlorothiazide	. 1		
Tablets 5mg/12.5mg	1 tabs	2 tabs	day
Ramipril & Hydrochlorothiazide	t a la c		
Tablets 10mg/12.5mg	45 tabs	90 tabs	qtr
Ramipril & Hydrochlorothiazide			
Tablets 10mg/25mg Reserpine / Clopamide/	45 tabs	90 tabs	qtr
Dihydroergocristine Tablets	2 tabs	a tabe	day
Spironolactone Tablets 25mg		3 tabs 100mg	day
Telmisartan Tablets 8omg	75mg 8omg	8omg	day
Telmisartan & Amlodipine 8omg/	oonig	oomg	uay
5mg, 8omg1omg	1 tab	1 tab	day
Telmisartan & Hydrochlorothiazide	1 (45	1 (05)	auy
Tablets 8omg/12.5mg	1 tab	1 tab	day
Telmisartan & Hydrochlorothiazide		_ 000	aay
Tablets 8omg/25mg	1 tab	1 tab	day
Valsartan Tablets 4omg, 8omg,			,
16omg, 32omg	16omg	320mg	day
Valsartan & Hydrochlorothiazide	3	3	,
Tablets 8omg/12.5mg	1 tab	1 tab	day
Valsartan & Hydrochlorothiazide			
Tablets 16omg/12.5mg	1 tab	1 tab	day
Valsartan & Hydrochlorothiazide			
Tablets 16omg/25mg	1 tab	1 tab	day
Valsartan & Hydrochlorothiazide			
Tablets 320mg/12.5mg	45 tabs	90 tabs	qtr
Valsartan & Hydrochlorothiazide	_		
Tablets 320mg/25mg	45 tabs	90 tabs	qtr
Verapamil Tablets 8omg, 12omg,		_	
24omg	24omg	48omg	day

Hypertension - Adjunct	Drug Limits Mild	Severe	Freq.
Atorvastatin Tablets 10mg, 20mg,		0	
4omg	20mg	8omg	day
Ezetimibe Tablets 10mg Ezetimibe and Simvastatin Tablets	10mg	10mg	day
all strengths Fluvastatin Tablets 20mg, 40mg,	1 tab	1 tab	day
XL 8omg	4omg	8omg	day
Gemfibrozil Tablets 600mg	1200mg	1200mg	day
Lovastatin Tablets 20mg, 40mg Nicotinic Acid C.R. Tablets 500mg,	20mg	6omg	day
750mg, Pravastatin Tablets 10mg, 20mg,	1500mg	2000mg	day
40mg Rosuvastatin Tablets 5mg, 10mg,	20mg	4omg	day
20mg, 40mg	20mg	4omg	day
Simvastatin Tablets 10mg, 20mg	20mg	4omg	day
Simvastatin Tablets 4omg	20mg	8omg	day
Ischaemic Heart	Drug Limits		_
Disease	Mild	Severe	Freq.
Amlodipine Tablets 5mg, 10mg Amlodipine & Atorvastatin Tabs	5mg	10mg	day
5mg/10mg, 5mg/20mg Amlodipine & Lisinopril Tabs	1 tab	2 tabs	
		2 (455	day
5mg/10mg, 10mg/20mg	1 tab	2 tabs	day
·	1 tab 1 tab		
5mg/10mg, 10mg/20mg Aspirin Tablets 81mg	_	2 tabs	day
5mg/10mg, 10mg/20mg Aspirin Tablets 81mg Atenolol Tablets 25mg, 50mg, 100mg	1 tab	2 tabs 2 tabs	day day
5mg/1omg, 1omg/2omg Aspirin Tablets 81mg Atenolol Tablets 25mg, 50mg, 100mg Atenolol & Chlorthalidone Tablets 100mg/25mg Atenolol & Chlorthalidone Tablets 50mg/12.5mg	1 tab 50mg	2 tabs 2 tabs 100mg 90 tabs 2 tabs	day day day qtr day
5mg/10mg, 10mg/20mg Aspirin Tablets 81mg Atenolol Tablets 25mg, 50mg, 100mg Atenolol & Chlorthalidone Tablets 100mg/25mg Atenolol & Chlorthalidone Tablets 50mg/12.5mg S (-) Atenolol Tablets 25mg	1 tab 50mg 45 tabs 1 tab 1 tab	2 tabs 2 tabs 100mg 90 tabs 2 tabs 2 tabs	day day day qtr day day
5mg/10mg, 10mg/20mg Aspirin Tablets 81mg Atenolol Tablets 25mg, 50mg, 100mg Atenolol & Chlorthalidone Tablets 100mg/25mg Atenolol & Chlorthalidone Tablets 50mg/12.5mg S (-) Atenolol Tablets 25mg S (-) Atenolol Tablets 50mg Bisoprolol Tablets 2.5mg, 5mg,	1 tab 50mg 45 tabs 1 tab	2 tabs 2 tabs 100mg 90 tabs 2 tabs 2 tabs 1 tab	day day day qtr day day
5mg/10mg, 10mg/20mg Aspirin Tablets 81mg Atenolol Tablets 25mg, 50mg, 100mg Atenolol & Chlorthalidone Tablets 100mg/25mg Atenolol & Chlorthalidone Tablets 50mg/12.5mg S (-) Atenolol Tablets 25mg S (-) Atenolol Tablets 50mg Bisoprolol Tablets 2.5mg, 5mg, 10mg Bisoprolol & Amlodipine Tablets	1 tab 5 omg 45 tabs 1 tab 1 tab 1 tab 5 mg	2 tabs 2 tabs 100mg 90 tabs 2 tabs 2 tabs 1 tab 20mg	day day qtr day day day
5mg/10mg, 10mg/20mg Aspirin Tablets 81mg Atenolol Tablets 25mg, 50mg, 100mg Atenolol & Chlorthalidone Tablets 100mg/25mg Atenolol & Chlorthalidone Tablets 50mg/12.5mg S (-) Atenolol Tablets 25mg S (-) Atenolol Tablets 50mg Bisoprolol Tablets 2.5mg, 5mg, 10mg	1 tab 50mg 45 tabs 1 tab 1 tab 1 tab	2 tabs 2 tabs 100mg 90 tabs 2 tabs 2 tabs 1 tab	day day day qtr day day

Ischaemic Heart Disease Con't Bisoprolol & Hydrochlorothiazide	Drug Limits Mild	Severe	Freq.
Tablets 2.5mg/6.25mg	1 tab	2 tabs	day
Bisoprolol & Hydrochlorothiazide			
Tablets 5mg/6.25mg Bisoprolol & Hydrochlorothiazide	1 tab	2 tabs	day
Tablets 10mg/6.25mg Captopril Tablets 12.5mg, 25mg,	1 tab	2 tabs	day
5omg Carvedilol Tablets 6.25mg,	50mg	100mg	day
12.5mg, 25mg	25mg	100mg	day
Clopidogrel Tablets 75mg Clopidogrel & Aspirin Tablets	75mg	75mg	day
75mg/ 75mg	1 tab	1 tab	day
Digoxin Tablets 0.25mg, 0.125mg	250mcg	500mcg	day
Digoxin Elixir 50mcg/ml 60ml	125mcg	250mcg	day
Diltiazem Tablets 6omg, 3omg	240mg	36omg	day
Diltiazem Ret. Tabs 90mg, 180mg	24omg	36omg	day
Dipyridamole Tabs 25 mg, 75mg Enalapril Tablets 2.5mg, 5mg,	150mg	225mg	day
10mg, 20mg Enalapril & Hydrochlorothiazide	20mg	4omg	day
Tablets 10mg/25mg Enalapril & Hydrochlorothiazide	1 tab	2 tabs	day
Tablets 20mg/12.5mg	1 tab	2 tabs	day
Felodipine CR Tablets 5mg, 10mg	5mg	10mg	day
Fosinopril & Hydrochlorothiazide	20mg	4omg	day
Tablets 20mg/12.5mg	1 tab	2 tabs	day
Furosemide Tablets 40mg	4omg	8omg	day
Isosorbide dinitrate Tablets 5mg,		_	
10mg	6omg	8omg	day
Isradipine Tablets 5mg	5mg	10mg	day
Ivabradine Tablets 5mg, 7.5mg	10mg	15mg	day
Lacidipine Tablets 4mg Lisinopril Tablets 5mg, 10mg,	4mg	6mg	day
20mg Lisinopril & Hydrochlorothiazide	20mg	4omg	day
Tablets 20mg/12.5mg Metoprolol Tablets 50mg, 100mg,	1 tab	2 tabs	day
200mg S (-) Metoprolol Succinate Tablets	200mg	400mg	day
25mg	2 tabs	4 tabs	day

Ischaemic Heart Disease cont'd S (-) Metoprolol Succinate Tablets	Drug Limits Mild	Severe	Freq.
50mg	1 tab	2 tabs	day
Nebivolol Tablets 5mg Nifedipine (Retard) Tablets 10mg,	5mg	10mg	day
20mg, 30mg, 60mg Nitroglycerin Sublingual Tabs	6omg	8omg	day
o.6mg	100 tabs	100 tabs	annum
Nitroglycerin TTS 5mg	18 pks	18 pks	gtr
Nitroglycerin TTS 8mg, 10mg	9 pks	9 pks	qtr
Nitroglycerin Ret.Tablets 2.6mg	7.8mg	15.6mg	day
Nitroglycerin Aerosol o.4mg	ı can	2 cans	qtr
Perindopril Tablets 2mg, 4mg	4mq	8mg	day
Perindopril Tablets 5mg, 10mg Perindopril & Amlodipine Tablets	5mg	10mg	day
5mg/5mg	1 tab	2 tab	day
Perindopril & Amlodipine Tablets 5mg/10mg, 10mg/5mg,			,
10mg/10mg	45 tab	90 tabs	90 days
Perindopril & Indapamide Tablets	13	3	3 ,
2.5mg/o.625mg	1 tab	1 tab	day
Perindopril & Indapamide Tablets			,
5mg/1.25mg Perindopril & Indapamide Tablets	1 tab	1 tab	day
10mg/2.5mg	45 tabs	90 tabs	qtr
Prasugrel HydrochlorideTablets 5m	ıg 2 tabs	2 tabs	day
Prasugrel HydrochlorideTablets 10r		1 tab	day
Propranolol Tablets10mg, 20mg			-
40mg, 80mg Quinalapril Tablets 5mg, 10mg,	16omg	320mg	day
20mg Ramipril Tablets 2.5mg, 5mg,	20mg	4omg	day
10mg Ramipril & Hydrochlorothiazide	10mg	20mg	day
Tablets 2.5-12.5mg	2 tabs	4 tabs	day
Ranolazine ER Tablets 500mg	2 tabs	4 tabs	day
Ticagrelor Tablets 90mg	-	730 tabs	lifetime
Trimetazidine Tablets 20mg	6omg	6omg	day
Trimetazidine MR Tablets 35mg	70mg	70mg	day
Verapamil Tablets 80mg, 120mg,	751119	751119	aay
24omg	240mg	48omg	day

Ischaemic Heart Disease - Adjunct	Drug Limits Mild	Severe	Freq.
Atorvastatin Tablets 10mg, 20mg,			
4omg	20mg	8omg	day
Ezetimibe Tablets 10mg	10mg	10mg	day
Ezetimibe and Simvastatin Tablets	3	3	,
all strengths	1 tab	1 tab	day
Fluvastatin Tablets 20mg, 40mg,			,
XL 8omg	4omq	8omq	day
Gemfibrozil Tablets 600mg	1200mg	1200mg	day
Lovastatin Tablets 20mg, 40mg	20mg	6omg	day
Nicotinic Acid CR Tablets 500mg,	J	J	•
750mg	1500mg	2000mg	day
Pravastatin Tablets 10mg, 20mg,	- 0		•
4omg	20mg	4omg	day
Rosuvastatin Tablets 5mg, 10mg,	9		•
20mg, 40mg	20mg	4omg	day
Simvastatin Tablets 10mg, 20mg	20mg	4omg	day
Simvastatin Tablets 40mg	20mg	8omg	day
Warfarin	5mg	10mg	day
		-	-
	Drug Limits	-	_

Major Depression	Mild	Severe	Freq.
AgomelatineTablets 25mg Amitriptylline Tablets 25mg Bupropion SR Tablets 150mg Bupropion XL Tablets 300mg	25mg 75mg 150mg N/A	50mg 150mg 300mg 300mg	day day day day
Carbamazepine Tablets 100mg, 200mg, 400mg Carbamazepine Susp. 100mg/5ml Citalopram Tablets 20mg Desvenlafaxine CR Capsules	1200mg 600mg 20mg	2000mg 1000mg 60mg	day day day
50mg Divalproex Sodium Tablets 250mg,	50mg	50mg	day
500mg Duloxetine HCL 30mg, 60mg Escitalopram Tablets 10mg Fluoxetine Tablets 20mg Imipramine Tablets 25mg, 10mg Lamotrigine Tablets 25mg, 50mg,	2000mg 60mg 10mg 20mg 75mg	2500mg 120mg 20mg 80mg 150mg	day day day day day
100mg, 150mg Lithium Carbonate Tablets 250mg, 300mg	200mg 2000mg	400mg 2000mg	day day

Major Depression	Drug Limits Mild	Severe	Freq.
cont'd		2010.0	
Olanzapine Tablets 5mg, 10mg Olanzapine IM Injection 10mg Oxcarbazepine Tablets. 300mg,	10mg N/A	20mg 6 vials	day qtr
600mg Oxcarbazepine Susp. 300mg/5ml Paroxetine Tablets 20mg	1200mg 600mg 20mg	2400mg 1200mg 40mg	day day day
Paliperidone CR Tablets 3mg, 6mg, 9mg Paliperidone Palmitate Injection	6mg	9mg	day
50mg Paliperidone Palmitate Injection	ı vial	2 vials	30 days
75mg Paliperidone Palmitate Injection	ı vial	2 vials	30 days
100mg Paliperidone Palmitate Injection	ı vial	1 vial	30 days
150mg Paliperidone Palmitate Injection	-	1 vial	30 days
350mg/1.75mL Paroxetine CR Tablet 12.5mg,	N/A	1 vial	qtr
25 mg Quetiapine Tablets - all strengths	25mg 30omg	50mg 750mg	day day
Risperidone Consta. Inj. 25mg,			•
37.5mg	2 vials	6 vials	qtr
Risperidone Consta Inj. 50mg Risperidone Solution 1mg/ml-	N/A	6 vials	qtr
6oml, 10oml	3mg	4mg	day
Risperidone Tablet 1mg, 2mg, 3mg	6mg	8mg	day
Sertraline Capsules 50mg, 100mg Sodium Valproate Capsules 200mg,	100mg	200mg	day
300mg, 500mg Sodium Valproate Oral Solution	2000mg	2500mg	day
200mg/5ml Sodium Valproate Syrup 250mg/	2000mg	2500mg	day
5ml Topiramate Tablets 25mg, 50mg,	2000mg	2500mg	day
100mg	200mg	400mg	day
Valproic Acid Capsules 250mg Venlafaxine CR Capsules 37.5mg,	2000mg	2500mg	day
75mg, 150mg Ziprasidone Tablets 40mg, 60mg	150mg	225mg	day
8omg	120mg	16omg	day

Prostate Cancer	Drug Limits Mild	Severe	Freq.
Bicalutamide Tablets 50mg	50mg	150mq	day
Bicalutamide Tablets 150mg Conjugated Estrogen Tablets	N/A	150mg	day
1.25mg, 0.625mg, 0.3mg Cyproterone Acetate Tablets 10mg,	3.75mg	7.5mg	day
50mg, 100mg	200mg	300mg	day
Degarelix Acetate Inj. 8omg	24omg	24omg	qtr
Degarelix Acetate Inj. 120mg	2 vials	2 vials	first dose
Docetaxel Inj. 20mg, 80 mg,			only
120mg	1080mg	1080mg	Complete
			treatment
Flutamide Tabs 125mg, 250mg	75omg	750mg	day
Goserelin Inj. 3.6mg	3 vials	3 vials	qtr
Goserelin Inj. 10.8mg	1 vial	1 vial	qtr
Leuprolide Inj. 3.75mg, 7.5mg	3 vials	3 vials 1 vial	qtr
Leuprolide Inj. 11.25mg	1 vial		qtr
Paclitaxel Inj.all strengths	1800mg	1800mg	Complete treatment
Prostate Cancer	Drug Limits		
Adjunct	Mild	Severe	Freq.
Tramadol Capsules 50 mg	120 caps	240 caps c	ıtr
Tramadol L.A. Tablets 100mg	60 tabs	120 tabs	qtr
Tramadol Drops	9 bots.	12 bots.	qtr
Tramadol & Acetaminophen	<i>J</i> ~ 0 to.	5005.	90
Tablets	180 tabs	240 tabs	qtr
Tramadol Effervescent Tablets		-	•
5omg	120 tabs	240 tabs	qtr

Psychosis	Drug Limits Mild	Severe	Freq.
Benztropine Tablets 2mg Chlorpromazine Tablets 25mg,	4mg	6mg	day
100mg	100mg	300mg	day
Clozapine Tablets 25mg, 100mg	75mg	6oomg	day
Fluphenazine Injection 25mg/ml	300mg	6oomg	qtr
Haloperidol Tablets 5mg, 2mg	10mg	15mg	day
Olanzapine Tablets 5mg, 10mg	10mg	20mg	day

5 1 1 11	Drug Limits	C	5
Psychosis cont'd	Mild	Severe	Freq.
Olanzapine IM Injection 10mg Paliperdone CR Tabs 3mg, 6mg,	N/A	6 vials	qtr
9mg Paliperidone Palmitate Injection	6mg	9mg	day
50mg Paliperidone Palmitate Injection	1 vial	2 vials	30 days
75mg Paliperidone Palmitate Injection	1 vial	2 vials	30 days
100mg Paliperidone Palmitate Injection	1 vial	1 vial	30 days
150mg Paliperidone Palmitate Injection	-	1 vial	30 days
350mg/1.75mL Quetiapine Tablets 25mg, 100mg,	N/A	1 vial	qtr
200mg, 300mg Risperidone Tablet 1mg, 2mg,	300mg	750mg	day
3mg Risperidone Consta Inj. 25mg,	6mg	8mg	day
37.5mg	6 vials	6 vials	qtr
Risperidone Consta Inj. 50mg	N/A	6 vials	qtr
Risperidone Solution 1mg/ml Thioridazine Tablets 25mg, 5omg,	3mg	4mg	day
100mg	150mg	300mg	day
Trifluoperazine Tablets 1mg, 5mg	20mg	4omg	day
Trihexyphenidyl Tablets 2mg, 5mg Ziprasidone Tablets 4omg, 6omg	10mg	15mg	day
8omg Zuclopenthixol Tablet 10mg,	120mg	16omg	day
25mg	5omg	150mg	day
Zuclopenthixol Drops 20mg/ml	6 vials	9 vials	qtr
Rheumatic Fever/	Drug Limits	C	5
Heart Disease	Mild	Severe	Freq.
Benzathine Benzyl Penicillin			
Injection Dipyridamole Tablets 25mg,	3 vials	3 vials	qtr
75mg	150mg	225mg	day
Digoxin Tablets 125mg, 25mg	250mcg	500mcg	day
Digoxin Elixir 50mcg/ml Erythromycin Tabs 250mg, 400mg,	125mcg	250mcg	day
500mg	3ogm	30gm	qtr

Rheumatic Fever/ Heart Disease cont'd Erythromycin Susp. 200mg/5ml,	Drug Limits Mild	Severe	Freq.
400mg/5ml Phenoxymethyl penicillin (Pen.V)	24gm	24gm	qtr
Tablets 300mg	18gm	18gm	qtr
Prednisone Tablets 5mg Prednisolone Tabs 5mg, Syrup	15mg	15mg	day
15mg/5ml, 10mg/5ml	15mg	15mg	day
Sickle Cell	Drug Limits		
Disease	Mild	Severe	Freq.
Aceclofenac Tablets 100mg	200mg	200mg	day
Aceclofenac CR Tablets 200mg Aceclofenac & Paracetamol Tablets	200mg	200mg	day
100mg/500mg	2 tabs	2 tabs	day
Amitriptylline Tablets 25mg	75mg	150mg	day
Amoxicillin Capsule 500mg	2 caps	2 caps	day
Amoxicillin Susp. 125mg/5ml	15 bottles	18 bottles	qtr
Amoxicillin Susp. 250mg/5ml Beclomethasone Inhaler	8 bottles	9 bottles	qtr
all strengths Benzathine Benzyl Penicillin	3 Inhalers	6 Inhalers	qtr
Injection Diclofenac Tablets 25mg, 46.5mg,	3 vials	3 vials	qtr
50mg, 75mg, 100mg	150mg	200mg	day
Diclofenac Oral Susp. 9mg/		_	
5ml x 120ml	54mg	81mg	day
Diclofenac Drops Enalapril 2.5mg, 5mg, 10mg,	3 bottles	6 bottles	qtr
20mg	20mg	4omg	day
Erythromycin Tabs 250mg, 400mg,			
500mg Erythromycin susp. 200mg/5ml,	3ogm	3ogm	qtr
400mg/5ml	24gm	24gm	qtr
Etoricoxib 6omg, 9omg, 12omg	9omg	120mg	day
Hydroxyurea Capsules 500mg	1000mg	2000mg	day
Ibuprofen Tablets 400mg, 600mg Lisinopril Tablets 2.5mg, 5mg,	1600mg	2400mg	day
10mg, 20mg Losartan Tablets 25mg, 50mg,	20mg	4omg	day
100mg	50mg	100mg	day
Meloxicam Tablets 7.5mg, 15mg	7.5mg	15mg	day
Morphine Tablets 10mg	4omg	8omg	day

Sickle Cell Disease cont'd Paracetamol & Codeine Tablets	Drug Limits Mild	Severe	Freq
500mg/30mg Phenoxymethyl Penicillin (Pen V)	4 tabs	8 tabs	day
Tablets 300mg	18gm	18gm	qtr
Salbutamol Tablets 4mg	12mg	16mg	day
Salbutamol Syrup 2mg/5ml	6mg	8mg	day
Salbutamol Inhaler Salbutamol Nebulizing Solution	3 Inhalers	6InHalers	qtr
o.5% Salbutamol Nebulizing Solution	3 bottles	6 bottles	qtr
o.1% - pack Salbutamol Nebulizing Solution	3 pks	6 pks	qtr
o.2% - pack Salbutamol & Beclomethasone	3 pks	3 pks	qtr
Inhaler Salmeterol & Fluticasone – 30Ds	3 Inhalers	6 Inhalers	qtr
& 6oDs Salmeterol & Fluticasone - 12oDs,	3 Inhalers	6 Inhalers	qtr
150Ds & 200Ds	3 Inhalers	3 Inhalers	qtr
Tramadol Capsules 50mg Tramadol Effervescent Tablets	120 caps	240 caps	qtr
5omg	120 tabs	240 tabs	qtr
Tramadol Tablets 100mg	6o tabs	120 tabs	qtr
Tramadol Drops	9 bots.	12 bots	qtr
	Drug Limits		
Vascular Disease	Mild	Severe	Freq.
Apixaban Tablets 2.5mg	5mg	10mg	day
Apixaban Tablets 5mg	5mg	10mg	day
Aspirin Tablets 81mg Calcium Dobesilate Capsules	1 tab	2 tabs	day
500mg	2 caps	2 caps	day
Clopidogrel Tablets 75mg	75mg	75mg	day
Dabigatran Capsules 75mg	150mg	300mg	day
Dabigatran Capsules 110mg	220mg	220mg	day
Dabigatran Capsules 150mg	150mg	300mg	day
Diosmin Tablets 300mg	3 tabs	3 tabs	day
Diosmin Tablets 500mg Diosmin & Hesperidin Tablets	2 tabs	2 tabs	day
500mg	2 tabs	2 tabs	day
Dipyridamole Tablets 25mg, 75mg	150mg	225mg	day

Vascular Disease cont'd	Drug Limits Mild	Severe	Freq.
Dipyridamole & Aspirin Capsules			
200mg/25mg	2 caps	2 caps	day
Ketanserin Gel 78mg	6 tubes	6 tubes	annum
Pentoxifylline Tablets 400mg	1200mg	1200mg	day
Prasugrel Hydrochloride			
Tablets 5mg	2 tabs	2 tabs	day
Prasugrel Hydrochloride			
Tablets 10mg	1 tab	1 tab	day
Rivaroxaban Tablets 15mg	2 tabs	2 tabs	day
Rivaroxaban Tablets 20mg	1 tab	1 tab	day
Vinpocetine Forte Tablets 10mg	3omg	3omg	day
Warfarin	5mg	10mg	day
Zinc Hyaluronate Gel 15g	12 tubes	24 tubes	annum

JADEP

JADEP Benefits

Claim Transactions Effective February 1, 2017 NHF

committed to pay JADEP Providers a fee of three hundred dollars (\$300) per prescription. Beneficiaries will continue to pay a service fee of forty dollar (\$40) per prescription item and a maximum of two hundred and forty dollars (\$240) for six (6) or more items. This will result in JADEP fees ranging from three hundred and forty dollars (\$340) to a maximum of five hundred and forty dollars (\$540).

 In the submission of claims, the accurate days supply must be entered for each transaction.
 Failure to do so will result in the beneficiaries being unable to refill prescriptions using their JADEP Card at their due date and the error message will be

- "plan limitation exceeded".
- A beneficiary is allowed to return for a refill four (4) days before the completion of the medication.
- The JADEP provider must ensure that the correct National Drug Codes (NDC) are entered for all JADEP drugs when adjudicating claims, to ensure that your correct usage can be reflected.
- If a claim transaction is to be cancelled, ensure that the claim is reversed within three
 (3) days after the submission of the transaction. If the reversal is not done during this period, complete and submit the NHF Transaction Adjustment Form to the NHF as soon as possible.

JADEP Inventory

- The JADEP Provider must ensure that adequate levels of JADEP stocks are maintained to meet the needs of the beneficiaries.
- The JADEP Provider should notify NHF three (3) months prior to the expiry date of JADEP stock. If the JADEP Provider fails to comply, the Provider shall reimburse the NHF within one (1) month of discovery.
- No borrowing or exchanging of JADEP stock is allowed.
- No lending of pharmacy stock for JADEP prescriptions.
- Orders for JADEP drugs can be placed online twice per month. (On the 15th day after the last order)
- Where pharmaceuticals are returned to the NHF Pharmaceutical Division and

- are found to have deteriorated, the Provider shall be required to reimburse the NHF.
- JADEP orders must be submitted online and only by fax if authorised by NHF.
- Pharmacy personnel accepting delivery of JADEP drugs must affix clearly on each delivery slip/invoice the following information:
 - Full Name

- Signature
- Date
- Pharmacy Stamp
- Please note that pharmaceuticals with an expiry date of less than six months are not to be accepted, unless prior authorization is given by NHF.

Instructions for placing JADEP Drug request orders via NHFi

- The JADEP order form is located on the NHF Intranet which is accessible via the NHF Website at www.nhf.org.jm.
- Click on the link that says "click here to login to the intranet"
- At the bottom of the page where it says "To submit a JADEP Online Drug Order Request enter your provider number below", type in your NHF Provider number (this should be done in capital letters)
- 4. Click the submit button (this will take you to the order form)
 - Ensure that the name of your pharmacy is at the top of the order page.
 - Expiry dates should be entered for items that are being ordered with Quantity on Hand Balances. This should be for actual numbers and

- not pack sizes.
- If there is no Quantity on Hand balance, leave the field blank. For fields where a value and an expiration date were entered in error, the word nil or zero should be used to populate the field instead of the number "o", which is not accepted.
- You may use the tab key or the mouse to get to each field.
- At no point in time when doing the order you should click the enter button as this will submit the order prior to its completion. (orders can only be done twice per month)
- Upon completion of the

- order you may scroll to the bottom of the page and click the submit button.
- You should receive a confirmation that the order was submitted successfully and a confirmation number.

 Once your JADEP drug request has been approved, you should receive an email confirmation.

If you have any questions or queries you may call our office and speak with a representative in the JADEP order processing Unit.

JADEP Returns procedures

To enhance convenience and facilitate the prompt return of JADEP items; the following procedures along with proper management of stock should reduce the incidence of expired goods on the shelf and prevent financial losses:

- Complete the JADEP Drug
 Retrieval Form and fax same to
 the NHF Pharmaceutical Division
 at 758-9368; kindly verify with the
 JADEP unit to ensure receipt of
 the form.
- Pharmacies can deliver items to the NHF Pharmaceutical Division located at 78 Marcus Garvey Drive,

Kingston 13 or where necessary, NHF will make arrangements for the collection of items within the corporate area. For pharmacies outside of the corporate area and Portmore, arrangements will be made to collect these items at the pharmacies, or at other designated areas, based on a mutually agreed time.

CONDITIONS COVERED BY JADEP ARE:

- Arthritis
- Asthma
- Benign Prostatic Hyperplasia
- Cardiac Disease
- Diabetes

- Glaucoma
- High Cholesterol
- Hypertension
- Psychiatric Conditions
- Vascular Conditions

JADEP Dosage Limits

For Pharmaceuticals

Pioglitazone Tablets 15mg

Pioglitazone Tablets 3 omg

Arthritis Diclofenac Tablets 50mg Diclofenac SR Tablets 75mg Ibuprofen Tablets 400mg Meloxicam Tablets 7.5mg Meloxicam Tablets 15mg	60 60 60 60 60 30
Asthma Beclomethasone 50mcg/Inhalation Salbutamol 100mcg/Inhalation	Monthly Limit 1 inhaler 1 inhaler
Asthma (Adjunct) Loratidine Tablet 10mg	Monthly Limit
Benign Prostatic Hyperplasia (BPH)	Monthly Limit
Finasteride Tablets 5mg Tamsulosin Capsules o.4mg	30 30
3 3	-

60

30

Glaucoma	Monthly Limit
Acetazolamide Tablets 250mg	120
Betaxolol Eye drops 0.25%	1 vial
Brimonidine Eye Drops 0.15%	1 vial
Canabis Sativa Eye drops 0.10%	1 vial
Dorzolamide Eye Drops 2%	1 vial
Latanoprost Eye Drops o.oo5%	1 vial
Timolol Eye drops 0.5%	1 vial

High Cholesterol	Monthly Limit
AtorvastatinTablets 10mg	60
Atorvastatin Tablets 20mg	60
Atorvastatin Tablets 4 omg	30
Simvastatin Tablets 10mg	60
Simvastatin Tablets 20mg	60
Simvastatin Tablets 40mg	30

Hypertension &/or Cardiac Conditions	Monthly Limit
Amlodipine Tablets 5mg	60
Amlodipine Tablets 10mg	30
Aspirin Tablets 81mg	30
Atenolol Tablets 50mg	60
Atenolol Tablets 100mg	30
Bendrofluazide 2.5mg Tablets	60
Captopril Tablets 25mg	90
Captopril Tablets 5 omg	90
Digoxin Tablets o.25mg	30
Enalapril Tablets 5mg	60
Enalapril Tablets 10mg	60
Enalapril Tablets 20mg	60
Felodipine Tablets 5mg	60
Felodipine Tablets 10mg	30
Frusemide tablets 4omg	60
Indapamide (SR) Tablets 1.5mg	30
Isosorbide Dinitrate Tablets 10mg	90
Lisinopril Tablets 5mg	60
Lisinopril Tablets 10mg	60

Hypertension &/or Cardiac Conditions cont'd **Monthly Limit** Lisinopril Tablets 20mg 30 Losartan 25mg Tablets 6ი Losartan 50mg Tablets 6ი Methyldopa Tablets 250mg 90 Methyldopa Tablets 500mg 90 Nifedipine SR Tablets 10mg 60 Nifedipine (LA) Tablets 20mg 60 Potassium Chloride Tablets 600mg 60 Perindopril 2.5mg & Indapamide 0.625mg Tablets 30 Trimetazidine MR Tablets 35mg 60 **Psychiatric Conditions Monthly Limit** Amitriptyline Tablets 25mg 90 60 Benztropine Tablets 2mg 60 Carbamazepine CR Tablets 200mg Carbamazepine CR Tablets 400mg 60 Fluoxetine Capsules 20mg 30 Haloperidol Tablets 5mg 60 Risperidone Tablets 1mg 60 Risperidone Tablets 2mg 30 Thioridazine Tablets 25mg 60 Zuclopenthixol Oral Drops 1 bottle Vascular Conditions **Monthly Limit** Diosmin and Hesperidin Tablets 500mg 60

90

90

Pentoxifylline Tablets 400mg

Vinpocetine ForteTablets 10mg

Sources Of Information

Literature

Books

- Guidelines for Healthcare
 Professionals
- The National Health Fund Customer Service Charter

Brochures

Offices Head Office

6th Floor, the Towers 25 Dominica Drive, Kingston 5 Tel: 1-888-NHFCARE (643-2273) or 906-1106

Fax: 906-1105

Business Hours: Monday- Thursday 7:00am to 4:30pm & Fridays 7:00am to 3:30pm

Call Centre Hours: Monday – Friday

7:00am - 7:00pm

NHF Pharmaceutical Division

78 Marcus Garvey Drive, Kingston 11

Tel: 923-6920 or 923-6926

Fax: 923-7159

Business Hours: Monday-Thursday 8:30am to 5:00pm & Fridays 8:30am

to 4:00pm

Help Desks

- Cornwall Regional Hospital Tel: 971-6571
- Mandeville Regional Hospital -Tel: 625-6299
- St. Ann's Bay Hospital Tel: 972-1683
- Drug Serv Union Square
 Pharmacy Tel: 908-5479
- Drug Serv May Pen Hospital –
 Tel: 786-4200

Business Hours: Monday-Thursday 8:30am to 5:00pm, & Friday 8:30am to 4:30pm

Electronic Media

Website - www.nhf.org.jm

Social Media

- www.facebook.com/NHFJamaica
- www.twitter.com/NHFJamaica
- www.youtube.com/NHFJamaica
- www.instagram.com/NHFJamaica

Notes		

HEAD OFFICE

6th Floor, the Towers 25 Dominica Drive, Kingston 5 Tel: 1-888-NHFCARE (643-2273) or 906-1106

Fax: 906-1105

NHF PHARMACEUTICAL DIVISION

78 Marcus Garvey Drive, Kingston 11 Tel: 923-6920 or 923-6926

Fax: 923-7159

HELP DESKS

Cornwall Regional Hospital - Tel: 971-6571 Mandeville Regional Hospital - Tel: 625-6299 St. Ann's Bay Hospital - Tel: 972-1683 Drug Serv Union Square Pharmacy - Tel: 908-5479 Drug Serv May Pen Hospital - Tel: 786-4200

