



## Pharmacy Non-Specialty Overview by Prior Authorization Approval or Denial 3rd Quarter 2023

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	HEMATOLOGY & ONCOLOGY	ABIRATERONE	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	ABIRATERONE	ANTINEOPLASTICS	Approved	1
3961	HEMATOLOGY & ONCOLOGY	ABIRATERONE	ANTINEOPLASTICS	Approved	1
3951	UNSPECIFIED	ABIRATERONE	ANTINEOPLASTICS	Approved	1
3956	NURSE PRACTITIONER, PSYCHIATRIC	ACAMPROSATE	SUBSTANCE ABUSE AGENTS	Denied	1
3956	PSYCHIATRY	ACAMPROSATE	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	ACAMPROSATE	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	ACAMPROSATE	SUBSTANCE ABUSE AGENTS	Denied	2
3956	FAMILY PRACTICE	ACAMPROSATE CALCIUM 333MG ORTBEC	SUBSTANCE ABUSE AGENTS	Approved	1
3956	NURSE PRACTITIONER, PSYCHIATRIC	ACAMPROSATE CALCIUM 333MG ORTBEC	SUBSTANCE ABUSE AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	ACAMPROSATE CALCIUM 333MG ORTBEC	SUBSTANCE ABUSE AGENTS	Approved	1
3956	PSYCHIATRY	ACAMPROSATE CALCIUM 333MG ORTBEC	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	ACAMPROSATE CALCIUM 333MG ORTBEC	SUBSTANCE ABUSE AGENTS	Approved	5
3963	UNSPECIFIED	ACAMPROSATE CALCIUM 333MG ORTBEC	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	ACCU-CHEK GUIDE TEST STRIPS	DIABETIC TESTING SUPPLIES	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	ACCUTANE (ISOTRETINOIN)	ALL OTHER DERMATOLOGICALS	Denied	1
3964	UNSPECIFIED	ACCUTANE (ISOTRETINOIN)	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	ACCUTANE (ISOTRETINOIN)	ALL OTHER DERMATOLOGICALS	Denied	1
3951	UNSPECIFIED	ACCUTANE (ISOTRETINOIN)	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	ACCUTANE (ISOTRETINOIN)	ALL OTHER DERMATOLOGICALS	Approved	2
3965	UNSPECIFIED	ACCUTANE (ISOTRETINOIN)	ALL OTHER DERMATOLOGICALS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ACCUTANE 40 MG CAPSULE	ALL OTHER DERMATOLOGICALS	Approved	1
3963	DERMATOLOGY	ACCUTANE 40MG OR CAPS	ALL OTHER DERMATOLOGICALS	Approved	2
3951	UNSPECIFIED	ACCUTANE 40MG OR CAPS	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	ACCUTANE 40MG OR CAPS	ALL OTHER DERMATOLOGICALS	Approved	1
3956	UNSPECIFIED	ACETAMINOPHEN-CODEINE 300-30MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	2
3956	FAMILY PRACTICE	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	3
3963	FAMILY PRACTICE	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	FAMILY PRACTICE	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Denied	1
3951	FAMILY PRACTICE	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3963	INTERNAL MEDICINE	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3963	ORTHOPEDIC SURGERY	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3963	PHYSICIAN, ANESTHESIOLOGY, PAIN MANAGEMENT	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Denied	1
3962	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3965	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	3
3956	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	2
3951	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Approved	1
3951	UNSPECIFIED	ACETAMINOPHEN-CODEINE TAB 300-30 MG	NARCOTIC ANALGESICS	Denied	1
3956	FAMILY PRACTICE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	GENERAL PRACTICE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	INTERNAL MEDICINE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	PEDIATRICS	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	PSYCHIATRY	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	RHEUMATOLOGY	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	RHEUMATOLOGY	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	ACYCLOVIR OINTMENT	ANTIVIRALS	Approved	1
3962	FAMILY PRACTICE	ACYCLOVIR OINTMENT	ANTIVIRALS	Approved	2
3963	FAMILY PRACTICE	ACYCLOVIR OINTMENT	ANTIVIRALS	Denied	3
3963	INTERNAL MEDICINE	ACYCLOVIR OINTMENT	ANTIVIRALS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	ACYCLOVIR OINTMENT	ANTIVIRALS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	ACYCLOVIR OINTMENT	ANTIVIRALS	Denied	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ACYCLOVIR OINTMENT	ANTIVIRALS	Approved	1
3962	UNSPECIFIED	ACYCLOVIR OINTMENT	ANTIVIRALS	Denied	1
3964	UNSPECIFIED	ACYCLOVIR OINTMENT	ANTIVIRALS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	ACYCLOVIR OINTMENT	ANTIVIRALS	Denied	1
3951	FAMILY PRACTICE	ADAPALENE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	PEDIATRICS	ADAPALENE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3969	PEDIATRICS	ADAPALENE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ADAPALENE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ADAPALENE 0.3 % TOPICAL GEL (DIFFERIN)	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	ADAPALENE 0.3% GEL	DERMATOLOGICAL AGENTS	Approved	2
3962	DERMATOLOGY	ADAPALENE 0.3% GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ADAPALENE 0.3% GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ADAPALENE 0.3% GEL	DERMATOLOGICAL AGENTS	Approved	2
3962	UNSPECIFIED	ADAPALENE 0.3% GEL	DERMATOLOGICAL AGENTS	Approved	1
3951	DERMATOLOGY	ADAPALENE GEL 0.1%	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ADAPALENE GEL 0.3%	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ADBRY	DERMATOLOGICAL AGENTS	Approved	1
3967	NURSE PRACTITIONER, FAMILY HEALTH	ADDERALL XR 15MG OR CP24	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	ADDYI 100MG TABLET	HYPOACTIVE SEXUAL DESIRE DISORDER	Approved	1
3951	CARDIOLOGY	ADEMPAS	ANTIHYPERTENSIVES	Approved	1
3956	CARDIOLOGY	ADEMPAS	ANTIHYPERTENSIVES	Approved	1
3956	UNSPECIFIED	ADEMPAS	ANTIHYPERTENSIVES	Approved	2
3963	OBSTETRICS & GYNECOLOGY	ADTHYZA 65MG TABLET	THYROID AGENTS	Denied	1
3951	FAMILY PRACTICE	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3969	FAMILY PRACTICE	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Denied	1
3963	INTERNAL MEDICINE	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	4
3964	NEUROLOGY	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3965	NEUROLOGY	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3962	NURSE PRACTITIONER, UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Denied	1
3963	UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	4
3963	UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Denied	2
3951					
3331	UNSPECIFIED	AIMOVIG 140MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	AIMOVIG 140MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	AIMOVIG 70MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	INTERNAL MEDICINE	AIMOVIG 70MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3964	NEUROLOGY	AIMOVIG 70MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	AIMOVIG 70MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	AIMOVIG 70MG/ML AUTO-INJ (ERENUMAB-AOOE)	ANTIMIGRAINE	Approved	1
3962	NURSE PRACTITIONER, UNSPECIFIED	AIMOVIG 70MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	AJOVY 225 MG/1.5 ML SUBCUTANEOUS AUTO-IN- JECTOR (FREMANEZUMAB-VFRM)	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Denied	1
3963	NURSE PRACTITIONER, COMMUNITY HEALTH	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3965	NURSE PRACTITIONER, UNSPECIFIED	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	AJOVY 225MG/1.5ML AUTO-INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, COMMUNITY HEALTH	AJOVY 225MG/1.5ML PREF SYR INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	AJOVY 225MG/1.5ML PREF SYR INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Denied	1
3962	UNSPECIFIED	AJOVY 225MG/1.5ML PREF SYR INJ (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3962	NEUROLOGY	AJOVY 225MG/1.5ML SC SOAJ	ANTIMIGRAINE	Approved	1
3956	UNSPECIFIED	AJOVY 225MG/1.5ML SC SOAJ	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	AJOVY 225MG/1.5ML SC SOSY	ANTIMIGRAINE	Approved	1
3951	NEUROLOGY	AJOVY 225MG/1.5ML SC SOSY	ANTIMIGRAINE	Approved	1
3956	INTERNAL MEDICINE	AJOVY INJ 225MG/1.5ML (FREMANEZUMAB-VFRM)	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	AJOVY INJ 225MG/1.5ML (FREMANEZUMAB-VFRM)	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3956	FAMILY PRACTICE	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3956	NEUROLOGY	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, FAMILY HEALTH	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM- AB-VFRM)	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	1
3956	UNSPECIFIED	AJOVY INJ 225MG/1.5ML PEN (FREMANEZUM-AB-VFRM)	ANTIMIGRAINE	Approved	3
3963	DERMATOLOGY	AKLIEF 0.005% CREAM	ALL OTHER DERMATOLOGICALS	Denied	2
3963	HEMATOLOGY & ONCOLOGY	AKYNZEO CAPSULES (NETUPITANT-PALONOSE-TRON)	ANTIEMETIC	Denied	1
3956	FAMILY PRACTICE	ALBUTEROL HFA	ASTHMA	Approved	1
3956	FAMILY PRACTICE	ALBUTEROL SULFATE HFA	ASTHMA	Denied	1
3963	UNSPECIFIED	ALEVAZOL 1% TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3961	FAMILY PRACTICE	ALOGLIPTIN	DIABETIC THERAPY	Denied	1
3951	FAMILY PRACTICE	ALOGLIPTIN-METFORMIN	DIABETIC AGENT	Denied	1
3956	UNSPECIFIED	ALOSETRON	GASTROINTESTINAL AGENTS	Denied	1
3956	UNSPECIFIED	ALOSETRON HCL 0.5MG OR TABS	GASTROINTESTINAL AGENTS	Approved	1
3956	GASTROENTEROLOGY	ALOSETRON HCL 1MG OR TABS	GASTROINTESTINAL AGENTS	Approved	1
3951	CARDIOLOGY	AMBRISENTAN	DERMATOLOGICAL AGENTS	Approved	1
3951	UNSPECIFIED	AMBRISENTAN	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	AMBRISENTAN	DERMATOLOGICAL AGENTS	Denied	1
3951	CARDIOLOGY	AMBRISENTAN 10MG OR TABS	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	AMITRIPTYLINE HCL 150MG OR TABS	ANTIDEPRESSANTS	Approved	1
3964	DERMATOLOGY	AMNESTEEM (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	AMNESTEEM (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	AMNESTEEM (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	AMNESTEEM 10MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	AMNESTEEM 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	AMNESTEEM 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	AMNESTEEM 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	AMNESTEEM 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	AMPHETAMINE-DEXTROAMPHET ER 15MG OR CP24	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHET ER 20MG OR CP24	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHET ER 20MG OR CP24	CNS STIMULANTS	Approved	2
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHET ER 20MG OR CP24	CNS STIMULANTS	Approved	2
3961	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHET ER 20MG OR CP24	CNS STIMULANTS	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHET ER 20MG OR CP24	CNS STIMULANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHET ER 20MG OR CP24	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHET ER 25MG OR CP24	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHET ER 25MG OR CP24	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHET ER 25MG OR CP24	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHET ER 25MG OR CP24	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHET ER 30MG OR CP24	CNS STIMULANTS	Approved	3
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHET ER 30MG OR CP24	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHET ER 30MG OR CP24	CNS STIMULANTS	Approved	2
3951	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHET ER 30MG OR CP24	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 10MG OR TABS	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 10MG OR TABS	CNS STIMULANTS	Approved	1
3951	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 10MG OR TABS	CNS STIMULANTS	Approved	1
3963	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 10MG TABLETS	CNS STIMULANTS	Denied	1
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 10MG TABLETS	CNS STIMULANTS	Denied	1
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 10MG TABLETS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 15MG ER	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 15MG OR TABS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 15MG OR TABS	CNS STIMULANTS	Approved	2
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 15MG TAB	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 15MG TAB	CNS STIMULANTS	Denied	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 15MG TABLETS	CNS STIMULANTS	Approved	1
3962	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG	CNS STIMULANTS	Approved	1
3962	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG	CNS STIMULANTS	Approved	1
3963	PSYCHOLOGIST, SCHOOL	AMPHETAMINE-DEXTROAMPHETAMINE 20MG	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	1
3956	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	1
3951	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Denied	1
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	1
3961	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Denied	1
3956	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG ER	CNS STIMULANTS	Approved	2
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	6
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	2
3956	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	2
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	4
3956	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG OR TABS	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Denied	2
3956	NEUROLOGY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Denied	2
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Denied	2
3961	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Approved	1
3961	SLEEP MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Denied	2
3961	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Denied	1
3956	PEDIATRICS	AMPHETAMINE-DEXTROAMPHETAMINE 25MG ER	CNS STIMULANTS	Approved	1
3965	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Denied	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Denied	1
3951	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Denied	1
3965	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3964	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3962	NEUROLOGY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3969	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3951	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3962	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3951	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Denied	2
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG	CNS STIMULANTS	Approved	3
3951	NURSE PRACTITIONER, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG ER	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG ER	CNS STIMULANTS	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG ER	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG ER	CNS STIMULANTS	Denied	1
3951	EMERGENCY MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	EMERGENCY MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	23
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	21
3951	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	3
3965	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	GENERAL PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3963	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	OBSTETRICS & GYNECOLOGY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	2
3956	PEDIATRICS	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3951	PHYSICIAN, SURGERY, GENERAL	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	6

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	2
3951	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	2
3961	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3951	PSYCHOLOGIST, SCHOOL	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	5
3951	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	3
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	6
3961	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3964	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG OR TABS	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Denied	4
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	4
3951	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Denied	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Denied	1
3963	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	1
3956	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, PSYCHIATRIC	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	3
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	5
3963	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Denied	1
3956	REGISTERED NURSE, UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	3
3963	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	2
3951	UNSPECIFIED	AMPHETAMINE-DEXTROAMPHETAMINE 30MG TAB	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE 5MG OR TABS	CNS STIMULANTS	Approved	1
3969	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE ER 20MG	CNS STIMULANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	AMPHETAMINE-DEXTROAMPHETAMINE ER 20MG	CNS STIMULANTS	Approved	1
3963	INTERNAL MEDICINE	AMPHETAMINE-DEXTROAMPHETAMINE ER 20MG	CNS STIMULANTS	Approved	1
3965	PEDIATRICS	AMPHETAMINE-DEXTROAMPHETAMINE ER 20MG	CNS STIMULANTS	Approved	1
3967	PSYCHIATRY	AMPHETAMINE-DEXTROAMPHETAMINE ER 20MG	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY, CHILD & ADOLESCENT	AMPHETAMINE-DEXTROAMPHETAMINE ER 20MG	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	AMPYRA	POTASSIUM CHANNEL BLOCKER	Approved	1
3951	FAMILY PRACTICE	ANDRODERM (TESTOSTERONE TRANSDERMAL PATCH)	ANDROGENS	Denied	1
3951	FAMILY PRACTICE	ANDRODERM 4MG/24HRTD PT24	ANDROGENS	Approved	1
3956	UNSPECIFIED	APAP-CODEINE TAB 300-15 MG	NARCOTIC ANALGESICS	Approved	1
3963	ANESTHESIOLOGY	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	2
3956	ANESTHESIOLOGY	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3956	EMERGENCY MEDICINE	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3963	INTERNAL MEDICINE	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3965	UNSPECIFIED	APAP-CODEINE TAB 300-60 MG	NARCOTIC ANALGESICS	Approved	1
3956	PEDIATRICS	ARANESP	HEMATINICS & BLOOD CELL STIMULATORS	Denied	1
3956	UNSPECIFIED	ARANESP	HEMATINICS & BLOOD CELL STIMULATORS	Approved	1
3962	DERMATOLOGY	ARAZLO (TAZAROTENE)	DERMATOLOGICAL AGENTS	Approved	1
3969	DERMATOLOGY	ARAZLO (TAZAROTENE)	DERMATOLOGICAL AGENTS	Approved	1
3962	UNSPECIFIED	ARAZLO (TAZAROTENE)	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ARAZLO (TAZAROTENE)	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	ARAZLO 0.045% EX LOTN	DERMATOLOGICAL AGENTS	Approved	1
3951	INTERNAL MEDICINE	ARAZLO 0.045% EX LOTN	DERMATOLOGICAL AGENTS	Approved	1
3951	UNSPECIFIED	ARAZLO 0.045% EX LOTN	DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	4
3956	FAMILY PRACTICE	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	2
3951	FAMILY PRACTICE	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	NEUROLOGY	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3951	PSYCHIATRY	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	2
3965	UNSPECIFIED	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3963	UNSPECIFIED	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3969	UNSPECIFIED	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3951	UNSPECIFIED	ARMODAFINIL 150MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	FAMILY PRACTICE	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3956	INTERNAL MEDICINE	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, ADULT HEALTH	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3963	PULMONARY DISEASES	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3956	PULMONARY DISEASES	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	ARMODAFINIL 150MG OR TABS	CNS STIMULANTS	Approved	1
3961	FAMILY PRACTICE	ARMODAFINIL 200MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	INTERNAL MEDICINE	ARMODAFINIL 200MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	ARMODAFINIL 200MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	ARMODAFINIL 200MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3951	UNSPECIFIED	ARMODAFINIL 200MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	FAMILY PRACTICE	ARMODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	3
3951	PULMONARY DISEASES	ARMODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	PULMONARY DISEASES	ARMODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	ARMODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	ARMODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	2
3963	EMERGENCY MEDICINE	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	FAMILY PRACTICE	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3951	FAMILY PRACTICE	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	NEUROLOGY	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3962	NURSE PRACTITIONER, ACUTE CARE	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	PULMONARY DISEASES	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	2
3963	UNSPECIFIED	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	UNSPECIFIED	ARMODAFINIL 250MG	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	2
3963	FAMILY PRACTICE	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3956	FAMILY MEDICINE	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Denied	1
3951	FAMILY PRACTICE	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Denied	1
3956	FAMILY PRACTICE	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	2
3963	INTERNAL MEDICINE	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3963	PULMONARY DISEASES	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3951	UNSPECIFIED	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	ARMODAFINIL 250MG OR TABS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	ARMODAFINIL 50MG	CNS STIMULANTS	Denied	1
3956	FAMILY PRACTICE	ARMODAFINIL 50MG OR TABS	CNS STIMULANTS	Approved	1
3951	NEUROLOGY	ARMODAFINIL 50MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	ARMODAFINIL 50MG OR TABS	CNS STIMULANTS	Approved	1
3963	INTERNAL MEDICINE	ARNUITY ELLIPTA (FLUTICASONE FUROATE INHA- LATION PO	ASTHMA	Denied	1
3963	PSYCHIATRY	ATOMOXETINE 40MG	CNS STIMULANTS	Denied	1
3963	NEUROLOGY	AUBAGIO	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	UNSPECIFIED	AUBAGIO	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	ALLERGY & IMMUNOLOGY	AUVI-Q 0.3MG KIT	ALLERGEN SPECIFIC IMMUNOTHERAPY	Denied	1
3963	UNSPECIFIED	AVONEX	MULTIPLE SCLEROSIS AGENT	Approved	1
3965	FAMILY PRACTICE	AZELAIC ACID	DERMATOLOGICAL AGENTS	Denied	1
3962	INTERNAL MEDICINE	AZELAIC ACID	DERMATOLOGICAL AGENTS	Approved	2
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	AZELAIC ACID	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	AZELAIC ACID	DERMATOLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	AZELAIC ACID	DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	AZELAIC ACID	DERMATOLOGICAL AGENTS	Denied	1
3962	UNSPECIFIED	AZELAIC ACID	DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	AZELAIC ACID	DERMATOLOGICAL AGENTS	Approved	1
3951	DERMATOLOGY	AZELAIC ACID 15% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	AZELAIC ACID 15% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	AZELAIC ACID 15% EX GEL	DERMATOLOGICAL AGENTS	Approved	9
3951	UNSPECIFIED	AZELAIC ACID 15% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	EMERGENCY MEDICINE	AZSTARYS	CENTRAL NERVOUS SYSTEM STIMULANT	Denied	1
3963	EMERGENCY MEDICINE	AZSTARYS	CENTRAL NERVOUS SYSTEM STIMULANT	Approved	1
3963	PEDIATRICS	AZSTARYS 26.1-5.2 CAPSULE	CENTRAL NERVOUS SYSTEM STIMULANT	Denied	1
3963	FAMILY PRACTICE	AZSTARYS 26.1-5.2 CAPSULES	CENTRAL NERVOUS SYSTEM STIMULANT	Denied	1
3963	ANESTHESIOLOGY	BELBUCA 150MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	BELBUCA 150MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	CLINICAL NURSE SPECIALIST, ACUTE CARE	BELBUCA 150MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	BELBUCA 150MCG BUCCAL FILM (BUPRENOR-PHINE)	NARCOTIC ANALGESICS	Denied	2
3963	UNSPECIFIED	BELBUCA 300MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
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Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	FAMILY PRACTICE	BELBUCA 450MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	BELBUCA 450MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	BELBUCA 450MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	BELBUCA 600MCG BU FILM	NARCOTIC ANALGESICS	Approved	5
3956	UNSPECIFIED	BELBUCA 600MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3951	UNSPECIFIED	BELBUCA 600MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, SURGERY, GENERAL	BELBUCA 750MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	BELBUCA 750MCG BU FILM	NARCOTIC ANALGESICS	Approved	2
3956	ANESTHESIOLOGY	BELBUCA 750MCG BUCCAL FILM (BUPRENOR-PHINE)	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	BELBUCA 75MCG BU FILM	NARCOTIC ANALGESICS	Approved	2
3963	ANESTHESIOLOGY	BELBUCA 75MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	BELBUCA 75MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	BELBUCA 75MCG BUCCAL FILM (BUPRENORPHINE)	NARCOTIC ANALGESICS	Denied	1
3956	NEUROLOGY	BELBUCA 900MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	BELBUCA 900MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	BELBUCA 900MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3961	REGISTERED NURSE, EMERGENCY	BELBUCA 900MCG BU FILM	NARCOTIC ANALGESICS	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3967	FAMILY PRACTICE	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3956	FAMILY PRACTICE	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3963	FAMILY PRACTICE	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3962	FAMILY PRACTICE	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3962	NEUROLOGY	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3963	PHYSICIAN, SURGERY, GENERAL	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3963	PSYCHIATRY	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3965	UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3967	UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3963	UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3962	UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Approved	1
3963	UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3956	UNSPECIFIED	BELSOMRA (SUVOREXANT)	SEDATIVE NON-BARBITURATE	Denied	1
3963	INTERNAL MEDICINE	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, FAMILY HEALTH	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	2
3956	NURSE PRACTITIONER, PSYCHIATRIC	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3963	PHYSICIAN, SURGERY, GENERAL	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3963	UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	4
3951	UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	2
3956	UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	2
3962	UNSPECIFIED	BELSOMRA 10MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3964	FAMILY PRACTICE	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3951	FAMILY PRACTICE	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Denied	1
3962	FAMILY PRACTICE	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	FAMILY PRACTICE	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	PSYCHIATRY	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	2
3951	UNSPECIFIED	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	UNSPECIFIED	BELSOMRA 15MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	FAMILY PRACTICE	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	3
3956	INTERNAL MEDICINE	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3964	INTERNAL MEDICINE	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	NURSE PRACTITIONER, PSYCHIATRIC	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3956	PSYCHIATRY	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	4
3965	UNSPECIFIED	BELSOMRA 20MG OR TABS	SEDATIVE NON-BARBITURATE	Approved	1
3963	INTERNAL MEDICINE	BENLYSTA	LUPUSTHERAPY	Approved	1
3951	RHEUMATOLOGY	BENLYSTA	LUPUSTHERAPY	Approved	1
3963	RHEUMATOLOGY	BENLYSTA	LUPUSTHERAPY	Approved	1
3951	UNSPECIFIED	BETAMETHASONE DIPROPIONATE 0.05% CREAM	TOPICAL SKIN PRODUCT	Approved	1
3956	FAMILY PRACTICE	BETAMETHASONE VALERATE 0.1% EX CREA	TOPICAL SKIN PRODUCT	Approved	1
3956	FAMILY PRACTICE	BETAMETHASONE VALERATE 0.1% OINTMENT	TOPICAL SKIN PRODUCT	Approved	1
3956	UNSPECIFIED	BEXAROTENE	ANTINEOPLASTICS	Approved	1
3951	UNSPECIFIED	BEXAROTENE	ANTINEOPLASTICS	Approved	1
3963	DERMATOLOGY	BEXAROTENE GEL	ANTINEOPLASTICS	Approved	1
3963	CARDIOLOGY	BOSENTAN 125 MG	VASODILATORS	Approved	1
3956	UNSPECIFIED	BOSENTAN 62.5 MG	VASODILATORS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	BOSULIF	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	BRAFTOVI	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	BREZTRI AEROSPHERE	RESPIRATORY AGENTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	BRILINTA 90MG TABLET	VASODILATORS CORONARY	Denied	1
3963	UNSPECIFIED	BRIMONIDINE TARTRATE 0.33% EX GEL	ANTIGLAUCOMA	Approved	2
3963	HEMATOLOGY & ONCOLOGY	BRUKINSA	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	BRUKINSA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	BUDESONIDE 1MG/2ML SUSPENSION	RESPIRATORY AGENTS	Denied	1
3956	ANESTHESIOLOGY	BUPRENORPHINE 10MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3963	ANESTHESIOLOGY	BUPRENORPHINE 10MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	EMERGENCY MEDICINE	BUPRENORPHINE 10MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	BUPRENORPHINE 10MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3963	UNSPECIFIED	BUPRENORPHINE 10MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	2
3965	FAMILY PRACTICE	BUPRENORPHINE 15MCG/HR TD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3956	FAMILY PRACTICE	BUPRENORPHINE 15MCG/HR TD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3963	INTERNAL MEDICINE	BUPRENORPHINE 15MCG/HR TD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	BUPRENORPHINE 15MCG/HR TD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3956	ANESTHESIOLOGY	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3963	ANESTHESIOLOGY	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	EMERGENCY MEDICINE	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	FAMILY PRACTICE	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	2
3963	INTERNAL MEDICINE	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3951	NURSE PRACTITIONER, ACUTE CARE	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	PAIN MEDICINE	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	REGISTERED NURSE, EMERGENCY	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	2
3963	UNSPECIFIED	BUPRENORPHINE 15MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	3
3956	ANESTHESIOLOGY	BUPRENORPHINE 20MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3951	ANESTHESIOLOGY	BUPRENORPHINE 20MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3956	NEUROLOGICAL SURGERY	BUPRENORPHINE 20MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3956	PAIN MEDICINE	BUPRENORPHINE 20MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	BUPRENORPHINE 20MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Denied	1
3956	ANESTHESIOLOGY	BUPRENORPHINE 20MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	BUPRENORPHINE 20MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, UNSPECIFIED	BUPRENORPHINE 20MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3961	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	BUPRENORPHINE 20MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3963	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	BUPRENORPHINE 20MCG/HR TD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	BUPRENORPHINE 20MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	2
3963	UNSPECIFIED	BUPRENORPHINE 20MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	PHYSICIAN, GERIATRIC MEDICINE	BUPRENORPHINE 5MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Denied	1
3956	UNSPECIFIED	BUPRENORPHINE 5MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Denied	1
3956	ANESTHESIOLOGY	BUPRENORPHINE 5MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	INTERNAL MEDICINE	BUPRENORPHINE 5MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3963	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	BUPRENORPHINE 5MCG/HRTD PTWK	SUBSTANCE ABUSE AGENTS	Approved	1
3956	UNSPECIFIED	BUPRENORPHINE 7.5MCG/HRTD PATCH WEEKLY	SUBSTANCE ABUSE AGENTS	Approved	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	BUPRENORPHINE HCL 2MG SL SUBL	SUBSTANCE ABUSE AGENTS	Approved	1
3956	FAMILY PRACTICE	BUPRENORPHINE HCL 8MG SL SUBL	SUBSTANCE ABUSE AGENTS	Denied	1
3963	INTERNAL MEDICINE	BUPRENORPHINE HCL 8MG SL SUBL	SUBSTANCE ABUSE AGENTS	Denied	1
3956	UNSPECIFIED	BUPRENORPHINE HCL 8MG SL SUBL	SUBSTANCE ABUSE AGENTS	Approved	1
3963	UNSPECIFIED	BUPRENORPHINE HCL 8MG SL SUBL	SUBSTANCE ABUSE AGENTS	Denied	1
3956	UNSPECIFIED	BUPRENORPHINE HYDROCHLORIDE/NALOXONE HYDROCHLORIDE SL 2 MG- 0.5 MG FILM	SUBSTANCE ABUSE AGENTS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	BUPRENORPHINE SL 2 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3956	UNSPECIFIED	BUPRENORPHINE SL 2 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	3
3956	ANESTHESIOLOGY	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	2
3956	ANESTHESIOLOGY	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Approved	1
3956	EMERGENCY MEDICINE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	4
3951	EMERGENCY MEDICINE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	3
3956	FAMILY PRACTICE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	9
3951	FAMILY PRACTICE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	2
3963	FAMILY PRACTICE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3951	INTERNAL MEDICINE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	3
3956	INTERNAL MEDICINE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	5
3963	INTERNAL MEDICINE	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	3
3951	NURSE PRACTITIONER, ADULT HEALTH	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3951	NURSE PRACTITIONER, PSYCHIATRIC	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3951	PEDIATRICS	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3956	PEDIATRICS	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	2
3956	PSYCHIATRY	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3951	PSYCHIATRY	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	3
3956	UNSPECIFIED	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	17
3956	UNSPECIFIED	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Approved	1
3951	UNSPECIFIED	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3963	UNSPECIFIED	BUPRENORPHINE SL 8 MG TAB	SUBSTANCE ABUSE AGENTS	Denied	1
3963	ANESTHESIOLOGY	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	1
3963	EMERGENCY MEDICINE	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	1
3964	FAMILY PRACTICE	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	1
3963	FAMILY PRACTICE	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	2
3964	INTERNAL MEDICINE	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	1
3964	PSYCHIATRY	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	1
3963	UNSPECIFIED	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Denied	10
3963	UNSPECIFIED	BUPRENORPHINE SUBLINGUAL TABLETS	SUBSTANCE ABUSE AGENTS	Approved	1
3956	NEUROLOGY	BUTORPHANOL 10MG/ML NASAL SPRAY	ANTIMIGRAINE	Denied	1
3956	UNSPECIFIED	BUTRANS 10MCG/HRTD PTWK	NARCOTIC ANALGESICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	CABOMETYX	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	CABOMETYX	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY, PEDIATRIC	CABOMETYX	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	CABOMETYX	ANTINEOPLASTICS	Approved	2
3963	MEDICAL ONCOLOGY	CABOMETYX	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	CABOMETYX	ANTINEOPLASTICS	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	CALCIPOTRIENE SOLUTION	ALL OTHER DERMATOLOGICALS	Approved	1
3956	DERMATOLOGY	CALCIPOTRIENE-BETAMETHASONE OINTMENT	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	CAMZYOS	CARDIOVASCULAR AGENTS	Denied	1
3963	UNSPECIFIED	CANASA SUPPOSITORY	GASTROINTESTINAL AGENTS	Denied	1
3956	HEMATOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY	CAPECITABINE	ANTINEOPLASTICS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3969	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	4
3951	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	CAPECITABINE	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	LEGAL MEDICINE	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	CAPECITABINE	ANTINEOPLASTICS	Approved	2
3956	PHYSICIAN, ONCOLOGY, MEDICAL	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Approved	2
3951	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Approved	2
3956	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	CAPEX SHAMPOO (FLUOCINOLONE ACETONIDE)	ALL OTHER DERMATOLOGICALS	Denied	1
3963	UNSPECIFIED	CAPEX SHAMPOO (FLUOCINOLONE ACETONIDE)	ALL OTHER DERMATOLOGICALS	Approved	2
3963	UNSPECIFIED	CARDURA XL 4MG OR TB24	ANTIHYPERTENSIVE	Approved	1
3956	INFECTIOUS DISEASES	CEFTRIAXONE VIALS	ANTIBIOTICS	Approved	1
3956	INFECTIOUS DISEASES	CEFTRIAXONE VIALS	ANTIBIOTICS	Denied	1
3963	OPTOMETRIST, UNSPECIFIED	CEQUA	DRY EYE TREATMENT	Approved	1
3956	UROLOGY	CHORIONIC GONADOTROPIN 10000UNIT IM SOLR	GONADOTROPINS	Approved	1
3963	INTERNAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	2
3956	INTERNAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	2
3956	NEPHROLOGY / RENAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	3
3963	NEPHROLOGY / RENAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	2
3951	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Approved	1
3962	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Approved	1
3963	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Denied	1
3962	DERMATOLOGY	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3965	DERMATOLOGY	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3969	DERMATOLOGY	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3969	NURSE PRACTITIONER, ACUTE CARE	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3965	UNSPECIFIED	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	2
3964	UNSPECIFIED	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	CLARAVIS (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	CLARAVIS 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	CLARAVIS 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	CLARAVIS 40 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1

888         UNSPECIFIED         CLARANIS AMMG OR CAPS         DERMATOLOGICAL ASENTS         Agrowed         3           3966         UNSPECIFIED         CLARANIS AMMG OR CAPS         DERMATOLOGICAL ASENTS         Agrowed         1           3968         UNSPECIFIED         CLARANIS AMMG OR CAPS         DERMATOLOGICAL ASENTS         Agrowed         1           3983         UNSPECIFIED         CLINDAMYON PIOSPHATE 9IS EX CRE         TOPICAL SKIN PRODUCT         Agrowed         1           3986         UNSPECIFIED         CLINDAMYON PIOSPHATE 9IS EX CRE         TOPICAL SKIN PRODUCT         Agrowed         1           3986         UNSPECIFIED         CLORETAGOLOUSY         CLORETAGOLOUSY         DERMATOLOGICAL ASENTS         Agrowed         1           3986         OTOLARY NEMININOLOGY         CLORETAGOLOUSY         CLORETAGOLOUSY         AMINIPORAGE         Agrowed         1           3986         OTOLARY NEMININOLOGY         CLORETAGOLOUS         AMINIPORAGE         Agrowed         1           3986         PAMILY PRACTICE         CONTINUOUS BLOOG GLUCOSE         ARRIVANA         Deried         2           3983         PAMILY PRACTICE         CONTINUOUS BLOOG GLUCOSE         CARDIOARSCULAR ASENTS         Deried         2           3981         NUSSE PRACTITIONER, FAMIL	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
8966         UNSPECIFIED         CLANAWS 40MG ORI CAPS         DEFMATIOLOGICAL AGENTS         Agroved         1           3933         UNSPECIFIED         CLINDAMYORI PER 15 EX CEL.         TOPICAL SINI PRODUCT         Approved         1           3986         UNSPECIFIED         CLINDAMYORI PHOSPHATE BIS EX CEL.         TOPICAL SINI PRODUCT         Approved         1           3986         UNSPECIFIED         CLOREATSOL 0.05% SOLUTION         DEFMATIOLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         CLOREATSOL 0.05% SOLUTION         DEFMATIOLOGICAL AGENTS         Approved         1           3986         ALLERY 8 IMMUNOLOGY         CLORTIMAZOLE TROCHES         ANTIFUNALS         Approved         1           3986         ALLERY 8 IMMUNOLOGY         CLORTIMAZOLE TROCHES         ANTIFUNALS         Denied         1           3986         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOWASCULAR AGENTS         Denied         1           3981         MISSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOWASCULAR AGENTS         Penied         1           3982         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOWASCULAR AGENTS         Penied         1           3983         PARIS	3963	UNSPECIFIED	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	3
3883         UNSPECIFIED         CLINDAMYCIN GEL 1%         DEFMATOLOGICAL ACENTS         Denied         1           3883         UNSPECIFIED         CLINDAMYCIN PHOSINHATE 1%, EX GEL         TOPICAL SKIN PRODUCT         Approved         3           3886         WIRSE PRACTITIONER, FAMILY HEALTH         CLINDAMYCIN PHOSINHATE SHEZOYL PEROXIDE         TOPICAL SKIN PRODUCT         Approved         4           3886         ALLERGY & INMUNDICORY         CLOSTHANZOLE TROCHES         ANTEUNCALS         Approved         4           3886         OTOLARNOGLOGY         CLOSTHANZOLE TROCHES         ANTEUNCALS         Denied         4           3886         OTOLARNOGLOGY         CLOSTHANZOLE TROCHES         ANTEUNCALS         Denied         1           3883         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3893         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3893         NIRSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3894         OBSTETICAS & RYNECOLOCY         CONTINUOUS BLOOD GLUCOSE STATEM RECEIVER         CARDIOVASCULAR AGENTS         Denied         2           3893	3965	UNSPECIFIED	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3863         UNSPECIFIED         CUINDAMYCIN PHOSPHATE IN EX GEL         TOPICAL SKIN PRODUCT         Approved         1           3566         NURSE PRACTITIONER, FAMILY HEALTH         CLINDAMYCIN PHOSPHATE RENZOFL PEROXIDE         TOPICAL SKIN PRODUCT         Approved         1           3886         UNSPECIFIED         CLORENS CLUTION         DERMATOLOGICAL ACENTS         Approved         1           3866         ALLERGY & IMMUNOLOGY         CLOTRIMAZOLETROCHES         ANTIFUNGALS         Denied         1           3866         OTOLARNIGOLOGY         CLOTRIMAZOLETROCHES         ANTIFUNGALS         Denied         1           3868         FAMILY PRACTICE         CONTINUOUS BLODO GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3863         INTERNAL MEDICINE         CONTINUOUS BLODO GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3863         INTERNAL MEDICINE         CONTINUOUS BLODO GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3861         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLODO GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3862         OBSTETRICAS GONE         CONTINUOUS BLODO GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3863 <t< td=""><td>3956</td><td>UNSPECIFIED</td><td>CLARAVIS 40MG OR CAPS</td><td>DERMATOLOGICAL AGENTS</td><td>Approved</td><td>1</td></t<>	3956	UNSPECIFIED	CLARAVIS 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3886         NURSE PRACTITIONER, FAMILY HEALTH         CLINDAMYCIN PHOSPHATE BENZOYL PEROXIDE         TOPICAL SKIN PRODUCT         Aponoved         1           3866         UNSPECIFIED         CLOBETASOL 0.65%, SOLUTION         DERMATOLOGICAL AGENTS         Approved         1           3866         ALLERGY & IMMUNOLOGY         CLOTRIMAZOLE TROCHES         AMTHUNGALS         Denied         1           3866         OTOLARYNGOLOGY         CLOTRIMAZOLE TROCHES         AMTHUNGALS         Denied         1           3866         OTOLARYNGOLOGY         CLOTRIMAZOLE TROCHES         AMTHUNGALS         Denied         1           3863         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3863         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3869         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3860         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3862         OSSTETIKIS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DURBETIC DEVICES         Denied         1	3963	UNSPECIFIED	CLINDAMYCIN GEL 1%	DERMATOLOGICAL AGENTS	Denied	1
3550         INDESERRACTIONER, PARKITRECHING         GEL         OFFICAL SIN PRODUCT         Approved         ILIA           3566         ALLERGY RIMMUNOLOGY         CLOSTRIMAZOLETROCHES         ANTIFUNGALS         Approved         1           3566         ALLERGY RIMMUNOLOGY         CLOTRIMAZOLETROCHES         ANTIFUNGALS         Denied         1           3566         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3663         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3663         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3661         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3662         OBSTETRICS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3663         PHYSICIAN, GERRATTIC MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3663         PHYSICIAN, GERRATTIC MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           36	3963	UNSPECIFIED	CLINDAMYCIN PHOSPHATE 1% EX GEL	TOPICAL SKIN PRODUCT	Approved	1
3986         ALLERGY & IMMUNOLOGY         CLOTRIMAZOLE TROCHES         ANTIFUNALS         Approved         1           3986         OTCLARYNGOLOGY         CLOTRIMAZOLE TROCHES         ANTIFUNALS         Denied         1           3986         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3983         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3983         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3981         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3989         OBSTETIACS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3986         PHYSICIAN, GERIATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3987         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3983         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           398	3956	NURSE PRACTITIONER, FAMILY HEALTH		TOPICAL SKIN PRODUCT	Approved	1
3966         OTOLARYNGOLOGY         CLOTRIMAZDLE TROCHES         ANTIFUNGALS         Denied         1           3865         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3863         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3961         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3962         OBSTETRICS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         PHYSICAM, GERLATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3963         PHYSICAM, GERLATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM SERSOR         DIABETIC DEVICES         Denied         1	3956	UNSPECIFIED	CLOBETASOL 0.05% SOLUTION	DERMATOLOGICAL AGENTS	Approved	1
3966         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3969         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3969         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3962         OBSTERTICS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         PHYSICIAN, GENIATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         CARDIOVASCULAR AGENTS         Approved         1           3963         PHYSICIAN, GENIATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM SECIVER         DIABETIC DEVICES         Denied         1           3963         HAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES	3956	ALLERGY & IMMUNOLOGY	CLOTRIMAZOLETROCHES	ANTIFUNGALS	Approved	1
3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         2           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3961         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3962         OBSTETRICS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3965         PHYSICIAN, GERIATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         Denied         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         Denied         1 </td <td>3956</td> <td>OTOLARYNGOLOGY</td> <td>CLOTRIMAZOLETROCHES</td> <td>ANTIFUNGALS</td> <td>Denied</td> <td>1</td>	3956	OTOLARYNGOLOGY	CLOTRIMAZOLETROCHES	ANTIFUNGALS	Denied	1
3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3951         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3969         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3962         OBSTERICS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Approved         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Approved         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         Denied         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         D	3965	FAMILY PRACTICE	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Denied	1
3961         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Approved         1           3968         NURSE PRACTITIONER, FAMILY HEALTH         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3962         OBSTETRICS & GYNECOLOGY         CONTINUOUS BLOOD GLUCOSE         CARDIOVASCULAR AGENTS         Denied         1           3963         PHYSICIAN, GERIATRIC MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         CARDIOVASCULAR AGENTS         Approved         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Denied         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER         DIABETIC DEVICES         Approved         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         Denied         1           3963         UNSPECIFIED         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         Denied         1           3963         FAMILY PRACTICE         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DEVICES         Denied         1           3963         INTERNAL MEDICINE         CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR         DIABETIC DE	3963	FAMILY PRACTICE	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Denied	2
3969       NURSE PRACTITIONER, FAMILY HEALTH       CONTINUOUS BLOOD GLUCOSE       CARDIOVASCULAR AGENTS       Denied       1         3962       OBSTETRICS & GYNECOLOGY       CONTINUOUS BLOOD GLUCOSE       CARDIOVASCULAR AGENTS       Denied       1         3965       PHYSICIAN, GERIATRIC MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Denied       1         3963       FAMILY PRACTICE       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Denied       1         3963       UNSPECIFIED       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Approved       1         3963       UNSPECIFIED       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Approved       1         3963       UNSPECIFIED       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3963       FAMILY PRACTICE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3965       FAMILY PRACTICE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3966       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3969       INTERNAL MEDICINE <td>3963</td> <td>INTERNAL MEDICINE</td> <td>CONTINUOUS BLOOD GLUCOSE</td> <td>CARDIOVASCULAR AGENTS</td> <td>Denied</td> <td>1</td>	3963	INTERNAL MEDICINE	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Denied	1
3962OBSTETRICS & GYNECOLOGYCONTINUOUS BLOOD GLUCOSECARDIOVASCULAR AGENTSDenied13965PHYSICIAN, GERIATRIC MEDICINECONTINUOUS BLOOD GLUCOSECARDIOVASCULAR AGENTSApproved13963FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13967INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESApproved13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13965FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23969INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13969INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13961NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied33969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICES	3951	NURSE PRACTITIONER, FAMILY HEALTH	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Approved	1
3965PHYSICIAN, GERIATRIC MEDICINECONTINUOUS BLOOD GLUCOSECARDIOVASCULAR AGENTSApproved13963FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13967INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESApproved13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13965FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23964INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13965INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13966INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13961NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied33969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved <t< td=""><td>3969</td><td>NURSE PRACTITIONER, FAMILY HEALTH</td><td>CONTINUOUS BLOOD GLUCOSE</td><td>CARDIOVASCULAR AGENTS</td><td>Denied</td><td>1</td></t<>	3969	NURSE PRACTITIONER, FAMILY HEALTH	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Denied	1
3963       FAMILY PRACTICE       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Denied       1         3967       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Denied       1         3963       UNSPECIFIED       CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER       DIABETIC DEVICES       Denied       1         3963       UNSPECIFIED       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3965       FAMILY PRACTICE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3963       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3969       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3961       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3963       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3963       INTERNAL MEDICINE       CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR       DIABETIC DEVICES       Denied       1         3963       NURSE PRACTITIONER, FAMILY HEALTH </td <td>3962</td> <td>OBSTETRICS &amp; GYNECOLOGY</td> <td>CONTINUOUS BLOOD GLUCOSE</td> <td>CARDIOVASCULAR AGENTS</td> <td>Denied</td> <td>1</td>	3962	OBSTETRICS & GYNECOLOGY	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Denied	1
Second   Internal Medicine   Continuous Blood Glucose system Receiver   Diabetric Devices   Denied   1	3965	PHYSICIAN, GERIATRIC MEDICINE	CONTINUOUS BLOOD GLUCOSE	CARDIOVASCULAR AGENTS	Approved	1
3963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESApproved13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13965FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13969INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13961INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied33969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved2 <td>3963</td> <td>FAMILY PRACTICE</td> <td>CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER</td> <td>DIABETIC DEVICES</td> <td>Denied</td> <td>1</td>	3963	FAMILY PRACTICE	CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER	DIABETIC DEVICES	Denied	1
3963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVERDIABETIC DEVICESDenied13965FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13969INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13961INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied33969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved2	3967	INTERNAL MEDICINE	CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER	DIABETIC DEVICES	Denied	1
3965FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13969INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13965INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13951NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied33969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved2	3963	UNSPECIFIED	CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER	DIABETIC DEVICES	Approved	1
3963FAMILY PRACTICECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied23963INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13969INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13965INTERNAL MEDICINECONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13951NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963NURSE PRACTITIONER, FAMILY HEALTHCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESDenied33969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved13963UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved23969UNSPECIFIEDCONTINUOUS BLOOD GLUCOSE SYSTEM SENSORDIABETIC DEVICESApproved2	3963	UNSPECIFIED	CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER	DIABETIC DEVICES	Denied	1
3963   INTERNAL MEDICINE   CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR   DIABETIC DEVICES   Denied   1	3965	FAMILY PRACTICE	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
3969   INTERNAL MEDICINE   CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR   DIABETIC DEVICES   Denied   1	3963	FAMILY PRACTICE	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	2
3965 INTERNAL MEDICINE CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1 3963 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1 3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 3 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1	3963	INTERNAL MEDICINE	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1  3956 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1  3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 3  3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1  3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2  3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2  3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3969	INTERNAL MEDICINE	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1  3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 3  3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1  3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2  3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3965	INTERNAL MEDICINE	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1 3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 3 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3951	NURSE PRACTITIONER, FAMILY HEALTH	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 3 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3963	NURSE PRACTITIONER, FAMILY HEALTH	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 1 3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
3963 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Approved 2 3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3963	UNSPECIFIED	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	3
3969 UNSPECIFIED CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR DIABETIC DEVICES Denied 1	3969	UNSPECIFIED	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Approved	1
	3963	UNSPECIFIED	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Approved	2
	3969	UNSPECIFIED	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	DIABETIC DEVICES	Denied	1
3963 NEUROLOGY COPAXONE 40MG MULTIPLE SCLEROSIS AGENT Approved 1	3963	NEUROLOGY	COPAXONE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3963 NURSE PRACTITIONER, UNSPECIFIED COPAXONE 40MG MULTIPLE SCLEROSIS AGENT Approved 1	3963	NURSE PRACTITIONER, UNSPECIFIED	COPAXONE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3956 PHYSICIAN ASSISTANT, UNSPECIFIED COPAXONE 40MG MULTIPLE SCLEROSIS AGENT Approved 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	COPAXONE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3956 UNSPECIFIED COPAXONE 40MG MULTIPLE SCLEROSIS AGENT Approved 1	3956	UNSPECIFIED	COPAXONE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	DERMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3956	DERMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	2
3963	DERMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	2
3963	DERMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3951	DERMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3969	DERMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3963	INTERNAL MEDICINE	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3951	INTERNAL MEDICINE	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	2
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	3
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3956	RHEUMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	5
3963	RHEUMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	2
3951	RHEUMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3961	RHEUMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3956	RHEUMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	1
3965	RHEUMATOLOGY	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3965	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	2
3956	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	4
3963	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	6
3951	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Denied	2
3964	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3956	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	3
3951	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	COSENTYX	ALL OTHER DERMATOLOGICALS	Approved	2
3963	UNSPECIFIED	CREON 12000-38000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3961	UNSPECIFIED	CREON 12000-38000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3956	INTERNAL MEDICINE	CREON 12000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3951	UNSPECIFIED	CREON 12000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3963	GASTROENTEROLOGY	CREON 24000-76000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	CREON 24000-76000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	INTERNAL MEDICINE	CREON 24000-76000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Denied	1
3956	PULMONARY DISEASES	CREON 24000-76000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3951	UNSPECIFIED	CREON 24000-76000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	CREON 24000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3951	SURGERY, VASCULAR	CREON 24000UNIT	GASTROINTESTINAL AGENTS	Denied	1
3956	UNSPECIFIED	CREON 24000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3956	FAMILY PRACTICE	CREON 3000-9500UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3963	UNSPECIFIED	CREON 3000-9500UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3963	FAMILY PRACTICE	CREON 3000UNIT	GASTROINTESTINAL AGENTS	Denied	1
3951	FAMILY PRACTICE	CREON 36000-114000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3956	GASTROENTEROLOGY	CREON 36000-114000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	2
3956	INTERNAL MEDICINE	CREON 36000-114000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3963	UNSPECIFIED	CREON 36000-114000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3956	UNSPECIFIED	CREON 36000-114000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3956	GASTROENTEROLOGY	CREON 36000UNIT	GASTROINTESTINAL AGENTS	Denied	1
3961	GASTROENTEROLOGY	CREON 36000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	CREON 36000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3956	UNSPECIFIED	CREON 36000UNIT	GASTROINTESTINAL AGENTS	Approved	3
3956	FAMILY PRACTICE	CREON 6000-19000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3963	ENDOCRINOLOGY, PEDIATRIC	CRYSVITA	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	CRYSVITA	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	CYCLOBENZAPRINE HCL 10MG OR TABS	MUSCLE RELAXANTS	Approved	1
3963	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	2
3956	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	GENERAL PRACTICE	DAYVIGO (LEMBOREXANT)	HYPNOTIC	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DAYVIGO (LEMBOREXANT)	HYPNOTIC	Denied	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	DAYVIGO (LEMBOREXANT)	HYPNOTIC	Denied	1
3956	UNSPECIFIED	DAYVIGO (LEMBOREXANT)	HYPNOTIC	Denied	2
3963	UNSPECIFIED	DAYVIGO (LEMBOREXANT) 5 MG ORAL TABLET	HYPNOTIC	Approved	1
3956	FAMILY PRACTICE	DAYVIGO 10 MG TABLET	HYPNOTIC	Approved	1
3962	FAMILY PRACTICE	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3963	FAMILY PRACTICE	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3956	FAMILY PRACTICE	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3956	GENERAL PRACTICE	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PSYCHIATRY	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3951	PSYCHIATRY	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3956	UNSPECIFIED	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3963	UNSPECIFIED	DAYVIGO 10MG OR TABS	HYPNOTIC	Approved	1
3963	FAMILY PRACTICE	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3956	FAMILY PRACTICE	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3956	GENERAL PRACTICE	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3956	NEUROLOGY	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3963	UNSPECIFIED	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3956	UNSPECIFIED	DAYVIGO 5MG OR TABS	HYPNOTIC	Approved	1
3963	HEMATOLOGY & ONCOLOGY	DEFERASIROX	CHELATING AGENT	Denied	1
3962	NURSE PRACTITIONER, GERONTOLOGY	DEFERASIROX	CHELATING AGENT	Approved	1
3963	FAMILY PRACTICE	DEPO-TESTOSTERONE (TESTOSTERONE CYPIONATE INJ)	ANDROGENS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DEPO-TESTOSTERONE (TESTOSTERONE CYPIONATE INJ)	ANDROGENS	Denied	1
3963	CLINICAL NURSE SPECIALIST, ADULT HEALTH	DEPO-TESTOSTERONE (TESTOSTERONE CYPIO-NATE)	ANDROGENS	Denied	1
3963	FAMILY PRACTICE	DEPO-TESTOSTERONE (TESTOSTERONE CYPIO-NATE)	ANDROGENS	Denied	2
3956	FAMILY PRACTICE	DEPO-TESTOSTERONE (TESTOSTERONE CYPIO-NATE)	ANDROGENS	Denied	1
3963	INTERNAL MEDICINE	DEPO-TESTOSTERONE (TESTOSTERONE CYPIO-NATE)	ANDROGENS	Denied	1
3969	INTERNAL MEDICINE	DEPO-TESTOSTERONE (TESTOSTERONE CYPIO- NATE)	ANDROGENS	Approved	1
3969	INTERNAL MEDICINE	DEPO-TESTOSTERONE (TESTOSTERONE CYPIO-NATE)	ANDROGENS	Denied	1
3963	UROLOGY	DEPO-TESTOSTERONE (TESTOSTERONE CYPIONATE)	ANDROGENS	Approved	1
3956	UNSPECIFIED	DEPO-TESTOSTERONE (TESTOSTERONE CYPIONATE)	ANDROGENS	Denied	1
3962	UNSPECIFIED	DEPO-TESTOSTERONE (TESTOSTERONE CYPIONATE)	ANDROGENS	Denied	1
3963	FAMILY PRACTICE	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	4
3951	FAMILY PRACTICE	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	INTERNAL MEDICINE	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	NURSE PRACTITIONER, ADULT HEALTH	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	OBSTETRICS & GYNECOLOGY	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3963	PHYSICIAN, ENDOCRINOLOGY	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	DEPO-TESTOSTERONE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3951	DERMATOLOGY	DERMA-SMOOTHE F/S (BRAND ONLY) (FLUOCINO-LONE)	DERMATOLOGICAL AGENTS	Denied	1
3956	EMERGENCY MEDICINE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	FAMILY PRACTICE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3961	FAMILY PRACTICE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	FAMILY PRACTICE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	2
3961	INTERNAL MEDICINE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3963	INTERNAL MEDICINE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3963	INTERNAL MEDICINE	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	2
3956	NURSE PRACTITIONER, PSYCHIATRIC	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	PSYCHIATRY	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	PSYCHIATRY, CHILD & ADOLESCENT	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	UNSPECIFIED	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	9
3956	UNSPECIFIED	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	2
3963	UNSPECIFIED	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3961	UNSPECIFIED	DESVENLAFAXINE ER TAB	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	FAMILY PRACTICE	DESVENLAFAXINE SUCCINATE ER 100MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	2
3963	FAMILY PRACTICE	DESVENLAFAXINE SUCCINATE ER 100MG ORTB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3961	PSYCHIATRY	DESVENLAFAXINE SUCCINATE ER 100MG ORTB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 100MG ORTB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 100MG ORTB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	4
3963	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 100MG ORTB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	FAMILY PRACTICE	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	NURSE PRACTITIONER, PSYCHIATRIC	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	OBSTETRICS & GYNECOLOGY	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	PSYCHIATRY	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	2
3951	REGISTERED NURSE, UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	6
3963	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	3
3951	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 25MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	FAMILY PRACTICE	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	5
3963	NURSE PRACTITIONER, FAMILY HEALTH	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	3
3963	OBSTETRICS & GYNECOLOGY	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3963	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	4
3956	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	10
3956	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3951	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 50MG OR TB24	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Approved	1
3956	UNSPECIFIED	DESVENLAFAXINE SUCCINATE ER 50MG TABLETS	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	Denied	1
3956	UNSPECIFIED	DEXCOM G5 MIS RECEIVER	DIABETIC DEVICES	Denied	1
3956	FAMILY PRACTICE	DEXCOM G6 MIS RECEIVER	DIABETIC DEVICES	Denied	2
3956	INTERNAL MEDICINE	DEXCOM G6 MIS RECEIVER	DIABETIC DEVICES	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 MIS RECEIVER	DIABETIC DEVICES	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 MIS RECEIVER	DIABETIC DEVICES	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 MIS RECEIVER	DIABETIC DEVICES	Denied	1
3956	UNSPECIFIED	DEXCOM G6 MIS RECEIVER	DIABETIC DEVICES	Approved	2
3963	FAMILY PRACTICE	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	2
3956	FAMILY PRACTICE	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	2
3956	FAMILY PRACTICE	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	2
3956	INTERNAL MEDICINE	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	2
3956	INTERNAL MEDICINE	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	2
3963	INTERNAL MEDICINE	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	2
3956	UNSPECIFIED	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Denied	5
3956	UNSPECIFIED	DEXCOM G6 MIS SENSOR	DIABETIC SUPPLIES	Approved	6
3951	FAMILY PRACTICE	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Denied	1
3956	FAMILY PRACTICE	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Denied	3
3951	FAMILY PRACTICE	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Approved	1
3956	INTERNAL MEDICINE	DEXCOM G6 MIS TRANSMIT	DIABETIC SUPPLIES	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Approved	1
3956	UNSPECIFIED	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Denied	3
3956	UNSPECIFIED	DEXCOM G6 MISTRANSMIT	DIABETIC SUPPLIES	Approved	2
3963	FAMILY PRACTICE	DEXCOM G6 RECEIVER	DIABETIC SUPPLIES	Denied	1
3969	INTERNAL MEDICINE	DEXCOM G6 RECEIVER	DIABETIC SUPPLIES	Approved	1
3965	INTERNAL MEDICINE	DEXCOM G6 RECEIVER	DIABETIC SUPPLIES	Denied	1
3963	UNSPECIFIED	DEXCOM G6 RECEIVER	DIABETIC SUPPLIES	Approved	1
3962	UNSPECIFIED	DEXCOM G6 RECEIVER	DIABETIC SUPPLIES	Denied	1
3969	UNSPECIFIED	DEXCOM G6 RECEIVER	DIABETIC SUPPLIES	Approved	1
3963	FAMILY PRACTICE	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	4
3956	FAMILY PRACTICE	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	3
3963	INTERNAL MEDICINE	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	3
3956	INTERNAL MEDICINE	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	1
3951	INTERNAL MEDICINE	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	1
3963	NURSE PRACTITIONER, PRIMARY CARE	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	1
3956	UNSPECIFIED	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	4
3951	UNSPECIFIED	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	1
3963	UNSPECIFIED	DEXCOM G6 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	6
3965	ENDOCRINOLOGY, DIABETES & METABOLISM	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
3965	FAMILY PRACTICE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	3
3962	FAMILY PRACTICE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	2
3963	FAMILY PRACTICE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	2
3963	FAMILY PRACTICE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	2
3964	FAMILY PRACTICE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
3965	FAMILY PRACTICE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
3951	INTERNAL MEDICINE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
3964	INTERNAL MEDICINE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	2
3969	INTERNAL MEDICINE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
3965	INTERNAL MEDICINE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	2
3962	INTERNAL MEDICINE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
3963	INTERNAL MEDICINE	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
3969	NURSE PRACTITIONER, ADULT HEALTH	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1

1984   NUMBE PRACTITIONER, PARILY HEALTH   DENCOM GS SENSOR   DIABETIC SUPPLIES   Approved   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
Section   Pediatric   Decomption   Decompt	3964	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
Sec	3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	2
Second   UNSPECIFIED	3969	PEDIATRICS	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
Description	3963	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
Description	3962	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
See	3962	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	2
DIABETIC SUPPLIES   Approved   3   3   3   3   3   3   3   3   3	3963	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	2
DEX.COM G6 SENSOR	3965	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	2
DEXCOM GG SENSOR DEVICE (BLOOD-GLUCOSE SENSOR)  DIABETIC SUPPLIES Approved 1  3966 FAMILY PRACTICE DEXCOM GG SENSOR DEVICE (BLOOD-GLUCOSE SENSOR)  FAMILY PRACTICE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 14  3963 FAMILY PRACTICE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 14  3966 EMERGENCY MEDICINE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 17  3961 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3961 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3967 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3968 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3969 ENDOCRINOLOGY, PEDIATRIC DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3991 FAMILY PRACTICE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 ENDOCRINOLOGY, PEDIATRIC DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 FAMILY PRACTICE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 INTERNAL MEDICINE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 INTERNAL MEDICINE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 10  3996 INTERNAL MEDICINE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 INTERNAL MEDICINE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 NINSE PRACTITIONER, ACUTE CARE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 NINSE PRACTITIONER, FAMILY HEALTH DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM GG SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3996 NURSE PRACTITIONER, FEDIATRIC CARE DEXCOM GG SENSOR XX MISC DIABETIC SUPPLI	3969	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	3
PARTICLE SENSOR DEVICE (BLOOD GLUCOSE SENSOR DEVICE (BLOOD GLUCOSE SENSOR)  FAMILY PRACTICE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 14  2963 FAMILY PRACTICE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 14  2963 FAMILY PRACTICE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 14  2966 EMERGENCY MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  2961 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  2966 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  2966 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3963 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3963 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3963 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3964 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3965 ENDOCRINOLOGY, DIABETES & METABOLISM DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 FAMILY PRACTICE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, ADULT HEALTH DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM 66 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  39	3969	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Denied	1
SENSORI PRAMILY PRACTICE SENSORI DIABETIC SUPPLIES Approved 14  3966 FAMILY PRACTICE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 14  3967 EMERGENCY MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3961 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3961 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3960 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3960 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3960 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3960 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3960 ENDOCRINOLOGY, DIABETES & METAROLISM DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3961 ENDOCRINOLOGY, PEDIATRIC DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3962 ENDOCRINOLOGY, PEDIATRIC DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3963 ENDOCRINOLOGY, PEDIATRIC DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3964 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3965 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, ACUTE CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3967 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3966 NURSE PRACTITI	3964	UNSPECIFIED	DEXCOM G6 SENSOR	DIABETIC SUPPLIES	Approved	1
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3956 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 14 3963 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 10 3951 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 4 3965 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3966 NURSE PRACTITIONER, ACUTE CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 8 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 7 3961 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2 3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2 3966 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3964 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3965 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3966 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3967 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3968 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3951	FAMILY PRACTICE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2
3963   INTERNAL MEDICINE   DEXCOM G6 SENSOR XX MISC   DIABETIC SUPPLIES   Approved   10	3965	FAMILY PRACTICE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3951 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 4 3965 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3966 NURSE PRACTITIONER, ACUTE CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 8 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 7 3951 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2 3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3964 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3965 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3966 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3967 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3968 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3956	INTERNAL MEDICINE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	14
3965 INTERNAL MEDICINE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, ACUTE CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 8 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 7 3951 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2 3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, FEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3963	INTERNAL MEDICINE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	10
NURSE PRACTITIONER, ACUTE CARE  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3956  NURSE PRACTITIONER, ADULT HEALTH  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3956  NURSE PRACTITIONER, FAMILY HEALTH  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  8  3963  NURSE PRACTITIONER, FAMILY HEALTH  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  7  3951  NURSE PRACTITIONER, FAMILY HEALTH  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  2  3965  NURSE PRACTITIONER, FAMILY HEALTH  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3963  NURSE PRACTITIONER, PEDIATRIC CARE  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3956  NURSE PRACTITIONER, PEDIATRIC CARE  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3956  NURSE PRACTITIONER, PEDIATRIC CARE  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3951  NURSE PRACTITIONER, PEDIATRIC CARE  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1  3951  NURSE PRACTITIONER, PEDIATRIC CARE  DEXCOM G6 SENSOR XX MISC  DIABETIC SUPPLIES  Approved  1	3951	INTERNAL MEDICINE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	4
3956 NURSE PRACTITIONER, ADULT HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 8 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 7 3951 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2 3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3965	INTERNAL MEDICINE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 7 3951 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2 3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3966 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3956	NURSE PRACTITIONER, ACUTE CARE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3951 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2  3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3963 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1  3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3956	NURSE PRACTITIONER, ADULT HEALTH	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3951 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3964 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3955 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	8
3965 NURSE PRACTITIONER, FAMILY HEALTH DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3963 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	7
3963 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3951	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2
3956 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1 3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3965	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3951 NURSE PRACTITIONER, PEDIATRIC CARE DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 1	3963	NURSE PRACTITIONER, PEDIATRIC CARE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
	3956	NURSE PRACTITIONER, PEDIATRIC CARE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3951 NURSE PRACTITIONER, UNSPECIFIED DEXCOM G6 SENSOR XX MISC DIABETIC SUPPLIES Approved 2	3951	NURSE PRACTITIONER, PEDIATRIC CARE	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
	3951	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	4
3956	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	PEDIATRICS	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	7
3956	PEDIATRICS	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	5
3951	PEDIATRICS	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3969	PEDIATRICS	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	3
3969	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	4
3963	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2
3965	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3956	UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	14
3951	UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	8
3963	UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	23
3964	UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3969	UNSPECIFIED	DEXCOM G6 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3969	FAMILY PRACTICE	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3963	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Denied	1
3964	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3969	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3965	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3969	NURSE PRACTITIONER, ADULT HEALTH	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3969	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3963	UNSPECIFIED	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Denied	2
3965	UNSPECIFIED	DEXCOM G6TRANSMITTER	DIABETIC SUPPLIES	Approved	2
3962	UNSPECIFIED	DEXCOM G6TRANSMITTER	DIABETIC SUPPLIES	Denied	1
3962	UNSPECIFIED	DEXCOM G6TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3969	UNSPECIFIED	DEXCOM G6TRANSMITTER	DIABETIC SUPPLIES	Approved	3
3963	UNSPECIFIED	DEXCOM G6 TRANSMITTER	DIABETIC SUPPLIES	Approved	1
3963	UNSPECIFIED	DEXCOM G6TRANSMITTER MISC 1EA X 1 BOX	DIABETIC SUPPLIES	Approved	1
3956	FAMILY PRACTICE	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	3
3956	CLINICAL NURSE SPECIALIST, EMERGENCY	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	EMERGENCY MEDICINE, PEDIATRIC	DEXCOM G6TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	FAMILY PRACTICE	DEXCOM G6TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	6
3951	FAMILY PRACTICE	DEXCOM G6TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	3
3963	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	5
3956	INTERNAL MEDICINE	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	8
3956	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	9
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	6
3965	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3956	NURSE PRACTITIONER, PEDIATRIC CARE	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	2
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	PEDIATRICS	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	3
3951	PEDIATRICS	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	4
3956	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	3
3956	UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	10
3963	UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	9
3962	UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3951	UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Approved	1
3963	UNSPECIFIED	DEXCOM G6 TRANSMITTER XX MISC	DIABETIC SUPPLIES	Denied	1
3963	FAMILY PRACTICE	DEXCOM G7 RECEIVER	DIABETIC SUPPLIES	Denied	1
3956	FAMILY PRACTICE	DEXCOM G7 RECEIVER	DIABETIC SUPPLIES	Denied	1
3963	FAMILY PRACTICE	DEXCOM G7 RECEIVER	DIABETIC SUPPLIES	Approved	1
3964	UNSPECIFIED	DEXCOM G7 RECEIVER RECEIVER MIS	DIABETIC SUPPLIES	Approved	1
3951	FAMILY PRACTICE	DEXCOM G7 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	1
3963	FAMILY PRACTICE	DEXCOM G7 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	4
3963	INTERNAL MEDICINE	DEXCOM G7 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	5
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 RECEIVER XX DEVI	DIABETIC SUPPLIES	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 RECEIVER XX DEVI	DIABETIC SUPPLIES	Denied	1
3962	UNSPECIFIED	DEXCOM G7 RECIEVER	DIABETIC SUPPLIES	Denied	1
3963	FAMILY PRACTICE	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	2
3963	INTERNAL MEDICINE	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	1
3969	INTERNAL MEDICINE	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	1
3967	INTERNAL MEDICINE	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	1
3965	PEDIATRICS	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Approved	1
3969	PHYSICIAN ASSISTANT, UNSPECIFIED	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3965	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Denied	1
3962	UNSPECIFIED	DEXCOM G7 SENSOR	DIABETIC SUPPLIES	Approved	1
3963	FAMILY PRACTICE	DEXCOM G7 SENSOR DEVICE	DIABETIC SUPPLIES	Denied	1
3963	FAMILY PRACTICE	DEXCOM G7 SENSOR DEVICE	DIABETIC SUPPLIES	Approved	1
3963	INTERNAL MEDICINE	DEXCOM G7 SENSOR DEVICE	DIABETIC SUPPLIES	Approved	1
3964	UNSPECIFIED	DEXCOM G7 SENSOR DEVICE (BLOOD-GLUCOSE SENSOR)	DIABETIC SUPPLIES	Approved	1
3965	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G7 SENSOR SENSOR MIS	DIABETIC SUPPLIES	Approved	1
3962	UNSPECIFIED	DEXCOM G7 SENSOR SENSOR MIS	DIABETIC SUPPLIES	Approved	1
3969	UNSPECIFIED	DEXCOM G7 SENSOR SENSOR MIS	DIABETIC SUPPLIES	Approved	1
3963	FAMILY PRACTICE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	7
3956	FAMILY PRACTICE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3951	FAMILY PRACTICE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3969	FAMILY PRACTICE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	FAMILY PRACTICE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3963	INTERNAL MEDICINE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	11
3956	INTERNAL MEDICINE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3964	INTERNAL MEDICINE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3967	INTERNAL MEDICINE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3951	INTERNAL MEDICINE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2
3962	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	5
3964	NURSE PRACTITIONER, FAMILY HEALTH	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3963	NURSE PRACTITIONER, PEDIATRIC CARE	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	2
3962	NURSE PRACTITIONER, UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3969	PEDIATRICS	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3956	PHYSICIAN, ENDOCRINOLOGY	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	14
3951	UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3969	UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3963	UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Denied	1
3965	UNSPECIFIED	DEXCOM G7 SENSOR XX MISC	DIABETIC SUPPLIES	Approved	1
3956	UNSPECIFIED	DEXMETHYLPHENIDATE 10MG TAB	CNS STIMULANTS	Denied	1
3963	UNSPECIFIED	DEXMETHYLPHENIDATE 10MG TAB	CNS STIMULANTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	DEXMETHYLPHENIDATE 10MG TABLETS	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	DEXMETHYLPHENIDATE 10MG TABLETS	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	DEXMETHYLPHENIDATE 10MG TABLETS	CNS STIMULANTS	Denied	1
3963	UNSPECIFIED	DEXMETHYLPHENIDATE 10MG TABLETS	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	DEXMETHYLPHENIDATE HCL 10MG OR TABS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	DEXMETHYLPHENIDATE HCL 10MG OR TABS	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	DEXMETHYLPHENIDATE HCL 10MG OR TABS	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY, CHILD & ADOLESCENT	DEXMETHYLPHENIDATE XR 30MG	CNS STIMULANTS	Denied	1
3965	UNSPECIFIED	DEXTROAMPHETAMINE 10 MG TABLETS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	DEXTROAMPHETAMINE 10MG TABLET	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	DEXTROAMPHETAMINE 10MG TABLET	CNS STIMULANTS	Denied	1
3956	PSYCHIATRY	DEXTROAMPHETAMINE 20MG TAB	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	DEXTROAMPHETAMINE SULFATE 10MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	DEXTROAMPHETAMINE SULFATE 10MG OR TABS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	DEXTROAMPHETAMINE SULFATE 20MG OR TABS	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	DIAZEPAM 5MG TAB	BENZODIAZEPINE	Approved	1
3956	ANESTHESIOLOGY	DICLOFENAC SODIUM 1% EX GEL	NON-NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	DICLOFENAC SODIUM 1% EX GEL	NON-NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	DICLOFENAC SODIUM 1% TOPICAL GEL	NON-NARCOTIC ANALGESICS	Denied	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY	DICLOFENAC SODIUM 1% TOPICAL GEL	NON-NARCOTIC ANALGESICS	Denied	1
3956	GASTROENTEROLOGY	DIFICID (FIDAXOMICIN)	ANTI-INFECTIVES	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DIFICID (FIDAXOMICIN)	ANTI-INFECTIVES	Approved	1
3962	UNSPECIFIED	DIFICID (FIDAXOMICIN)	ANTI-INFECTIVES	Approved	1
3965	UNSPECIFIED	DIFICID (FIDAXOMICIN)	ANTI-INFECTIVES	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DIFICID 200MG OR TABS	ANTI-INFECTIVES	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	DIFICID 200MG OR TABS	ANTI-INFECTIVES	Approved	1
3963	UNSPECIFIED	DIFICID 200MG OR TABS	ANTI-INFECTIVES	Approved	3
3951	UNSPECIFIED	DIFICID 200MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	UNSPECIFIED	DIFICID 200MG OR TABS	ANTI-INFECTIVES	Approved	1
3951	NEUROLOGY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	2
3965	NEUROLOGY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	UNSPECIFIED	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Denied	1
3956	CARDIOLOGY	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	3
3956	CARDIOLOGY, INTERVENTIONAL	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3963	PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3956	UNSPECIFIED	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	2
3963	UNSPECIFIED	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	DOPTELET	HEMATOPOIETIC AGENT	Approved	1
3956	UNSPECIFIED	DOPTELET	HEMATOPOIETIC AGENT	Approved	1
3963	UNSPECIFIED	DOPTELET	HEMATOPOIETIC AGENT	Approved	1
3963	FAMILY PRACTICE	DOXEPIN 100MG	ANTIDEPRESSANTS	Denied	1
3963	FAMILY PRACTICE	DRONABINOL 10MG OR CAPS	ANTINAUSEANTS	Denied	1
3956	NEUROLOGY	DRONABINOL 2.5MG CAPSULE	ANTINAUSEANTS	Denied	1
3963	UNSPECIFIED	DRONABINOL 2.5MG CAPSULE	ANTINAUSEANTS	Denied	1
3951	FAMILY PRACTICE	DRONABINOL 5MG CAPSULE	ANTINAUSEANTS	Denied	1
3963	INTERNAL MEDICINE	DRONABINOL 5MG OR CAPS	ANTINAUSEANTS	Approved	1
3964	FAMILY PRACTICE	DRONABINOL CAPSULES	ANTINAUSEANTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DRONABINOL CAPSULES	ANTINAUSEANTS	Denied	1
3965	PHYSICIAN, SURGERY, GENERAL	DRONABINOL CAPSULES	ANTINAUSEANTS	Denied	1
3964	UNSPECIFIED	DRONABINOL CAPSULES	ANTINAUSEANTS	Denied	1
3963	UNSPECIFIED	DRONABINOL CAPSULES	ANTINAUSEANTS	Denied	1
3963	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	12
3956	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	12
3961	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	9
3951	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	6
3951	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3965	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3962	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	13
3964	EMERGENCY MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3963	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	4
3956	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	4
3956	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3951	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3961	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3964	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3951	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3965	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3964	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	GASTROENTEROLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	GASTROENTEROLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3962	GASTROENTEROLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	4
3963	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3956	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3969	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3956	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3951	NURSE PRACTITIONER, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	6
3956	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	6
3962	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	3
3961	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3951	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3956	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3963	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3962	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	5
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	15
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	11
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	11
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	3
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3967	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3969	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3961	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3951	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	18
3951	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3956	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	13
3965	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	4
3967	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3962	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	4
3969	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3956	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	9
3963	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	10
3969	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3964	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	4
3967	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3951	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3956	UNSPECIFIED	DUPIXENT 300MG/2ML SC SOPN	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	ELETRIPTAN	NON-NARCOTIC ANALGESICS	Denied	1
3963	UNSPECIFIED	ELETRIPTAN	NON-NARCOTIC ANALGESICS	Denied	1
3956	UROLOGY	ELIGARD	ANTINEOPLASTICS	Approved	1
3963	UROLOGY	ELIGARD	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	ELIGARD	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	EMGALITY 100MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3956	UNSPECIFIED	EMGALITY 120MG/ML	ANTIMIGRAINE	Denied	1
3963	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Denied	3
3963	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	6
3951	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	2
3969	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3964	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Denied	1
3962	FAMILY PRACTICE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3964	INTERNAL MEDICINE	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Denied	2
3967	NEUROLOGY	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	5
3965	NEUROLOGY	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3951	NEUROLOGY	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	2
3969	NEUROLOGY	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	3
3965	NURSE PRACTITIONER, FAMILY HEALTH	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	2
3962	NURSE PRACTITIONER, UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	9
3964	UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Denied	3
3969	UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3962	UNSPECIFIED	EMGALITY 120MG/ML PEN AUTO-INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	ALLERGY	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3956	FAMILY PRACTICE	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	13
3956	CARDIOLOGY	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	4
3951	FAMILY PRACTICE	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3956	INTERNAL MEDICINE	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	INTERNAL MEDICINE	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	1
3956	NEUROLOGY	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	1
3956	NEUROLOGY	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	8
3951	NEUROLOGY	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	7
3951	NURSE PRACTITIONER, FAMILY HEALTH	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	1
3956	NURSE PRACTITIONER, GERONTOLOGY	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	2
3956	UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	15
3963	UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	5
3956	UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	3
3951	UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	2
3961	UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3961	UNSPECIFIED	EMGALITY 120MG/ML PF PEN (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	1
3964	FAMILY PRACTICE	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3964	INTERNAL MEDICINE	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	INTERNAL MEDICINE	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	EMGALITY 120MG/ML PREF SYR INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	EMGALITY 120MG/ML PREF SYR INJ (GALCANE- ZUMAB-GNLM)	ANTIMIGRAINE	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3962	UNSPECIFIED	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3951	UNSPECIFIED	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3964	UNSPECIFIED	EMGALITY 120MG/ML PREF SYR INJ (GALCANE-ZUMAB-GNLM)	ANTIMIGRAINE	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3963	FAMILY PRACTICE	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	3
3963	INTERNAL MEDICINE	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3956	INTERNAL MEDICINE	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3964	NEUROLOGY	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3956	UNSPECIFIED	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	3
3963	UNSPECIFIED	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3951	UNSPECIFIED	EMGALITY 120MG/ML SC SOAJ	ANTIMIGRAINE	Approved	1
3956	FAMILY PRACTICE	EMGALITY 120MG/ML SC SOSY	ANTIMIGRAINE	Approved	1
3956	NEUROLOGY	EMGALITY 120MG/ML SC SOSY	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, GERONTOLOGY	EMGALITY 120MG/ML SC SOSY	ANTIMIGRAINE	Approved	1
3956	UNSPECIFIED	EMGALITY 120MG/ML SC SOSY	ANTIMIGRAINE	Approved	1
3951	FAMILY PRACTICE	EMGALITY INJ 100MG/ML PFS (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3963	INTERNAL MEDICINE	EMGALITY INJ 100MG/ML PFS (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3956	NEUROLOGY	EMGALITY INJ 100MG/ML PFS (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Approved	1
3956	UNSPECIFIED	EMGALITY INJ 100MG/ML PFS (GALCANEZUM-AB-GNLM)	ANTIMIGRAINE	Denied	2
3951	FAMILY PRACTICE	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	1
3956	FAMILY PRACTICE	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	2
3956	FAMILY PRACTICE	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Denied	2
3963	FAMILY PRACTICE	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Denied	1
3956	INTERNAL MEDICINE	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Denied	1
3963	NEUROLOGY	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	1
3956	NEUROLOGY	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Denied	1
3951	NEUROLOGY	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	5
3951	UNSPECIFIED	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	2
3963	UNSPECIFIED	EMGALITY INJ 120MG/ML PFS (GALCANEZ-GNLM)	ANTIMIGRAINE	Approved	1
3956	FAMILY PRACTICE	EMPAGLIFLOZIN 10 MG TABLET (JARDIANCE)	ANTIDIABETICS	Approved	1
3963	FAMILY PRACTICE	EMPAGLIFLOZIN 12.5 MG-METFORMIN ER 1,000 MG TABLET,EXTENDED REL 24 HR	ANTIDIABETICS	Approved	1
3956	PSYCHIATRY	EMSAM 9MG/24HRTD PT24	ANTIDEPRESSANTS	Approved	1
3963	RHEUMATOLOGY	ENBREL 25MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	INTERNAL MEDICINE	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	PEDIATRICS	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PEDIATRICS	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	15
3956	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	25
3956	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3951	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
3963	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3965	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	9
3956	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	10
3961	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3964	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3961	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	ENTECAVIR	ANTIVIRALS	Approved	1
3956	INTERNAL MEDICINE	ENTECAVIR	ANTIVIRALS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	ENTECAVIR	ANTIVIRALS	Approved	1
3956	UNSPECIFIED	ENTECAVIR	ANTIVIRALS	Approved	1
3956	FAMILY PRACTICE	ENTECAVIR 0.5MG OR TABS	ANTIVIRALS	Approved	1
3963	NEUROLOGY, PEDIATRIC	EPIDIOLEX	ANTICONVULSANTS	Approved	2
3963	NEUROLOGY, PEDIATRIC	EPIDIOLEX	ANTICONVULSANTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PEDIATRICS	EPIDIOLEX	ANTICONVULSANTS	Denied	2
3963	UNSPECIFIED	EPIDIOLEX	ANTICONVULSANTS	Approved	1
3963	DERMATOLOGY	EPIDUO FORTE 0.3%-2.5% PUMP	DERMATOLOGICAL AGENTS	Denied	1
3963	PEDIATRICS	EPINEPHRINE 0.15MG INJECTION (1:2000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	ALLERGY & IMMUNOLOGY	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	FAMILY PRACTICE	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3963	FAMILY PRACTICE	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	2
3956	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	UNSPECIFIED	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	2
3961	UNSPECIFIED	EPINEPHRINE 0.3MG INJECTION (1:1000)	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	ALLERGY & IMMUNOLOGY	EPINEPHRINE 0.3MG/0.3ML IJ SOAJ	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	OTOLARYNGOLOGY	EPIPEN 2-PAK 0.3MG/0.3ML IJ SOAJ	ALPHA/BETA ADRENERGIC AGONIST	Denied	1
3956	UNSPECIFIED	EQ LIDOCAINE 4% PAIN RELIEVING PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	DERMATOLOGY	ERIVEDGE	ANTINEOPLASTICS	Approved	2
3956	UROLOGY	ERLEADA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	ERLEADA	ANTINEOPLASTICS	Approved	1
3965	UNSPECIFIED	ERLEADA	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	ERLOTINIB	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	ERLOTINIB	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	ESTRADIOL 0.075MG/24HRTD PTTW	ESTROGENS	Approved	1
3963	FAMILY PRACTICE	ESTRADIOL TAB 1MG	ESTROGENS	Approved	1
3963	INTERNAL MEDICINE	ESZOPICLONE 3MG OR TABS	HYPNOTIC	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	ESZOPICLONE 3MG OR TABS	HYPNOTIC	Approved	1
3963	DERMATOLOGY	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Denied	2
3963	DERMATOLOGY	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3964	DERMATOLOGY	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	ALLERGY & IMMUNOLOGY	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3951	DERMATOLOGY	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3965	INTERNAL MEDICINE	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Denied	1
3951	INTERNAL MEDICINE	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3962	INTERNAL MEDICINE	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	PEDIATRICS	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	PEDIATRICS	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3964	PEDIATRICS	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	3
3962	UNSPECIFIED	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Denied	2
3964	UNSPECIFIED	EUCRISA (CRISABOROLE)	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	EUCRISA 2% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	EUCRISA 2% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3969	INTERNAL MEDICINE	EUCRISA 2% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3951	PEDIATRICS	EUCRISA 2% EX OINT	DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	EVEROLIMUS 10 MG	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	EVEROLIMUS 10 MG	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	EVEROLIMUS 5 MG	ANTINEOPLASTICS	Approved	1
3956	LEGAL MEDICINE	EVEROLIMUS 5 MG	ANTINEOPLASTICS	Approved	1
3964	HEMATOLOGY & ONCOLOGY	EVEROLIMUS 7.5 MG	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	FAMOTIDINE 40MG TAB	GASTROINTESTINAL AGENTS	Approved	1
3963	FAMILY PRACTICE	FARXIGA 5MG OR TABS	DIABETIC AGENT	Approved	1
3963	ALLERGY & IMMUNOLOGY	FASENRA	RESPIRATORY AGENTS	Denied	1
3956	INTERNAL MEDICINE	FASENRA	RESPIRATORY AGENTS	Approved	2
3951	NEUROLOGY	FASENRA	RESPIRATORY AGENTS	Approved	1
3963	PULMONARY DISEASES	FASENRA	RESPIRATORY AGENTS	Denied	2
3963	PULMONARY DISEASES	FASENRA	RESPIRATORY AGENTS	Approved	2
3956	PULMONARY DISEASES	FASENRA	RESPIRATORY AGENTS	Denied	2
3963	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Approved	2
3956	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Approved	1
3956	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Denied	2
3956	FAMILY PRACTICE	FEBUXOSTAT	ANTIGOUT	Approved	1
3956	FAMILY PRACTICE	FEBUXOSTAT	ANTIGOUT	Denied	2
3951	FAMILY PRACTICE	FEBUXOSTAT	ANTIGOUT	Approved	1
3956	PEDIATRICS	FEBUXOSTAT	ANTIGOUT	Approved	1
3956	PODIATRIST, UNSPECIFIED	FEBUXOSTAT	ANTIGOUT	Approved	1
3956	FAMILY PRACTICE	FEBUXOSTAT 40MG OR TABS	ANTIGOUT	Approved	2
3963	FAMILY PRACTICE	FEBUXOSTAT 40MG OR TABS	ANTIGOUT	Approved	1
3961	NURSE PRACTITIONER, FAMILY HEALTH	FEBUXOSTAT 40MG OR TABS	ANTIGOUT	Approved	1
3961	UROLOGY	FEBUXOSTAT 40MG OR TABS	ANTIGOUT	Approved	1
3956	FAMILY PRACTICE	FEBUXOSTAT 80MG OR TABS	ANTIGOUT	Approved	2

PREJUDENT BONG OR TREAS   NUTSER NAME   PREJUDENT BONG OR TRES  ANTIGOUT   Approved   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
Second   RELIMATOLOGY	3956	INTERNAL MEDICINE	FEBUXOSTAT 80MG OR TABS	ANTIGOUT	Approved	1
PARTICULAR   PRINCIPLE	3956	NURSE PRACTITIONER, FAMILY HEALTH	FEBUXOSTAT 80MG OR TABS	ANTIGOUT	Approved	1
See   INTERNAL MEDICINE	3956	RHEUMATOLOGY	FEBUXOSTAT 80MG OR TABS	ANTIGOUT	Approved	1
PALLIATIVE MEDICINE	3963	FAMILY PRACTICE	FENTANYL 100MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
Second   UNSPECIFIED	3956	INTERNAL MEDICINE	FENTANYL 100MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
AMESTHESIOLOGY	3963	PALLIATIVE MEDICINE	FENTANYL 100MCG/HRTRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
HEMATOLOGY & ONCOLOGY	3956	UNSPECIFIED	FENTANYL 100MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	2
S963   UNSPECIFIED	3961	ANESTHESIOLOGY	FENTANYL 12MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
AMESTHESIOLOGY	3963	HEMATOLOGY & ONCOLOGY	FENTANYL 12MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
APESTHESIOLOGY	3963	UNSPECIFIED	FENTANYL 12MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
Pamily Practice	3963	ANESTHESIOLOGY	FENTANYL 12MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
HEMATOLOGY & ONCOLOGY FENTANYL 25MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 HEMATOLOGY & ONCOLOGY FENTANYL 25MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 INTERNAL MEDICINE FENTANYL 25MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  39583 UNSPECIFIED FENTANYL 25MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Denied 1  3954 ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Denied 1  3951 INTERNAL MEDICINE FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 UNSPECIFIED FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 JENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 UNSPECIFIED FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 JENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 FAMILY PRACTICE FENTANYL 25MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3956 FAMILY PRACTICE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3956 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PAULIATIVE MEDICIN	3963	ANESTHESIOLOGY	FENTANYL 25MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
1   1995   HEMATOLOGY & ONCOLOGY   FENTANYL 25MCG/HR TD PT72   NARCOTIC ANALGESICS   Approved   1   1   1   1   1   1   1   1   1	3963	FAMILY PRACTICE	FENTANYL 25MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
INTERNAL MEDICINE   FENTANYL 25MCG/HRTD PT72   NARCOTIC ANALGESICS   Approved   1	3956	HEMATOLOGY & ONCOLOGY	FENTANYL 25MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
UNSPECIFIED FENTANYL 28MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1  3966 ANESTHESIOLOGY FENTANYL 28MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Denied 1  3964 ANESTHESIOLOGY FENTANYL 28MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3961 INTERNAL MEDICINE FENTANYL 28MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED FENTANYL 28MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3960 ANESTHESIOLOGY FENTANYL 28MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 ANESTHESIOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 FAMILY PRACTICE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3951 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3966 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3968 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3969 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3960 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3960 PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY  FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE PENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE PENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1  3968 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1  3968 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3951	HEMATOLOGY & ONCOLOGY	FENTANYL 25MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Denied 1  3964 ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3951 INTERNAL MEDICINE FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC CANALGESICS Approved 1  3966 UNSPECIFIED FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC CANALGESICS Approved 1  3965 ANESTHESIOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3964 FAMILY PRACTICE FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 2  3951 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3966 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3966 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 2  3966 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3963 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICIAL MEDICINE FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN PHYSICIAL MEDICINE FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT22 NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3	3956	INTERNAL MEDICINE	FENTANYL 25MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
Approved 1  3964 ANESTHESIOLOGY FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3951 INTERNAL MEDICINE FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 UNSPECIFIED FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3965 ANESTHESIOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3964 FAMILY PRACTICE FENTANYL 375MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3955 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3966 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3968 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3969 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3969 PHYSICIAN, PHYSICAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3960 PHYSICIAN, PHYSICAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTOEPRESSANTS Denied 1  3967 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTOEPRESSANTS Denied 1  3968 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1  3968 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3963	UNSPECIFIED	FENTANYL 25MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
19951 INTERNAL MEDICINE FENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 19963 UNSPECIFIED FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 19963 HEMATOLOGY & ONCOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 19963 HEMATOLOGY & ONCOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 19966 FAMILY PRACTICE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2 19951 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19966 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19963 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19963 PHYSICIAN, PHYSICAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19963 PHYSICIAN, PHYSICAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19964 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19965 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 19966 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TION / P	3956	ANESTHESIOLOGY	FENTANYL 25MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Denied	1
PENTANYL 25MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 ANESTHESIOLOGY FENTANYL 37.5MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY FENTANYL 37.5MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 FAMILY PRACTICE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3951 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3963 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TION / PHYSICATRY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3966 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3968 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1  3969 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3964	ANESTHESIOLOGY	FENTANYL 25MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
APPROVED 1  3965 ANESTHESIOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY FENTANYL 375MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 FAMILY PRACTICE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3951 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2  3956 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3963 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3956 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 PSYCHIATRY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 PSYCHIATRY FENTANYL 75MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1  3963 UNSPECIFIED FINACEA (58 EX FOAM DERMATOLOGICAL AGENTS Denied 1  3963 UNSPECIFIED FINACEA (58 EX FOAM DERMATOLOGICAL AGENTS Denied 1	3951	INTERNAL MEDICINE	FENTANYL 25MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
B963   HEMATOLOGY & ONCOLOGY   FENTANYL 375MCG/HRTRANSDERMAL PATCH   NARCOTIC ANALGESICS   Approved   1	3956	UNSPECIFIED	FENTANYL 25MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
FAMILY PRACTICE  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  2  3951  HEMATOLOGY & ONCOLOGY  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  1  3956  HEMATOLOGY & ONCOLOGY  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  2  3956  INTERNAL MEDICINE  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  1  3963  PALLIATIVE MEDICINE  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  1  3963  PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  1  3961  ANESTHESIOLOGY  FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS  Approved  1  3966  INTERNAL MEDICINE  FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS  Approved  1  3966  PSYCHIATRY  FETZIMA (LEVOMILNACIPRAN)  ANTIDEPRESSANTS  Denied  1  3963  PHYSICIAN ASSISTANT, UNSPECIFIED  FINACEA (AZELAIC ACID)  DERMATOLOGICAL AGENTS  Approved  1  3963  UNSPECIFIED  FINACEA 15% EX FOAM  DERMATOLOGICAL AGENTS  Denied  1  3964  1  3965  Denied  1  3965  DENIACEA 15% EX FOAM  DERMATOLOGICAL AGENTS  Denied  1	3965	ANESTHESIOLOGY	FENTANYL 37.5MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
3951 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 3956 HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 2 3956 INTERNAL MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 3963 PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1 3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3963	HEMATOLOGY & ONCOLOGY	FENTANYL 37.5MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
HEMATOLOGY & ONCOLOGY FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3963 PALLIATIVE MEDICINE FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICIAL MEDICINE & REHABILITA- TION / PHYSIATRY FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3961 ANESTHESIOLOGY FENTANYL 50MCG/HRTRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE FENTANYL 50MCG/HRTRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1 1	3956	FAMILY PRACTICE	FENTANYL 50MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	2
3956 INTERNAL MEDICINE FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3963 PALLIATIVE MEDICINE FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATRY FENTANYL 50MCG/HRTD PT72 NARCOTIC ANALGESICS Approved 1 3961 ANESTHESIOLOGY FENTANYL 50MCG/HRTRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE FENTANYL 75MCG/HRTRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3951	HEMATOLOGY & ONCOLOGY	FENTANYL 50MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
PALLIATIVE MEDICINE FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATRY FENTANYL 50MCG/HR TD PT72 NARCOTIC ANALGESICS Approved 1  3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 INTERNAL MEDICINE FENTANYL 75MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1  3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1  3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Approved 1  3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3956	HEMATOLOGY & ONCOLOGY	FENTANYL 50MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	2
PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY  FENTANYL 50MCG/HR TD PT72  NARCOTIC ANALGESICS  Approved  Approved  Approved  NARCOTIC ANALGESICS  Approved  NARCOTIC ANALGES	3956	INTERNAL MEDICINE	FENTANYL 50MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
TION / PHYSIATRY  3963 TION / PHYSIATRY  FENTANYL 50MCG/HR TD P172 NARCOTIC ANALGESICS Approved 1 3961 ANESTHESIOLOGY FENTANYL 50MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE FENTANYL 75MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1 3963 Denied 1	3963	PALLIATIVE MEDICINE	FENTANYL 50MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
3956 INTERNAL MEDICINE FENTANYL 75MCG/HR TRANSDERMAL PATCH NARCOTIC ANALGESICS Approved 1 3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3963	, , , , , , , , , , , , , , , , , , , ,	FENTANYL 50MCG/HRTD PT72	NARCOTIC ANALGESICS	Approved	1
3956 PSYCHIATRY FETZIMA (LEVOMILNACIPRAN) ANTIDEPRESSANTS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3961	ANESTHESIOLOGY	FENTANYL 50MCG/HR TRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
3963 PHYSICIAN ASSISTANT, UNSPECIFIED FINACEA (AZELAIC ACID) DERMATOLOGICAL AGENTS Denied 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3956	INTERNAL MEDICINE	FENTANYL 75MCG/HRTRANSDERMAL PATCH	NARCOTIC ANALGESICS	Approved	1
3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3956	PSYCHIATRY	FETZIMA (LEVOMILNACIPRAN)	ANTIDEPRESSANTS	Denied	1
3963 UNSPECIFIED FINACEA 15% EX FOAM DERMATOLOGICAL AGENTS Denied 1	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	FINACEA (AZELAIC ACID)	DERMATOLOGICAL AGENTS	Denied	1
	3963	UNSPECIFIED	FINACEA 15% EX FOAM	DERMATOLOGICAL AGENTS	Approved	1
3956 UNSPECIFIED FINGOLIMOD MULTIPLE SCLEROSIS AGENT Approved 1	3963	UNSPECIFIED	FINACEA 15% EX FOAM	DERMATOLOGICAL AGENTS	Denied	1
	3956	UNSPECIFIED	FINGOLIMOD	MULTIPLE SCLEROSIS AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	FINGOLIMOD	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	UNSPECIFIED	FLOVENT HFA (FLUTICASONE PROPIONATE)	ASTHMA	Denied	2
3963	UNSPECIFIED	FLUOCINOLONE 0.01% BODY OIL	TOPICAL CORTICOSTEROID	Approved	1
3963	UNSPECIFIED	FLUTICASONE PROPIONATE HFA	ASTHMA	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	FORTEO	OSTEOPOROSIS AGENTS	Approved	1
3963	UNSPECIFIED	FORTEO	OSTEOPOROSIS AGENTS	Approved	2
3956	INTERNAL MEDICINE	FREESTYLE 14 SEN LIBRE 2	DIABETIC MEDICAL SUPPLIES	Denied	1
3956	HEMATOLOGY & ONCOLOGY	FULVESTRANT	ANTINEOPLASTICS	Approved	1
3956	FAMILY PRACTICE	GABAPENTIN 100MG CAPSULES	ANTICONVULSANTS	Approved	4
3951	HEMATOLOGY & ONCOLOGY	GABAPENTIN 100MG CAPSULES	ANTICONVULSANTS	Approved	1
3956	UNSPECIFIED	GABAPENTIN 100MG CAPSULES	ANTICONVULSANTS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	GABAPENTIN 300MG CAPSULES	ANTICONVULSANTS	Approved	1
3956	UNSPECIFIED	GABAPENTIN 300MG CAPSULES	ANTICONVULSANTS	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	1
3956	FAMILY PRACTICE	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	2
3956	INTERNAL MEDICINE	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	1
3951	UNSPECIFIED	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	2
3956	UNSPECIFIED	GABAPENTIN 300MG OR CAPS	ANTICONVULSANTS	Approved	3
3963	UNSPECIFIED	GABAPENTIN 400MG CAPSULES	ANTICONVULSANTS	Approved	1
3956	INTERNAL MEDICINE	GABAPENTIN 400MG OR CAPS	ANTICONVULSANTS	Approved	1
3956	UNSPECIFIED	GABAPENTIN 800MG TABLETS	ANTICONVULSANTS	Denied	2
3963	FAMILY PRACTICE	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Approved	2
3969	FAMILY PRACTICE	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	1
3963	OBSTETRICS & GYNECOLOGY	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	2
3962	OBSTETRICS & GYNECOLOGY	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Approved	1
3951	OBSTETRICS & GYNECOLOGY	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Approved	1
3951	UROLOGY	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	1
3965	UROLOGY	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Approved	1
3962	UROLOGY	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	1
3965	UNSPECIFIED	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Approved	1
3963	UNSPECIFIED	GEMTESA (VIBEGRON)	OVERACTIVE BLADDER	Denied	4

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	GEMTESA 75MG OR TABS	OVERACTIVE BLADDER	Approved	1
3963	INTERNAL MEDICINE	GEMTESA 75MG OR TABS	OVERACTIVE BLADDER	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	GEMTESA 75MG ORTABS	OVERACTIVE BLADDER	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	GEMTESA 75MG ORTABS	OVERACTIVE BLADDER	Approved	2
3963	OBSTETRICS & GYNECOLOGY	GEMTESA 75MG ORTABS	OVERACTIVE BLADDER	Approved	1
3963	UNSPECIFIED	GEMTESA 75MG ORTABS	OVERACTIVE BLADDER	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	GENOTROPIN	HORMONES	Denied	1
3963	ENDOCRINOLOGY, PEDIATRIC	GENOTROPIN	HORMONES	Approved	1
3963	ENDOCRINOLOGY, PEDIATRIC	GENOTROPIN	HORMONES	Denied	2
3963	PEDIATRICS	GENOTROPIN	HORMONES	Approved	1
3963	UNSPECIFIED	GENOTROPIN	HORMONES	Approved	1
3963	UNSPECIFIED	GENOTROPIN	HORMONES	Denied	1
3962	NEUROLOGY	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NEUROLOGY	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	UNSPECIFIED	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	UNSPECIFIED	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	UNSPECIFIED	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	GLATOPA	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	GLATOPA	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	HEMATOLOGY & ONCOLOGY	GLEEVEC	ANTINEOPLASTICS	Approved	1
3963	RADIATION ONCOLOGY	GLYDO GEL 2% (LIDOCAINE 2% GEL)	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	GLYXAMBI (EMPAGLIFLOZIN-LINAGLIPTIN)	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	GLYXAMBI (EMPAGLIFLOZIN-LINAGLIPTIN)	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	GLYXAMBI 10-5MG OR TABS	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	GLYXAMBI 10-5MG OR TABS	DIABETIC AGENT	Denied	1
3956	FAMILY PRACTICE	GLYXAMBI 25-5MG OR TABS	DIABETIC AGENT	Approved	5
3961	INTERNAL MEDICINE	GLYXAMBI 25-5MG OR TABS	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	GLYXAMBI 25-5MG OR TABS	DIABETIC AGENT	Approved	1
3956	PEDIATRICS	HEMLIBRA	HEMOPHILIA AGENT	Approved	1
3963	ALLERGY & IMMUNOLOGY	HIZENTRA	BIOLOGICALS	Approved	1
3963	UNSPECIFIED	HIZENTRA	BIOLOGICALS	Approved	1
3963	UNSPECIFIED	HIZENTRA	BIOLOGICALS	Denied	1
3969	INTERNAL MEDICINE	HORIZANT (GABAPENTIN ENACARBIL ERTABLETS)	ANTISEIZURE	Denied	2
3951	UNSPECIFIED	HORIZANT 300MG OR TBCR	ANTISEIZURE	Approved	1
3963	UNSPECIFIED	HUMIRA	ANTIARTHRITICS	Denied	1
3951	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3961	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	5
3951	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	10
3963	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	8
3956	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3965	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NEPHROLOGY / RENAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3969	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	OBSTETRICS & GYNECOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	20
3956	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	23

SHELLMATCLOCY	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3966   RHEUMATOLOGY	3964	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
See   PHILIMATOLOGY	3951	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	6
S061   RHEUMATOLOGY	3965	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
PRIEUMATOLOGY	3956	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
RHEUMATOLOGY	3961	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
UNSPECIFIED	3963	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	7
1993   UNSPECIFIED	3969	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
Second	3956	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	16
Section	3963	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	31
1	3956	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	5
1986   UNSPECIFIED	3951	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 11  3961 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 5  3964 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3965 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3  3969 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3969 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3969 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 RIFLUMATOLOGY HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3  3961 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3  3961 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3966 NIASSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3966 NIASSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NIASSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3967 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3968 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIV	3961	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951   UNSPECIFIED	3965	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3 3090 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 30909 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 30909 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30906 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 30906 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3 30906 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 30906 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 NURSE PRACTITIONER, FAMILY HEALTH HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 OBSTETRICS & CYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 OBSTETRICS & CYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 OPHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 30908 UNSPECIFIED HUMIR	3963	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	11
UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3 3669 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3969 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 RHEUMATOLOGY HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3 3961 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3966 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3969 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3961 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 4 4040 MUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS APPROVED 1 4 4050 MUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS APPROVED 1 4 4050 MUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS APPROVED 1 4 4050 MUMIRA 80 MG IMMUNOSUPPRESSIVES/DM	3951	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	5
UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3969 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 RIHEUMATOLOGY HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3966 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3  3961 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3960 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3960 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3965 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3967 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3968 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3961 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  4  4  4  4  4  4  4  4  4  4  4  4  4	3964	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 UNSPECIFIED HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 RHEUMATOLOGY HUMIRA 40 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3956 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3956 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3  3951 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3956 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3967 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3968 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3969 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3961 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3962 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FEL HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1	3965	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
UNSPECIFIED HUMIRA 40MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 RHEUMATOLOGY HUMIRA 40MG/0.4ML SC PSKT IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3956 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 3  3951 DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3956 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NURSE PRACTITIONER, FAMILY HEALTH HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3967 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3968 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1	3969	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
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Derivation   Der	3956	RHEUMATOLOGY	HUMIRA 40MG/0.4ML SC PSKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
DERMATOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3956 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3961 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3961 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELL LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3956	DERMATOLOGY	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3966 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3964 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3965 DENIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS DENIED 1 3966 DENIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS DENIED 1 3967 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS DENIED 1 3968 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3969 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3 3969 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3956	DERMATOLOGY	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
NURSE PRACTITIONER, ACUTE CARE HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 NURSE PRACTITIONER, FAMILY HEALTH HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 UNSPECIFIED HYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 UNSPECIFIED HYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3965 IMMUNOSUPPRESSIVES/DMARDS Approved 3	3951	DERMATOLOGY	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
NURSE PRACTITIONER, FAMILY HEALTH  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  3956  OBSTETRICS & GYNECOLOGY  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  3963  PHYSICIAN ASSISTANT, UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Denied  1  3963  PHYSICIAN ASSISTANT, UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  2  3965  PHYSICIAN ASSISTANT, UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  3956  PHYSICIAN ASSISTANT, UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  3951  PHYSICIAN ASSISTANT, UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Denied  1  3964  UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FEL- LOW, UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  3963  UNSPECIFIED  HUMIRA 80 MG  IMMUNOSUPPRESSIVES/DMARDS  Approved  1  IMMUNOSUPPRESSIVES/DMARDS  Approved  3	3956	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956 OBSTETRICS & GYNECOLOGY HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELL HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3963	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3963	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FEL-LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3956	OBSTETRICS & GYNECOLOGY	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELL LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FEL-LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951 PHYSICIAN ASSISTANT, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FEL-LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3965	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964 UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FEL- LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963 LOW, UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DIVIARDS Approved 1  3963 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 3	3951	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
	3964		HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956 UNSPECIFIED HUMIRA 80 MG IMMUNOSUPPRESSIVES/DMARDS Approved 1	3963	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
	3956	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3956	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3964	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY, PEDIATRIC	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3962	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	HUMIRA PED. UC STARTER PACK + 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA PEN 40MG/0.4ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3961	DERMATOLOGY	HUMIRA PEN-PS/UV/ADOL HS START 40MG/0.8ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	DERMATOLOGY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	INTERNAL MEDICINE	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	RHEUMATOLOGY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	HEMATOLOGY & ONCOLOGY	HYDROCOD POLI-CHLORPHE POLI ER 10-8MG/5ML OR SUER	COUGH SUPPRESSANT	Approved	2
3962	UNSPECIFIED	HYDROCOD POLI-CHLORPHE POLI ER 10-8MG/5ML OR SUER	COUGH SUPPRESSANT	Approved	1
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	3
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Denied	1
3956	EMERGENCY MEDICINE	HYDROCODONE-ACETAMINOPHEN 5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN 5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3961	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3965	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	12
3956	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	4
3951	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	4
3951	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Denied	1
3951	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	10
3951	EMERGENCY MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	5
3965	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3961	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2
3963	NEUROLOGICAL SURGERY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	3
3963	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	PAIN MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN, SPORTS MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	PHYSICIAN, SURGERY, GENERAL	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	PODIATRIST, GENERAL PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	RHEUMATOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	15
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Denied	1
3961	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	3
3951	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	4
3962	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3965	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Denied	1
3965	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	6
3956	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	6
3963	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2
3951	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	3
3956	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	12
3963	DENTIST, SURGERY, ORAL & MAXILLOFACIAL	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Denied	1
3951	EMERGENCY MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	EMERGENCY MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2
3965	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Denied	1
3951	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	5
3956	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2
3963	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2
3964	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	4
3969	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2
3956	ORTHOPEDIC SURGERY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	3
3951	PAIN MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	PHYSICIAN, SURGERY, GENERAL	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3964	PHYSICIAN, SURGERY, GENERAL	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, SURGERY, GENERAL	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	3
3951	PHYSICIAN, SURGERY, GENERAL	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	REGISTERED NURSE, EMERGENCY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	RHEUMATOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	8
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	23
3964	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Denied	2
3962	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	4
3965	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	5
3951	ANESTHESIOLOGY	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	EMERGENCY MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	7
3963	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	4
3965	FAMILY PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	GENERAL PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	GENERAL PRACTICE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	2
3956	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Denied	1
3963	INTERNAL MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3962	NEUROLOGY	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	3
3965	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3965	ORTHOPEDIC SURGERY	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	PAIN MEDICINE	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	2
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	2
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	4
3956	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	13
3951	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	4
3961	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Denied	1
3951	UNSPECIFIED	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	NARCOTIC ANALGESICS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	HYDROCODONE-APAP TAB 10-300 MG	NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	HYDROCODONE-CHLORPHENIRAMINE ER 10-8MG/5ML SUSP	NARCOTIC ANALGESICS	Approved	1
3965	FAMILY PRACTICE	HYDROCODONE-CHLORPHENIRAMINE ER SUSPEN- SION	NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	HYDROCODONE-IBUPROFEN TAB 10-200 MG	NARCOTIC ANALGESICS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HYDROCODONE-IBUPROFEN TAB 7.5-200 MG	NARCOTIC ANALGESICS	Denied	1
3956	UNSPECIFIED	HYDROCORTISONE 2.5% CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	DERMATOLOGY	HYDROCORTISONE 2.5% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	HYDROMORPHONE 8MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	HYDROMORPHONE 8MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	HYDROMORPHONE HCL 2MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	ORTHOPEDIC SURGERY	HYDROMORPHONE HCL 2MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3965	FAMILY PRACTICE	HYDROMORPHONE HCL 4MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	HYDROMORPHONE HCL 4MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	HYDROMORPHONE HCL 4MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	HYDROMORPHONE HCL 4MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3956	ALLERGY & IMMUNOLOGY	HYQVIA	BIOLOGICALS	Approved	2
3963	ALLERGY & IMMUNOLOGY	HYQVIA	BIOLOGICALS	Approved	1
3963	UNSPECIFIED	HYQVIA	BIOLOGICALS	Denied	1
3963	UNSPECIFIED	HYQVIA	BIOLOGICALS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	IBRANCE	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	IBRANCE	ANTINEOPLASTICS	Approved	3
3951	HEMATOLOGY & ONCOLOGY	IBRANCE	ANTINEOPLASTICS	Approved	1
3969	INTERNAL MEDICINE	IBRANCE	ANTINEOPLASTICS	Denied	1
3964	UNSPECIFIED	IBRANCE	ANTINEOPLASTICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ICLUSIG	ANTINEOPLASTICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ICLUSIG	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3964	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ANTINEOPLASTICS	Approved	2
3956	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ANTINEOPLASTICS	Approved	3
3963	HEMATOLOGY & ONCOLOGY	IMBRUVICA 280MG TAB	ANTINEOPLASTICS	Denied	1
3956	GASTROENTEROLOGY	INFLIXIMAB	ANTIRHEUMATIC	Denied	1
3956	GASTROENTEROLOGY	INFLIXIMAB 100MG IV SOLR	ANTIRHEUMATIC	Denied	1
3963	HEMATOLOGY & ONCOLOGY	INLYTA	ANTINEOPLASTICS	Approved	3
3956	HEMATOLOGY & ONCOLOGY	INLYTA	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	MEDICAL ONCOLOGY	INLYTA	ANTINEOPLASTICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3963	DERMATOLOGY	ISOTRETINOIN 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3961	FAMILY PRACTICE	ISOTRETINOIN 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	ISOTRETINOIN 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ISOTRETINOIN 20MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	2
3965	DERMATOLOGY	ISOTRETINOIN 30 MG CAPSULE	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	ISOTRETINOIN 30 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ISOTRETINOIN 30 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN 30MG OR CAPS	DERMATOLOGICAL AGENTS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ISOTRETINOIN 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	4
3951	UNSPECIFIED	ISOTRETINOIN 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	ISOTRETINOIN 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ISOTRETINOIN 40 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	1
3956	DERMATOLOGY	ISOTRETINOIN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	ISOTRETINOIN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	ISOTRETINOIN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ISOTRETINOIN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3951	UNSPECIFIED	ISOTRETINOIN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	ISOTRETINOIN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3956	FAMILY PRACTICE	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	3
3963	FAMILY PRACTICE	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	3
3951	FAMILY PRACTICE	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3956	INTERNAL MEDICINE	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	2
3963	INTERNAL MEDICINE	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3956	PODIATRIST, GENERAL PRACTICE	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	2
3963	PODIATRIST, UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1

Carrier P	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951 U	UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	1
3963 L	UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	2
3963 L	UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Denied	1
3956 L	UNSPECIFIED	ITRACONAZOLE 100MG OR CAPS	ANTIFUNGALS	Approved	2
3956 F.	FAMILY PRACTICE	ITRACONAZOLE 10MG/ML OR SOLN	ANTIFUNGALS	Approved	1
3963 D	DERMATOLOGY	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3963 F.	FAMILY PRACTICE	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3963 F.	FAMILY PRACTICE	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	3
3956 F.	FAMILY PRACTICE	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3969 F.	FAMILY PRACTICE	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3956 F	HEMATOLOGY	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3951 II	INFECTIOUS DISEASES	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3956 II	INFECTIOUS DISEASES	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	2
3951 II	INTERNAL MEDICINE	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3956 II	INTERNAL MEDICINE	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3963 N	NURSE PRACTITIONER, FAMILY HEALTH	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3956 N	NURSE PRACTITIONER, UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3956 P	PODIATRIST, UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3962 L	UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3962 L	UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3963 L	UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Denied	1
3963 L	UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3965 L	UNSPECIFIED	ITRACONAZOLE CAPSULES	ANTIFUNGALS	Approved	1
3963 D	DERMATOLOGY	IVERMECTIN	ANTIPARASITICS	Denied	1
3956 D	DERMATOLOGY	IVERMECTIN	ANTIPARASITICS	Denied	1
3956 F.	FAMILY PRACTICE	IVERMECTIN	ANTIPARASITICS	Denied	3
3963 N	NURSE PRACTITIONER, FAMILY HEALTH	IVERMECTIN	ANTIPARASITICS	Denied	1
3969 N	NURSE PRACTITIONER, FAMILY HEALTH	IVERMECTIN	ANTIPARASITICS	Denied	1
3956 N	NURSE PRACTITIONER, FAMILY HEALTH	IVERMECTIN	ANTIPARASITICS	Denied	1
3963 P	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN	ANTIPARASITICS	Denied	3
3951 L	UNSPECIFIED	IVERMECTIN	ANTIPARASITICS	Denied	1
3956 L	UNSPECIFIED	IVERMECTIN	ANTIPARASITICS	Denied	3
3963 L	UNSPECIFIED	IVERMECTIN	ANTIPARASITICS	Denied	2
3963 P	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN 1 % TOPICAL CREAM	ANTIPARASITICS	Approved	1
3963 D	DERMATOLOGY	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	8
3951 D	DERMATOLOGY	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3956 D	DERMATOLOGY	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	4

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	EMERGENCY MEDICINE	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3956	FAMILY PRACTICE	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3963	INTERNAL MEDICINE	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	3
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	2
3956	UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	11
3963	UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	10
3961	UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3951	UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3964	UNSPECIFIED	IVERMECTIN 1% EX CREA	ANTIPARASITICS	Approved	1
3956	FAMILY PRACTICE	IVERMECTIN 3MG OR TABS	ANTIPARASITICS	Approved	2
3951	FAMILY PRACTICE	IVERMECTIN 3MG OR TABS	ANTIPARASITICS	Approved	1
3956	NURSE PRACTITIONER, ADULT HEALTH	IVERMECTIN 3MG OR TABS	ANTIPARASITICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	IVERMECTIN 3MG OR TABS	ANTIPARASITICS	Approved	2
3963	UNSPECIFIED	IVERMECTIN 3MG OR TABS	ANTIPARASITICS	Approved	1
3964	UNSPECIFIED	IVERMECTIN 3MG OR TABS	ANTIPARASITICS	Approved	1
3963	FAMILY PRACTICE	IVERMECTIN CREAM	ANTIPARASITICS	Denied	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	IVERMECTIN CREAM	ANTIPARASITICS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN CREAM	ANTIPARASITICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	IVERMECTIN CREAM	ANTIPARASITICS	Approved	1
3964	UNSPECIFIED	IVERMECTIN CREAM	ANTIPARASITICS	Approved	1
3963	UNSPECIFIED	IVERMECTIN CREAM	ANTIPARASITICS	Approved	2
3963	HEMATOLOGY & ONCOLOGY	JADENU	MISCELLANEOUS	Denied	1
3962	HEMATOLOGY	JAKAFI	ANTINEOPLASTICS	Approved	1
3962	HEMATOLOGY	JAKAFI	ANTINEOPLASTICS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	JAKAFI	ANTINEOPLASTICS	Approved	3
3963	HEMATOLOGY & ONCOLOGY	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	JAKAFI	ANTINEOPLASTICS	Approved	2
3956	INTERNAL MEDICINE	JAKAFI	ANTINEOPLASTICS	Approved	2
3956	PHYSICIAN, ONCOLOGY, MEDICAL	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	JAKAFI	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	FAMILY PRACTICE	JANUMET (SITAGLIPTIN-METFORMIN)	ANTIDIABETICS	Approved	1
3956	FAMILY PRACTICE	JANUMET (SITAGLIPTIN-METFORMIN)	ANTIDIABETICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, FAMILY HEALTH	JANUMET (SITAGLIPTIN-METFORMIN)	ANTIDIABETICS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	JANUMET (SITAGLIPTIN-METFORMIN)	ANTIDIABETICS	Approved	1
3956	UNSPECIFIED	JANUMET (SITAGLIPTIN-METFORMIN)	ANTIDIABETICS	Denied	2
3956	FAMILY PRACTICE	JANUMET 50-1000MG OR TABS	ANTIDIABETICS	Approved	6
3956	INTERNAL MEDICINE	JANUMET 50-1000MG OR TABS	ANTIDIABETICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JANUMET 50-1000MG OR TABS	ANTIDIABETICS	Approved	2
3956	UNSPECIFIED	JANUMET 50-1000MG OR TABS	ANTIDIABETICS	Approved	3
3963	UNSPECIFIED	JANUMET 50-1000MG OR TABS	ANTIDIABETICS	Approved	1
3951	UNSPECIFIED	JANUMET 50-1000MG OR TABS	ANTIDIABETICS	Approved	1
3956	FAMILY PRACTICE	JANUMET 50-500MG OR TABS	ANTIDIABETICS	Approved	1
3961	FAMILY PRACTICE	JANUMET 50-500MG OR TABS	ANTIDIABETICS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	JANUMET 50-500MG OR TABS	ANTIDIABETICS	Approved	1
3951	FAMILY PRACTICE	JANUMET XR (SITAGLIPTIN-METFORMIN ER)	ANTIDIABETICS	Approved	1
3956	FAMILY PRACTICE	JANUMET XR (SITAGLIPTIN-METFORMIN ER)	ANTIDIABETICS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JANUMET XR (SITAGLIPTIN-METFORMIN ER)	ANTIDIABETICS	Denied	1
3956	FAMILY PRACTICE	JANUMET XR 100-1000MG ORTB24	ANTIDIABETICS	Approved	1
3956	FAMILY PRACTICE	JANUMET XR 50-1000MG OR TB24	ANTIDIABETICS	Approved	3
3956	NURSE PRACTITIONER, UNSPECIFIED	JANUMET XR 50-1000MG OR TB24	ANTIDIABETICS	Approved	1
3956	FAMILY PRACTICE	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Denied	2
3963	GENERAL PRACTICE	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Approved	1
3963	INTERNAL MEDICINE	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Approved	4
3956	UNSPECIFIED	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Denied	1
3963	UNSPECIFIED	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Approved	1
3951	UNSPECIFIED	JANUVIA (SITAGLIPTIN)	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	JANUVIA 100MG TAB	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	JANUVIA 100MG ORTABS	DIABETIC AGENT	Approved	3
3956	FAMILY PRACTICE	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	2
3963	INTERNAL MEDICINE	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	3
3956	NEPHROLOGY / RENAL MEDICINE	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, ADULT HEALTH	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JANUVIA 100MG OR TABS	DIABETIC AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	JANUVIA 100MG ORTABS	DIABETIC AGENT	Approved	4
3951	UNSPECIFIED	JANUVIA 100MG ORTABS	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	JANUVIA 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	JANUVIA 25MG OR TABS	DIABETIC AGENT	Approved	2
3956	FAMILY PRACTICE	JANUVIA 50MG OR TABS	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	JANUVIA 50MG OR TABS	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	JANUVIA 50MG OR TABS	DIABETIC AGENT	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JANUVIA 50MG OR TABS	DIABETIC AGENT	Approved	1
3951	UNSPECIFIED	JANUVIA 50MG OR TABS	DIABETIC AGENT	Approved	1
3963	CARDIOLOGY	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3963	CARDIOLOGY	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	2
3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	1
3956	CARDIOLOGY	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	3
3956	EMERGENCY MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	2
3956	FAMILY PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	30
3956	FAMILY PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	24
3951	FAMILY PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	3
3963	FAMILY PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	6
3963	FAMILY PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	6
3956	GENERAL PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	GENERAL PRACTICE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	1
3963	INTERNAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	2
3956	INTERNAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	12
3956	INTERNAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	4
3963	INTERNAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	1
3951	INTERNAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3961	INTERNAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	2
3956	NEPHROLOGY / RENAL MEDICINE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	14
3956	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	8
3961	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	PEDIATRICS	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PEDIATRICS	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	1
3956	PHARMACIST, UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	4
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3961	PHYSICIAN, ENDOCRINOLOGY	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	PSYCHIATRY	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	REGISTERED NURSE, CRITICAL CARE	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	2
3951	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	3
3956	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	46
3956	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	20
3964	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	2
3963	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	5
3951	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	9
3963	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Denied	1
3961	UNSPECIFIED	JARDIANCE (EMPAGLIFLOZIN)	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	JARDIANCE 10 MG TABLET	DIABETIC AGENT	Approved	1
3956	ALLERGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3963	ALLERGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	42
3951	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	CARDIOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	14
3956	CARDIOLOGY, INTERVENTIONAL	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Denied	1
3956	EMERGENCY MEDICINE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	2
3951	CARDIOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	2
3961	CARDIOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Denied	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3963	CARDIOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3951	CARDIOLOGY, INTERVENTIONAL	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	9
3951	FAMILY PRACTICE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	7
3961	FAMILY PRACTICE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	3
3961	GENERAL PRACTICE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	GENERAL PRACTICE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	2
3956	HEMATOLOGY & ONCOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	INTERNAL MEDICINE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	19
3963	INTERNAL MEDICINE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	9
3961	INTERNAL MEDICINE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3951	INTERNAL MEDICINE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, ACUTE CARE	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	3
3956	NURSE PRACTITIONER, ADULT HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3951	NURSE PRACTITIONER, ADULT HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	21
3963	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	4
3951	NURSE PRACTITIONER, UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	8
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	3
3956	PHYSICIAN, ENDOCRINOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3963	PHYSICIAN, ENDOCRINOLOGY	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	2
3956	UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	75
3963	UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	13
3951	UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	9
3951	UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Denied	1
3961	UNSPECIFIED	JARDIANCE 10MG OR TABS	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	JARDIANCE 25 MG TABLET	DIABETIC AGENT	Approved	1
3951	FAMILY PRACTICE	JARDIANCE 25 MG TABLET	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 25 MG TABLET	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	107
3963	ALLERGY	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3951	FAMILY PRACTICE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	9
3963	FAMILY PRACTICE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	29
3956	EMERGENCY MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	CARDIOLOGY	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	2
3963	EMERGENCY MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	FAMILY MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Denied	1
3956	GENERAL PRACTICE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	46
3963	INTERNAL MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	9

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	INTERNAL MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3951	INTERNAL MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	3
3951	INTERNAL MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Denied	1
3961	NURSE PRACTITIONER, ADULT HEALTH	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	46
3963	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	4
3951	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	5
3961	NURSE PRACTITIONER, FAMILY HEALTH	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	14
3963	NURSE PRACTITIONER, UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	3
3956	PEDIATRICS	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	7
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	5
3963	PHYSICIAN, ENDOCRINOLOGY	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3961	PHYSICIAN, GERIATRIC MEDICINE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	SPORTS MEDICINE, FAMILY PRACTICE	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	76
3963	UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	13
3951	UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	6
3961	UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	JARDIANCE 25MG OR TABS	DIABETIC AGENT	Denied	1
3956	FAMILY PRACTICE	JARDIANCE 25MG TAB	DIABETIC AGENT	Approved	1
3951	FAMILY PRACTICE	JATENZO 237MG OR CAPS	TESTOSTERONE SUPPLEMENT	Approved	1
3963	FAMILY PRACTICE	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	2
3956	FAMILY PRACTICE	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	3
3963	INTERNAL MEDICINE	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	1
3956	UNSPECIFIED	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	5
3951	UNSPECIFIED	JUBLIA (EFINACONAZOLE)	ANTIFUNGALS	Denied	1
3963	UNSPECIFIED	JUBLIA 10% EX SOLN	ANTIFUNGALS	Approved	1
3963	UNSPECIFIED	KENALOG (BRAND ONLY) (TRIAMCINOLONE ACETONIDE)	TOPICAL CORTICOSTEROID	Denied	1
3963	CARDIOLOGY	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1

3951 ENDO	OCRINOLOGY, DIABETES & METABOLISM  ILY PRACTICE	KERENDIA (FINERENONE) KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
	ILY PRACTICE	KERENDIA (FINERENONE)			
3956 FAMIL			KIDNEY AGENT	Denied	2
		KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	3
3965 FAMIL	ILY PRACTICE	KERENDIA (FINERENONE)	KIDNEY AGENT	Denied	1
3963 FAMIL	ILY PRACTICE	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3965 FAMIL	ILY PRACTICE	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3963 INTER	RNAL MEDICINE	KERENDIA (FINERENONE)	KIDNEY AGENT	Denied	2
3951 NEPH	HROLOGY / RENAL MEDICINE	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3964 NEPHI	HROLOGY / RENAL MEDICINE	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3956 NEPHI	HROLOGY / RENAL MEDICINE	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3962 PEDIA	ATRICS	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3965 PHYSI	SICIAN ASSISTANT, UNSPECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3965 UNSP	PECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	2
3963 UNSP	PECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	4
3963 UNSP	PECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Denied	2
3951 UNSP	PECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	1
3956 UNSP	PECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Approved	2
3956 UNSP	PECIFIED	KERENDIA (FINERENONE)	KIDNEY AGENT	Denied	1
3963 FAMIL	ILY PRACTICE	KERENDIA 10MG OR TABS	KIDNEY AGENT	Approved	1
3963 UNSP	PECIFIED	KERENDIA 10MG OR TABS	KIDNEY AGENT	Denied	1
3951 FAMIL	ILY PRACTICE	KERENDIA 20MG OR TABS	KIDNEY AGENT	Denied	1
3965 NEUR	ROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	1
3963 NEUR	ROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	2
3956 NEUR	ROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	1
3951 NEUR	ROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Denied	1
3964 PHYSI	SICIAN ASSISTANT, UNSPECIFIED	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	1
3963 UNSP	PECIFIED	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	2
3963 PHYSI	SICIAN ASSISTANT, UNSPECIFIED	KETOCONAZOLE 2% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956 UNSP	PECIFIED	KETOCONAZOLE 2% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956 DERM	MATOLOGY	KETOCONAZOLE 2% EX SHAM	DERMATOLOGICAL AGENTS	Approved	1
3956 INTER	RNAL MEDICINE	KETOCONAZOLE 2% EX SHAM	DERMATOLOGICAL AGENTS	Approved	1
3963 NURS	SE PRACTITIONER, FAMILY HEALTH	KETOCONAZOLE SHAMPOO 2%	DERMATOLOGICAL AGENTS	Denied	1
3956 RHEU	UMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3969 RHEU	UMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956 RHEU	UMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963 RHEU	UMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3963 RHEU	UMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Denied	1

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3963	UNSPECIFIED	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	HEMATOLOGY	KEYTRUDA	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ANTINEOPLASTICS	Approved	14
3956	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ANTINEOPLASTICS	Denied	5
3956	INTERNAL MEDICINE	KEYTRUDA	ANTINEOPLASTICS	Approved	4
3956	UNSPECIFIED	KEYTRUDA	ANTINEOPLASTICS	Approved	3
3956	HEMATOLOGY & ONCOLOGY	KISQALI	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	KISQALI	ANTINEOPLASTICS	Approved	1
3951	PHYSICIAN, ONCOLOGY, MEDICAL	KISQALI	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	KISQALI	ANTINEOPLASTICS	Approved	1
3964	PHYSICIAN, ONCOLOGY, MEDICAL	KISQALI PAK FEMARA	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	LENALIDOMIDE	ANTINEOPLASTICS	Approved	2
3963	PHYSICIAN, ONCOLOGY, MEDICAL	LENALIDOMIDE	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	LENVIMA	ANTINEOPLASTICS	Approved	3
3964	HEMATOLOGY & ONCOLOGY	LENVIMA	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	LENVIMA	ANTINEOPLASTICS	Approved	2
3956	UNSPECIFIED	LENVIMA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	LIDOCAINE 4% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	ANESTHESIOLOGY	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Denied	1
3963	FAMILY PRACTICE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	2
3951	FAMILY PRACTICE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	2
3956	FAMILY PRACTICE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Denied	3
3963	FAMILY PRACTICE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Denied	2
3961	INTERNAL MEDICINE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3963	NEUROLOGICAL SURGERY	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3956	PAIN MEDICINE	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	6
3963	UNSPECIFIED	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Denied	2
3963	UNSPECIFIED	LIDOCAINE 5% EX PTCH	NON-NARCOTIC ANALGESICS	Approved	2
3956	FAMILY PRACTICE	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	13
3956	ANESTHESIOLOGY	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	2
3951	ANESTHESIOLOGY	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3963	FAMILY PRACTICE	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	INTERNAL MEDICINE	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	3
3963	INTERNAL MEDICINE	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3963	NEPHROLOGY / RENAL MEDICINE	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	NEUROLOGICAL SURGERY	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	2
3956	NURSE PRACTITIONER, UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	ORTHOPEDIC SURGERY	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	2
3956	PODIATRIST, SURGERY, FOOT & ANKLE	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	PODIATRIST, UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3956	UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	12
3951	UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	3
3961	UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	1
3963	UNSPECIFIED	LIDOCAINE 5% PATCH	NON-NARCOTIC ANALGESICS	Denied	3
3963	FAMILY PRACTICE	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	2
3951	FAMILY PRACTICE	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	3
3969	FAMILY PRACTICE	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3963	NEUROLOGICAL SURGERY	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	2
3964	NURSE PRACTITIONER, FAMILY HEALTH	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3963	ORTHOPEDIC SURGERY	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	2
3969	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3963	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	5
3962	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3964	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3965	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3964	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Approved	1
3962	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Approved	1
3969	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3951	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Denied	1
3969	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Approved	1
3965	UNSPECIFIED	LIDOCAINE PATCH 5%	NON-NARCOTIC ANALGESICS	Approved	1
3956	EMERGENCY MEDICINE	LIDOCAINE-PRILOCAINE 2.5-2.5% CREAM	ANESTHETIC LOCAL TOPICAL	Denied	1
3965	FAMILY PRACTICE	LIDODERM (LIDOCAINE PATCH 5%)	NON-NARCOTIC ANALGESICS	Denied	1
3963	UNSPECIFIED	LIDODERM (LIDOCAINE PATCH 5%)	NON-NARCOTIC ANALGESICS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	LIPITOR 40MG TABLET	ANTIHYPERLIPIDEMICS	Denied	1
3956	GENERAL PRACTICE	LISDEXAMFETAMINE DIMESYLATE CAPSULE 10MG	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	LIVALO 2MG TABLET	ANTIHYPERLIPIDEMICS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	LONSURF	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	LORAZEPAM 0.5MG TABLET	BENZODIAZEPINE	Approved	1
3963	HEMATOLOGY & ONCOLOGY	LORBRENA	ANTINEOPLASTICS	Approved	1
3951	OPTOMETRIST, UNSPECIFIED	LUMIGAN (BIMATOPROST)	ANTIGLAUCOMA	Approved	1
3956	OPTOMETRIST, UNSPECIFIED	LUMIGAN (BIMATOPROST)	ANTIGLAUCOMA	Denied	2
3956	UNSPECIFIED	LUMIGAN (BIMATOPROST)	ANTIGLAUCOMA	Denied	1
3963	OPHTHALMOLOGY	LUMIGAN 0.01% OP SOLN	ANTIGLAUCOMA	Approved	1
3956	OPHTHALMOLOGY	LUMIGAN 0.01% OP SOLN	ANTIGLAUCOMA	Approved	1
3956	OPTOMETRIST, UNSPECIFIED	LUMIGAN 0.01% OP SOLN	ANTIGLAUCOMA	Approved	1
3956	OBSTETRICS & GYNECOLOGY	LUPRON DEPOT 3.75 MG	HORMONES/HORMONE MODIFIERS	Approved	1
3961	HEMATOLOGY & ONCOLOGY	LYNPARZA	ANTINEOPLASTICS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	LYNPARZA	ANTINEOPLASTICS	Approved	2
3951	HEMATOLOGY & ONCOLOGY	LYNPARZA	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	LYNPARZA	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	LYNPARZA	ANTINEOPLASTICS	Approved	3
3963	ANESTHESIOLOGY	LYRICA (PREGABALIN)	ANTICONVULSANTS	Denied	1
3964	NURSE PRACTITIONER, ACUTE CARE	LYRICA (PREGABALIN)	ANTICONVULSANTS	Denied	1
3965	UNSPECIFIED	LYRICA (PREGABALIN)	ANTICONVULSANTS	Approved	1
3964	ANESTHESIOLOGY	LYRICA 25MG OR CAPS	ANTICONVULSANTS	Approved	1
3963	ANESTHESIOLOGY	LYRICA 75 MG CAPSULE	ANTICONVULSANTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	MALATHION 0.5% EX LOTN	ANTIPARASITICS	Approved	1
3956	UNSPECIFIED	MALATHION 0.5% EX LOTN	ANTIPARASITICS	Approved	1
3963	UNSPECIFIED	MARINOL (DRONABINOL)	ANTIEMETIC	Denied	1
3963	UNSPECIFIED	MAVENCLAD	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	UNSPECIFIED	MAVENCLAD	MULTIPLE SCLEROSIS AGENT	Denied	1
3963	INTERNAL MEDICINE	MEFLOQUINE 250MG TABLET	ANTI-INFECTIVES	Denied	1
3963	INTERNAL MEDICINE	MEFLOQUINE HCL 250MG TABLET	ANTI-INFECTIVES	Denied	1
3963	MEDICAL ONCOLOGY	MEKTOVI	ANTINEOPLASTICS	Approved	1
3956	ANESTHESIOLOGY	METHADONE 10MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3956	FAMILY PRACTICE	METHADONE 10MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3951	FAMILY PRACTICE	METHADONE 10MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3963			NARCOTIC ANIAL OFCICO	Danied	2
	UNSPECIFIED	METHADONE 10MG TABLETS	NARCOTIC ANALGESICS	Denied	
3951	UNSPECIFIED  NEUROLOGICAL SURGERY	METHADONE 10MG TABLETS  METHADONE 5MG TABLETS	NARCOTIC ANALGESICS  NARCOTIC ANALGESICS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	ANESTHESIOLOGY	METHADONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	METHADONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	METHADONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	METHADONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	METHADONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3963	UNSPECIFIED	METHADONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951	NEUROLOGICAL SURGERY	METHADONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	METHADONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	METHOCARBAMOL 750MG OR TABS	MUSCLE RELAXANTS	Approved	1
3956	PSYCHIATRY	METHYLPHENIDATE 20MG TABLET	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	METRONIDAZOLE 0.75% EX GEL	ANTIBIOTICS	Approved	1
3956	UNSPECIFIED	METRONIDAZOLE CREAM	ANTIBIOTICS	Denied	1
3969	DERMATOLOGY	MIRVASO (BRIMONIDINE)	DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	MODAFINIL 100MG	CNS STIMULANTS	Denied	1
3965	FAMILY PRACTICE	MODAFINIL 100MG	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	MODAFINIL 100MG	CNS STIMULANTS	Denied	1
3963	INTERNAL MEDICINE	MODAFINIL 100MG	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, PEDIATRIC CARE	MODAFINIL 100MG	CNS STIMULANTS	Denied	1
3964	NURSE PRACTITIONER, PSYCHIATRIC	MODAFINIL 100MG	CNS STIMULANTS	Denied	1
3963	UNSPECIFIED	MODAFINIL 100MG	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	MODAFINIL 100MG	CNS STIMULANTS	Denied	2
3965	UNSPECIFIED	MODAFINIL 100MG	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Denied	2
3956	FAMILY PRACTICE	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	1
3963	INTERNAL MEDICINE	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	1
3951	INTERNAL MEDICINE	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	1
3961	NURSE PRACTITIONER, GERONTOLOGY	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	2
3956	PSYCHIATRY	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	1
3956	UNSPECIFIED	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	3
3963	UNSPECIFIED	MODAFINIL 100MG OR TABS	CNS STIMULANTS	Approved	3
3963	INTERNAL MEDICINE	MODAFINIL 200 MG TABLET	CNS STIMULANTS	Approved	1
3956	FAMILY PRACTICE	MODAFINIL 200MG	CNS STIMULANTS	Denied	4
3956	FAMILY PRACTICE	MODAFINIL 200MG	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	MODAFINIL 200MG	CNS STIMULANTS	Denied	3
3963	FAMILY PRACTICE	MODAFINIL 200MG	CNS STIMULANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, FAMILY HEALTH	MODAFINIL 200MG	CNS STIMULANTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	MODAFINIL 200MG	CNS STIMULANTS	Denied	1
3964	PSYCHIATRY	MODAFINIL 200MG	CNS STIMULANTS	Approved	1
3963	PSYCHIATRY	MODAFINIL 200MG	CNS STIMULANTS	Denied	1
3963	PULMONARY DISEASES	MODAFINIL 200MG	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Approved	2
3956	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Denied	3
3965	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Approved	1
3969	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Approved	1
3962	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Denied	1
3962	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Approved	1
3963	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Denied	3
3951	UNSPECIFIED	MODAFINIL 200MG	CNS STIMULANTS	Denied	1
3951	CLINICAL NURSE SPECIALIST, GERONTOLOGY	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	8
3956	FAMILY PRACTICE	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	4
3963	INTERNAL MEDICINE	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	INTERNAL MEDICINE	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Denied	3
3951	INTERNAL MEDICINE	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	NEUROLOGY	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	2
3956	NEUROLOGY	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	NURSE PRACTITIONER, GERONTOLOGY	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, PSYCHIATRIC	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	PEDIATRICS	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	PHYSICIAN, GERIATRIC MEDICINE	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	PHYSICIAN, SURGERY, GENERAL	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3956	PSYCHIATRY	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	1
3963	PULMONARY DISEASES	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	6
3956	PULMONARY DISEASES	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	2
3956	UNSPECIFIED	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	10
3963	UNSPECIFIED	MODAFINIL 200MG OR TABS	CNS STIMULANTS	Approved	7
3969					
	UNSPECIFIED	MODAFINIL 200MG ORTABS	CNS STIMULANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	MOMETASONE FUROATE 0.1% EX SOLN	TOPICAL SKIN PRODUCT	Approved	1
3956	FAMILY PRACTICE	MORPHINE SULFATE (K) ER 20MG CAPSULES	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	MORPHINE SULFATE 15MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3956	EMERGENCY MEDICINE	MORPHINE SULFATE 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	MORPHINE SULFATE 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	MORPHINE SULFATE 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	MORPHINE SULFATE 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, SURGERY, GENERAL	MORPHINE SULFATE 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	MORPHINE SULFATE 15MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	MORPHINE SULFATE ER 100MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3963	ANESTHESIOLOGY	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3951	ANESTHESIOLOGY	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3956	ANESTHESIOLOGY	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	2
3963	FAMILY PRACTICE	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3951	UNSPECIFIED	MORPHINE SULFATE ER 15MG OR TBCR	NARCOTIC ANALGESICS	Approved	1
3951	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	MORPHINE SULFATE ER 15MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3963	UNSPECIFIED	MORPHINE SULFATE ER 15MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	MORPHINE SULFATE ER 30MG ORTBCR	NARCOTIC ANALGESICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	MORPHINE SULFATE ER 30MG ORTBCR	NARCOTIC ANALGESICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	MORPHINE SULFATE ER 30MG ORTBCR	NARCOTIC ANALGESICS	Approved	1
3962	FAMILY PRACTICE	MORPHINE SULFATE ER 30MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3951	EMERGENCY MEDICINE	MORPHINE SULFATE ER 60MG ORTBCR	NARCOTIC ANALGESICS	Approved	1
3965	UNSPECIFIED	MORPHINE SULFATE ER 60MG ORTBCR	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	MORPHINE SULFATE ER 60MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3965	UNSPECIFIED	MORPHINE SULFATE ER 60MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3963	FAMILY PRACTICE	MORPHINE SULFATE ER BEADS 120MG OR CP24	NARCOTIC ANALGESICS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	MOUNJARO	ANTIDIABETICS	Denied	1
3963	UNSPECIFIED	MOUNJARO	ANTIDIABETICS	Denied	1
3963	FAMILY PRACTICE	MOUNJARO (TIRZEPATIDE)	ANTIDIABETICS	Denied	4
3963	INTERNAL MEDICINE	MOUNJARO (TIRZEPATIDE)	ANTIDIABETICS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	MOUNJARO (TIRZEPATIDE)	ANTIDIABETICS	Denied	1
3963	OBSTETRICS & GYNECOLOGY	MOUNJARO (TIRZEPATIDE)	ANTIDIABETICS	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	MOUNJARO 10MG/0.5ML PEN	ANTIDIABETICS	Denied	1
3963	FAMILY PRACTICE	MOUNJARO 12.5/0.5 PEN	ANTIDIABETICS	Denied	1
3963	FAMILY PRACTICE	MOUNJARO 2.5/0.5 PEN	ANTIDIABETICS	Denied	1
3964	FAMILY PRACTICE	MOUNJARO 2.5MG/0.5ML PEN	ANTIDIABETICS	Approved	1
3963	FAMILY PRACTICE	MOUNJARO 2.5MG/0.5ML PENS	ANTIDIABETICS	Denied	1
3964	UNSPECIFIED	MOUNJARO 5MG/0.5ML PEN	ANTIDIABETICS	Denied	1
3964	FAMILY PRACTICE	MOUNJARO 7.5/0.5 PEN	ANTIDIABETICS	Denied	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	MOUNJARO 7.5/0.5 PEN	ANTIDIABETICS	Denied	1
3963	NURSE PRACTITIONER, ADULT HEALTH	MOUNJARO PEN	ANTIDIABETICS	Denied	1
3951	FAMILY PRACTICE	MULTAQ (DRONEDARONE)	CARDIOVASCULAR AGENTS	Denied	1
3963	INTERNAL MEDICINE	MULTAQ (DRONEDARONE)	CARDIOVASCULAR AGENTS	Denied	1
3963	UNSPECIFIED	MULTAQ (DRONEDARONE)	CARDIOVASCULAR AGENTS	Approved	1
3956	CARDIOLOGY	MULTAQ 400 MG TABLET	CARDIOVASCULAR AGENTS	Approved	1
3956	CARDIOLOGY	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	3
3956	FAMILY PRACTICE	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	1
3963	CARDIOLOGY	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	3
3956	INTERNAL MEDICINE	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	1
3956	PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	1
3963	UNSPECIFIED	MULTAQ 400MG OR TABS	CARDIOVASCULAR AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	MUPIROCIN 2% OINTMENT	OTHER ANTIBIOTICS	Denied	1
3962	FAMILY PRACTICE	MYFEMBREE (RELUGOLIX-ESTRADIOL-NORETHINDRONE)	PROGESTIN	Approved	1
3963	OBSTETRICS & GYNECOLOGY	MYFEMBREE (RELUGOLIX-ESTRADIOL-NORETHINDRONE)	PROGESTIN	Approved	1
3963	OBSTETRICS & GYNECOLOGY	MYFEMBREE (RELUGOLIX-ESTRADIOL-NORETHINDRONE)	PROGESTIN	Denied	2
3962	OBSTETRICS & GYNECOLOGY	MYFEMBREE (RELUGOLIX-ESTRADIOL-NORETHINDRONE)	PROGESTIN	Approved	1
3969	OBSTETRICS & GYNECOLOGY	MYFEMBREE (RELUGOLIX-ESTRADIOL-NORETHINDRONE)	PROGESTIN	Approved	2
3969	OBSTETRICS & GYNECOLOGY	MYFEMBREE (RELUGOLIX-ESTRADIOL-NORETHINDRONE)	PROGESTIN	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	MYFEMBREE 40-1-0.5MG OR TABS	PROGESTIN	Approved	1
3963	OBSTETRICS & GYNECOLOGY	MYFEMBREE 40-1-0.5MG OR TABS	PROGESTIN	Approved	2
3965	UNSPECIFIED	MYFEMBREE 40-1-0.5MG OR TABS	PROGESTIN	Approved	1
3963	UNSPECIFIED	MYFEMBREE 40-1-0.5MG OR TABS	PROGESTIN	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	MYORISAN (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3965	UNSPECIFIED	MYORISAN (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	UNSPECIFIED	MYORISAN 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	MYRBETRIQ 25MG OR TB24	GENITOURINARY AGENTS	Denied	1
3963	FAMILY PRACTICE	NARATRIPTAN	ANTIMIGRAINE	Denied	1
3956	UNSPECIFIED	NARATRIPTAN	ANTIMIGRAINE	Denied	1
3963	HEMATOLOGY & ONCOLOGY	NEULASTA ONPRO 6MG/0.6ML SC PSKT	HEMATOPOIETIC AGENT	Denied	1
3963	PEDIATRICS	NEXAVAR	ANTINEOPLASTICS	Approved	1
3965	CARDIOLOGY	NEXLETOL (BEMPEDOIC ACID)	LIPOTROPICS	Approved	1
3963	FAMILY PRACTICE	NEXLETOL (BEMPEDOIC ACID)	LIPOTROPICS	Denied	4
3963	FAMILY PRACTICE	NEXLETOL (BEMPEDOIC ACID)	LIPOTROPICS	Approved	1
3962	UNSPECIFIED	NEXLETOL (BEMPEDOIC ACID)	LIPOTROPICS	Approved	1
3963	FAMILY PRACTICE	NEXLETOL 180MG OR TABS	LIPOTROPICS	Approved	1
3963	INTERNAL MEDICINE	NEXLETOL 180MG OR TABS	LIPOTROPICS	Approved	1
3951	UNSPECIFIED	NEXLETOL 180MG OR TABS	LIPOTROPICS	Approved	2
3963	CARDIOLOGY	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Approved	1
3963	CARDIOLOGY	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Denied	1
3963	FAMILY PRACTICE	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Approved	3
3963	FAMILY PRACTICE	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Approved	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Denied	1
3963	UNSPECIFIED	NEXLIZET (BEMPEDOIC ACID-EZETIMIBE)	LIPOTROPICS	Denied	1
3963	FAMILY PRACTICE	NEXLIZET 180-10MG OR TABS	LIPOTROPICS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	NEXTSTELLIS 3-14.2MG TABLET	CONTRACEPTIVES	Denied	1
3963	OBSTETRICS & GYNECOLOGY	NEXTSTELLIS 3-14.2MG TABLET	CONTRACEPTIVES	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	NINLARO	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Approved	3
3963	HEMATOLOGY & ONCOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Approved	4
3963	UNSPECIFIED	NIVESTYM	COLONY STIMULATING FACTORS	Approved	1
3963	UNSPECIFIED	NIVESTYM	COLONY STIMULATING FACTORS	Denied	1
3956	UNSPECIFIED	NIVESTYM	COLONY STIMULATING FACTORS	Approved	1
3951	PEDIATRICS	NORDITROPIN	HORMONES	Approved	1
3956	UNSPECIFIED	NORDITROPIN	HORMONES	Denied	3
3963	UNSPECIFIED	NORDITROPIN	HORMONES	Denied	1
3963	UNSPECIFIED	NORDITROPIN	HORMONES	Approved	1
3963	OBSTETRICS & GYNECOLOGY	NPTHYROID	THYROID AGENTS	Denied	1
3963	FAMILY PRACTICE	NPTHYROID 120MG TABLETS	THYROID AGENTS	Denied	1
3963	HEMATOLOGY	NUBEQA	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	HEMATOLOGY	NUBEQA	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	NUBEQA	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	NUCALA	MISCELLANEOUS	Denied	1
3963	PULMONARY DISEASES	NUCALA	MISCELLANEOUS	Approved	1
3963	PULMONARY DISEASES	NUCALA	MISCELLANEOUS	Denied	3
3967	PULMONARY DISEASES	NUCALA	MISCELLANEOUS	Approved	1
3956	FAMILY PRACTICE	NUCYNTA 100MG TABLETS (TAPENTADOL)	NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	NUCYNTA 100MG TABLETS (TAPENTADOL)	NARCOTIC ANALGESICS	Denied	1
3956	UNSPECIFIED	NUCYNTA 75MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963	NEUROLOGY	NUCYNTA 75MG TABLETS (TAPENTADOL)	NARCOTIC ANALGESICS	Denied	1
3956	RHEUMATOLOGY	NUCYNTA ER 100MG OR TB12	NARCOTIC ANALGESICS	Approved	2
3956	INTERNAL MEDICINE	NUCYNTA ER 150MG OR TB12	NARCOTIC ANALGESICS	Approved	1
3956	RHEUMATOLOGY	NUCYNTA ER 50MG OR TB12	NARCOTIC ANALGESICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC 75MG ODT	ANTIMIGRAINE	Denied	1
3963	UNSPECIFIED	NURTEC 75MG ODT	ANTIMIGRAINE	Denied	1
3963	FAMILY PRACTICE	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	11
3951	FAMILY PRACTICE	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	3
3963	INTERNAL MEDICINE	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	2
3967	INTERNAL MEDICINE	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	5
3951	NEUROLOGY	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	4
3963	NURSE PRACTITIONER, UNSPECIFIED	NURTEC 75MG OR TBDP	ANTIMIGRAINE	Approved	4
3963	NURSE PRACTITIONER, UNSPECIFIED	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Denied	1
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	NURTEC 75MG OR TBDP	ANTIMIGRAINE	Denied	1
3963	PEDIATRICS	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	NURTEC 75MG OR TBDP	ANTIMIGRAINE	Approved	1
3964	PHYSICIAN, SURGERY, GENERAL	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	1
3963	UNSPECIFIED	NURTEC 75MG OR TBDP	ANTIMIGRAINE	Approved	20
3965	UNSPECIFIED	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	1
3951	UNSPECIFIED	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Approved	3
3963	UNSPECIFIED	NURTEC 75MG ORTBDP	ANTIMIGRAINE	Denied	1
3962	UNSPECIFIED	NURTEC 75MG OR TBDP	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC 75MG ORAL DISINTEGRATING TABLET	ANTIMIGRAINE	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT	ANTIMIGRAINE	Denied	1
3963	UNSPECIFIED	NURTEC ODT 75 MG DISINTEGRATING TABLET	ANTIMIGRAINE	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3967	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3962	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	2
3963	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	5
3965	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3963	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	7
3951	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3965	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	2
3962	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	3
3964	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3969	FAMILY PRACTICE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3963	INTERNAL MEDICINE	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3964	NEUROLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3967	NEUROLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	4
3951	NEUROLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	2
3964	NEUROLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3963	NEUROLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3963	NURSE PRACTITIONER, COMMUNITY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	2
3965	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	3
3964	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	2
3969	NURSE PRACTITIONER, UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3964	NURSE PRACTITIONER, UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	2
3965	NURSE PRACTITIONER, UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3963	OBSTETRICS & GYNECOLOGY	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1
3963	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	4
3969	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	3
3951	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	3
3964	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	2
3965	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	5
3963	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3962	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Approved	1
3964	UNSPECIFIED	NURTEC ODT 75MG (RIMEGEPANT)	ANTIMIGRAINE	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	NURTEC TBDP 75MG 8EA X 1 BOX	ANTIMIGRAINE	Approved	1
3965	INTERNAL MEDICINE	NURTEC TBDP 75MG 8EA X 1 BOX	ANTIMIGRAINE	Approved	1
3969	NEUROLOGY	NURTEC TBDP 75MG 8EA X 1 BOX	ANTIMIGRAINE	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	NURTEC TBDP 75MG 8EA X 1 BOX	ANTIMIGRAINE	Approved	1
3956	HEMATOLOGY & ONCOLOGY	NYVEPRIA	COLONY STIMULATING FACTORS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	NYVEPRIA	COLONY STIMULATING FACTORS	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	OCALIVA	BILETHERAPY	Approved	1
3969	UNSPECIFIED	OCTREOTIDE ACETATE	HORMONES	Denied	1
3964	OTOLARYNGOLOGY	ODACTRA (HOUSE DUST MITE ALLERGEN EXTRACT)	ALLERGEN SPECIFIC IMMUNOTHERAPY	Approved	1
3956	INTERNAL MEDICINE	OFEV	TYROSINE KINASE INHIBITOR	Denied	1
3956	INTERNAL MEDICINE	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3963	PULMONARY DISEASES	OFEV	TYROSINE KINASE INHIBITOR	Approved	3
3956	UNSPECIFIED	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3963	UNSPECIFIED	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3956	UNSPECIFIED	OMEPRAZOLE CAP 20MG	GASTROINTESTINAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	OMNIPOD 5 G6 PODS (GEN 5) PODS MIS	DIABETIC MEDICAL SUPPLIES	Approved	1
3956	HEMATOLOGY & ONCOLOGY	ONDANSETRON 4MG OR TBDP	ANTINAUSEANTS	Approved	2
3951	UNSPECIFIED	ONDANSETRON 4MG OR TBDP	ANTINAUSEANTS	Denied	1
3956	UNSPECIFIED	ONDANSETRON 4MG OR TBDP	ANTINAUSEANTS	Denied	1
3956	FAMILY PRACTICE	ONDANSETRON 8MG OR TBDP	ANTINAUSEANTS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	ONDANSETRON 8MG OR TBDP	ANTINAUSEANTS	Approved	2
3956	MEDICAL ONCOLOGY	ONDANSETRON 8MG OR TBDP	ANTINAUSEANTS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	ONDANSETRON 8MG OR TBDP	ANTINAUSEANTS	Approved	1
3956	UNSPECIFIED	ONDANSETRON 8MG OR TBDP	ANTINAUSEANTS	Denied	1
3963	UNSPECIFIED	ONDANSETRON 8MG TABLET	ANTINAUSEANTS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	ONDANSETRON HCL 4MG OR TABS	ANTINAUSEANTS	Approved	1
3963	UNSPECIFIED	ONDANSETRON HCL 4MG OR TABS	ANTINAUSEANTS	Approved	1
3963	INTERNAL MEDICINE	ONDANSETRON HCL 8MG OR TABS	ANTINAUSEANTS	Approved	1
3963	PALLIATIVE MEDICINE	ONDANSETRON HCL 8MG OR TABS	ANTINAUSEANTS	Approved	1
3956	FAMILY PRACTICE	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	5
3951	FAMILY PRACTICE	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	1
3956	GASTROENTEROLOGY	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	1
3956	INTERNAL MEDICINE	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	1
3956	MEDICAL ONCOLOGY	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	1
3963	NEUROLOGICAL SURGERY	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	1
3956	OBSTETRICS & GYNECOLOGY	ONDANSETRON ODT TABLET	ANTINAUSEANTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	ORTHOPEDIC SURGERY	ONDANSETRON ODTTABLET	ANTINAUSEANTS	Denied	1
3956	ORTHOPEDIC SURGERY	ONDANSETRON ODTTABLET	ANTINAUSEANTS	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	ONDANSETRON ODTTABLET	ANTINAUSEANTS	Denied	1
3951	UNSPECIFIED	ONDANSETRON ODTTABLET	ANTINAUSEANTS	Denied	4
3963	UNSPECIFIED	ONDANSETRON ODTTABLET	ANTINAUSEANTS	Denied	3
3956	UNSPECIFIED	ONDANSETRON ODTTABLET	ANTINAUSEANTS	Denied	5
3956	FAMILY PRACTICE	ONDANSETRONTABLET	ANTINAUSEANTS	Denied	2
3956	GASTROENTEROLOGY	ONDANSETRONTABLET	ANTINAUSEANTS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	ONDANSETRONTABLET	ANTINAUSEANTS	Denied	1
3956	OBSTETRICS & GYNECOLOGY	ONDANSETRONTABLET	ANTINAUSEANTS	Denied	2
3963	PHYSICIAN, ONCOLOGY, MEDICAL	ONDANSETRONTABLET	ANTINAUSEANTS	Denied	1
3956	UNSPECIFIED	ONDANSETRONTABLET	ANTINAUSEANTS	Denied	2
3963	UNSPECIFIED	ONUREG	ANTINEOPLASTICS	Approved	1
3951	CARDIOLOGY	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	CARDIOLOGY	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	CARDIOLOGY	OPSUMIT	TYROSINE KINASE INHIBITOR	Denied	1
3963	INTERNAL MEDICINE	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	INTERNAL MEDICINE	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3964	PULMONARY DISEASES	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	UNSPECIFIED	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	2
3963	DERMATOLOGY	OPZELURA	ALL OTHER DERMATOLOGICALS	Approved	1
3963	DERMATOLOGY	OPZELURA 1.5% CREAM	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	OPZELURA 1.5% CREAM	ALL OTHER DERMATOLOGICALS	Approved	1
3964	UNSPECIFIED	OPZELURA 1.5% EX CREA	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	OPZELURA CREAM	ALL OTHER DERMATOLOGICALS	Denied	1
3956	CARDIOLOGY	ORENITRAM	VASODILATORS	Approved	1
3956	UNSPECIFIED	ORENITRAM	VASODILATORS	Approved	1
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	ORILISSA (ELAGOLIX)	HORMONES/HORMONE MODIFIERS	Denied	1
3963	OBSTETRICS & GYNECOLOGY	ORILISSA (ELAGOLIX)	HORMONES/HORMONE MODIFIERS	Denied	1
3965	UNSPECIFIED	ORILISSA (ELAGOLIX)	HORMONES/HORMONE MODIFIERS	Approved	1
3962	UNSPECIFIED	ORILISSA (ELAGOLIX)	HORMONES/HORMONE MODIFIERS	Denied	1
3963	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	4
3965	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	1
3956	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	4
3951	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	2
3956	UNSPECIFIED	ORILISSA 150MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	1
3963	UNSPECIFIED	ORILISSA 150MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	1
3956	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Approved	2
3956	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	4
3963	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	4
3965	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Approved	1
3969	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Approved	2
3965	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	1
3963	OBSTETRICS & GYNECOLOGY	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Approved	3
3964	UNSPECIFIED	ORILISSA 150MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	1
3956	OBSTETRICS & GYNECOLOGY	ORILISSA 200MG ORTABS	HORMONES/HORMONE MODIFIERS	Approved	2
3963	OBSTETRICS & GYNECOLOGY	ORILISSA 200MG OR TABS	HORMONES/HORMONE MODIFIERS	Approved	2
3963	UNSPECIFIED	ORILISSA 200MG ORTABS	HORMONES/HORMONE MODIFIERS	Approved	2
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	ORILISSA 200MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Approved	1
3963	UNSPECIFIED	ORILISSA 200MG TABLETS (ELAGOLIX)	SYSTEMIC HORMONAL AGENTS	Denied	2
3962	UNSPECIFIED	ORKAMBI	CYSTIC FIBROSIS AGENTS	Approved	1
3963	FAMILY PRACTICE	OSPHENA 60MG OR TABS	ESTROGENS	Approved	1
3956	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3963	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3961	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3963	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3965	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	INTERNAL MEDICINE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	INTERNAL MEDICINE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951	INTERNAL MEDICINE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3963	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3962	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3956	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3963	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3961	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	OTEZLA 30MG OR TABS	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	UNSPECIFIED	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	FAMILY PRACTICE	OXYCODONE 10MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3965	PHYSICIAN, SURGERY, GENERAL	OXYCODONE 10MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	OXYCODONE 10MG TABLETS	NARCOTIC ANALGESICS	Approved	2
3964	UNSPECIFIED	OXYCODONE 10MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	OXYCODONE 10MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	OXYCODONE 10MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3956	FAMILY PRACTICE	OXYCODONE 15MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3965	INTERNAL MEDICINE	OXYCODONE 15MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	OXYCODONE 20MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	OXYCODONE 20MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3963	OPHTHALMOLOGY	OXYCODONE 20MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3963	OPHTHALMOLOGY	OXYCODONE 20MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3963	PALLIATIVE MEDICINE	OXYCODONE 20MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	OXYCODONE 20MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3965	FAMILY PRACTICE	OXYCODONE 30MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	OXYCODONE 30MG TABLETS	NARCOTIC ANALGESICS	Denied	2

MARCOTIC ANAL GERICIS   Approved   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
SPRING   UNSPECIFIED	3956	HEMATOLOGY & ONCOLOGY	OXYCODONE 30MG TABLETS	NARCOTIC ANALGESICS	Approved	1
SARR	3956	INTERNAL MEDICINE	OXYCODONE 30MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3962   ANESTHESIOLOGY	3956	UNSPECIFIED	OXYCODONE 30MG TABLETS	NARCOTIC ANALGESICS	Approved	1
Second   PLASTIC SURSERY	3956	UNSPECIFIED	OXYCODONE 30MG TABLETS	NARCOTIC ANALGESICS	Denied	1
SURGERY, ORAL & MAXILLOFACIAL	3962	ANESTHESIOLOGY	OXYCODONE 5MG TABLETS	NARCOTIC ANALGESICS	Approved	1
1   1986   UINSPECIFED	3956	PLASTIC SURGERY	OXYCODONE 5MG TABLETS	NARCOTIC ANALGESICS	Denied	1
Dentist, Surgery, Oral, & MANILLOFACIAL   OXYCODONE BING/BML ORAL SOLUTION   NARCOTIC ANALGESICS   Approved   1	3963	SURGERY, ORAL & MAXILLOFACIAL	OXYCODONE 5MG TABLETS	NARCOTIC ANALGESICS	Denied	1
S964   NEUROLOGY	3965	UNSPECIFIED	OXYCODONE 5MG TABLETS	NARCOTIC ANALGESICS	Approved	1
Approved 1 3986 ANESTHESIOLOGY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3986 FAMILY PRACTICE OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 2 3983 MEDICAL ONCOLOGY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3986 PHYSICIAN, PHYSICIAN, MEDICINE & REHABILITA- OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3986 UNSPECIFIED OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3987 OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3988 UNSPECIFIED OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 ANESTHESIOLOGY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 ANESTHESIOLOGY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 ANESTHESIOLOGY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 ANESTHESIOLOGY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 HAMILY PRACTICE OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 HAMILY PRACTICE OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 NEUROLOGICAL SURGERY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 NEUROLOGICAL SURGERY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 NEUROLOGICAL SURGERY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 NEUROLOGICAL SURGERY OXYCODONE HOL 10MG OR TABS NARCOTIC ANALGESICS Approved 1 3989 NARCOTIC ANALGESICS Approved 2 3989 NARCOTIC ANALGESICS Approved 1 3989 NARCOTIC ANALGESICS Approve	3963	DENTIST, SURGERY, ORAL & MAXILLOFACIAL	OXYCODONE 5MG/5ML ORAL SOLUTION	NARCOTIC ANALGESICS	Denied	1
See   FAMILY PRACTICE	3964	NEUROLOGY	OXYCODONE 5MG/5ML ORAL SOLUTION	NARCOTIC ANALGESICS	Approved	1
Section	3956	ANESTHESIOLOGY	OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
MEDICAL ONCOLOGY  OXYCODONE HCL 10MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3966  PHYSICIAN, PHYSICAL MEDICINE & REHABILTA- TION / PHYSICAL ME	3956	FAMILY PRACTICE	OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICAL MEDIC	3963	FAMILY PRACTICE	OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	2
TION / PHYSIATRY	3963	MEDICAL ONCOLOGY	OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
UNSPECIFIED OXYCODONE HCL 10MG OR TABS NARCOTIC ANALGESICS Approved 1  3951 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 2  3956 FAMILY PRACTICE OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 NEUROLOGICAL SURGERY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3964 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3965 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3967 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3968 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3969 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3961 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3964 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3965 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3967 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3968 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTI	3956		OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 2  3956 FAMILY PRACTICE OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 NEUROLOGICAL SURGERY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3963 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3951 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3964 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3965 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3967 TION / PHYSICAL MEDICINE & REHABILITA- OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3968 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1	3956	UNSPECIFIED	OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
Approved 2 3956 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 FAMILY PRACTICE OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 NEUROLOGICAL SURGERY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3967 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 ANESTHESIOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3960 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3961 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3964 PHYSICIAN, PHYSICAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3965 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3961 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3963 GENERAL PRACTICE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3967 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3968 GENERAL PRACTICE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1	3963	UNSPECIFIED	OXYCODONE HCL 10MG OR TABS	NARCOTIC ANALGESICS	Approved	1
Sample   Family Practice   Oxycodone HCL 15MG or Tabs   NARCOTIC ANALGESICS   Approved   1	3951	ANESTHESIOLOGY	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
HEMATOLOGY & ONCOLOGY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 NEUROLOGICAL SURGERY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3961 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3967 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3960 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3960 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3960 APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED A	3956	ANESTHESIOLOGY	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	2
NEUROLOGICAL SURGERY OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3961 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN EDICINE & REHABILITA- OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3967	3956	FAMILY PRACTICE	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
OXYCODONE HCL 15MG OR TABS   NARCOTIC ANALGESICS   Approved   1	3963	HEMATOLOGY & ONCOLOGY	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 UNSPECIFIED OXYCODONE HCL 15MG OR TABS NARCOTIC ANALGESICS Approved 1 3964 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3965 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3967 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3960 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3960 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3961 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3964 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3965 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1	3963	NEUROLOGICAL SURGERY	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3963 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3951 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3951 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3964 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3965 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3967 OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3968 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3956	UNSPECIFIED	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
Approved 1  3963 ANESTHESIOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3951 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TION / PHYSIATRY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3951 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3964 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3965 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3963	UNSPECIFIED	OXYCODONE HCL 15MG OR TABS	NARCOTIC ANALGESICS	Approved	1
HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3963 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3956	ANESTHESIOLOGY	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3963 HEMATOLOGY & ONCOLOGY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3951 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3963 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3963	ANESTHESIOLOGY	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 INTERNAL MEDICINE OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3951 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2  3963 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1  3956 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3951	HEMATOLOGY & ONCOLOGY	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	1
PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3956  UNSPECIFIED  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3963  UNSPECIFIED  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3963  UNSPECIFIED  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  2  3963  GENERAL PRACTICE  OXYCODONE HCL 30MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3956  INTERNAL MEDICINE  OXYCODONE HCL 30MG OR TABS  NARCOTIC ANALGESICS  Approved  1  Approved  1	3963	HEMATOLOGY & ONCOLOGY	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	1
TION / PHYSIATRY  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3956  UNSPECIFIED  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3951  UNSPECIFIED  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3963  UNSPECIFIED  OXYCODONE HCL 20MG OR TABS  NARCOTIC ANALGESICS  Approved  2  3963  GENERAL PRACTICE  OXYCODONE HCL 30MG OR TABS  NARCOTIC ANALGESICS  Approved  1  3956  INTERNAL MEDICINE  OXYCODONE HCL 30MG OR TABS  NARCOTIC ANALGESICS  Approved  1  Approved  1	3956	INTERNAL MEDICINE	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3963 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3963		OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 UNSPECIFIED OXYCODONE HCL 20MG OR TABS NARCOTIC ANALGESICS Approved 2 3963 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3956	UNSPECIFIED	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3963 GENERAL PRACTICE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3951	UNSPECIFIED	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 INTERNAL MEDICINE OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3963	UNSPECIFIED	OXYCODONE HCL 20MG OR TABS	NARCOTIC ANALGESICS	Approved	2
	3963	GENERAL PRACTICE	OXYCODONE HCL 30MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 UNSPECIFIED OXYCODONE HCL 30MG OR TABS NARCOTIC ANALGESICS Approved 1	3956	INTERNAL MEDICINE	OXYCODONE HCL 30MG OR TABS	NARCOTIC ANALGESICS	Approved	1
	3951	UNSPECIFIED	OXYCODONE HCL 30MG OR TABS	NARCOTIC ANALGESICS	Approved	1

3956 UNSP		Drug Name	Standard Code Description	Decision	Count
	PECIFIED	OXYCODONE HCL 30MG OR TABS	NARCOTIC ANALGESICS	Approved	3
3963 HEMA	1ATOLOGY & ONCOLOGY	OXYCODONE HCL 5MG OR CAPS	NARCOTIC ANALGESICS	Approved	1
3956 ANES	STHESIOLOGY	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 FAMIL	IILY PRACTICE	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 HEMA	1ATOLOGY & ONCOLOGY	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 NEUR	ROLOGICAL SURGERY	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 NEUR	ROLOGICAL SURGERY	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 ORTH	HOPEDIC SURGERY	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3964 OTOL	LARYNGOLOGY	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 PAIN I	MEDICINE	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 SURG	GERY, THORACIC	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 UNSP	PECIFIED	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 UNSP	PECIFIED	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 UNSP	PECIFIED	OXYCODONE HCL 5MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 HEMA	1ATOLOGY & ONCOLOGY	OXYCODONE HCL 5MG/5ML OR SOLN	NARCOTIC ANALGESICS	Approved	1
3956 HEMA	1ATOLOGY & ONCOLOGY	OXYCODONE HCL 5MG/5ML OR SOLN	NARCOTIC ANALGESICS	Approved	1
3963 PALLI	LIATIVE MEDICINE	OXYCODONE HCL 5MG/5ML OR SOLN	NARCOTIC ANALGESICS	Approved	1
3963 PHYSI	SICIAN, SURGERY, GENERAL	OXYCODONE HCL ER 20MG OR T12A	NARCOTIC ANALGESICS	Approved	1
3956 FAMIL	IILY PRACTICE	OXYCODONE HCL ER 40MG OR T12A	NARCOTIC ANALGESICS	Approved	1
3963 FAMIL	IILY PRACTICE	OXYCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 FAMIL	IILY PRACTICE	OXYCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 UNSP	PECIFIED	OXYCODONE-ACETAMINOPHEN 10-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 ANES	STHESIOLOGY	OXYCODONE-ACETAMINOPHEN 7.5-325MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 ANES	STHESIOLOGY	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	3
3956 ANES	STHESIOLOGY	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3963 ANES	STHESIOLOGY	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3951 EMER	RGENCY MEDICINE	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3963 FAMIL	IILY PRACTICE	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3951 HEMA	1ATOLOGY & ONCOLOGY	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956 INTER	RNAL MEDICINE	OXYCODONE-ACETAMINOPHENTAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2
3956 PAIN I	MEDICINE	OXYCODONE-ACETAMINOPHENTAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2
	SICIAN, PHYSICAL MEDICINE & REHABILITA-N / PHYSIATRY	OXYCODONE-ACETAMINOPHEN TAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2
3963 PHYSI	SICIAN, SURGERY, GENERAL	OXYCODONE-ACETAMINOPHENTAB 10-325 MG	NARCOTIC ANALGESICS	Approved	1
3956 UNSP	PECIFIED	OXYCODONE-ACETAMINOPHENTAB 10-325 MG	NARCOTIC ANALGESICS	Approved	2
3963 UNSP	PECIFIED	OXYCODONE-ACETAMINOPHENTAB 10-325 MG	NARCOTIC ANALGESICS	Approved	4
3956 ANES	STHESIOLOGY	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	HEMATOLOGY & ONCOLOGY	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	ORTHOPEDIC SURGERY	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Denied	1
3956	PHYSICIAN, SURGERY, GENERAL	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	3
3956	UNSPECIFIED	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Denied	1
3956	UNSPECIFIED	OXYCODONE-ACETAMINOPHEN TAB 5-325 MG	NARCOTIC ANALGESICS	Approved	3
3956	ANESTHESIOLOGY	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	ANESTHESIOLOGY	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	FAMILY PRACTICE	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	2
3963	INTERNAL MEDICINE	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	NEUROLOGICAL SURGERY	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	PAIN MEDICINE	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	4
3951	UNSPECIFIED	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	OXYCODONE-APAP TAB 7.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) (SEMAGLUTIDE) 2 MG/3ML SUBCUTANEOUS MILLILITER	DIABETIC AGENT	Approved	1
3965	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLUTION PEN-INJECTOR (SEMAGLUTIDE(0.25 OR 0.5MG/DOS))	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	6
3963	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	4
3951	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	1
3969	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	2
3956	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	2
3964	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	5

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	3
3964	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/1.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	197
3963	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	193
3951	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	47
3956	ALLERGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	ALLERGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	CARDIOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3956	EMERGENCY MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	6
3951	CLINICAL NURSE SPECIALIST, ADULT HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	CHIROPRACTOR, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3961	EMERGENCY MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	EMERGENCY MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	6
3951	EMERGENCY MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	5
3951	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3963	FAMILY MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3951	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	4
3956	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	7
3962	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3967	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3961	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	8
3961	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3965	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	5
3963	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	10
3969	FAMILY PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3963	GENERAL PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	GENERAL PRACTICE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	42
3963	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	58
3951	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	16
3964	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3961	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	4
3969	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3956	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	4
3962	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	INTERNAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3963	NEPHROLOGY / RENAL MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NEUROLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	5

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, ACUTE CARE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3969	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3951	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, COMMUNITY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	91
3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	21
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	66
3962	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3969	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	4
3961	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3963	NURSE PRACTITIONER, OBSTETRICS & GYNECOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	17
3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	23
3951	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3961	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	OBSTETRICS & GYNECOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	OPHTHALMOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3951	PEDIATRICS	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	4
3963	PEDIATRICS	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3956	PEDIATRICS	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PEDIATRICS	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	7
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	9
3963	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	4
3956	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	7
3961	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3951	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3963	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	6
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	PHYSICIAN, SURGERY, GENERAL	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PULMONARY DISEASES	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3956	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	187
3951	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	44

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3965	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3963	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	158
3956	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	8
3961	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	4
3969	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3962	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3967	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3963	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	8
3964	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3965	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3951	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3964	UNSPECIFIED	OZEMPIC (0.25 OR 0.5 MG/DOSE) 2MG/3ML SC SOPN	DIABETIC AGENT	Denied	2
3951	FAMILY PRACTICE	OZEMPIC (0.25&0.5) 2MG/3ML PEN	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	OZEMPIC (0.25&0.5) 2MG/3ML PEN	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4 MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR (SEMAGLUTIDE (1 MG/ DOSE))	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	73
3956	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	85
3956	CARDIOLOGY	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	EMERGENCY MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	FAMILY MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	FAMILY MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3964	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3956	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Denied	2
3965	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3961	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	5
3951	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	11
3969	FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	GENERAL PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	25
3963	INTERNAL MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	18
3962	INTERNAL MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3951	INTERNAL MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	6
3961	INTERNAL MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3963	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	33
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	34
3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	5
3964	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	5
3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	9
3951	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	OBSTETRICS & GYNECOLOGY	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3951	PEDIATRICS	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3963	PEDIATRICS	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3956	PEDIATRICS	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	4
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	8
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3956	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3963	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	SPORTS MEDICINE, FAMILY PRACTICE	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	55
3956	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	67
3951	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	15
3969	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3965	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3961	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3956	UNSPECIFIED	OZEMPIC (1 MG/DOSE) 4MG/3ML SC SOPN	DIABETIC AGENT	Denied	1

PAMILY PRACTICE	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
ALLERGY	3956	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	49
CLINICAL NURSE SPECIALIST, FAMILY HEALTH   OZEMPIC 12 MG/DOSE) 8MG/RML SC SOPN   DIABETIC AGENT   Approved   1	3963	ALLERGY	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
Sept	3956	ALLERGY	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
2986   CLINICAL NURSE SPECIALIST, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3983   ENDOCRINOLOGY, DIABETE'S & METABOLISM   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3986   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   2   3981   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Denied   1   3986   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Denied   1   3986   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3986   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   6   3982   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   6   3982   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   6   3983   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3984   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Denied   1   3985   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Denied   1   3986   INTERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   15   3986   INTERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   16   3981   INTERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3986   NITERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3986   NITERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3986   NITERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   1   3986   NITERNAL MEDICINE   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   3   3986   NIRSE PRACTITIONER, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) BMG/GML SC SOPN   DIABETIC AGENT   Approved   3   3986   NIRSE PRACTITIONER, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) BMG/GML	3963	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
Sept	3956	EMERGENCY MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
PAMILY PRACTICE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Denied   1	3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
1991   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Denied   1	3963	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
1996   FAMILY PRACTICE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   1	3963	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	26
3966         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3961         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         6           3962         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3963         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Denied         1           3963         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Denied         2           3963         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         15           3966         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         2           3961         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         2           3951         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Denied         1           3956         NEUROLOGY         OZEMPIC (2 MG/DOSE) BMG/3ML SC SOPN         DIABETIC AGENT         Approved         1 <tr< td=""><td>3951</td><td>FAMILY PRACTICE</td><td>OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN</td><td>DIABETIC AGENT</td><td>Denied</td><td>1</td></tr<>	3951	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3951         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         6           3962         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3963         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Denied         1           3963         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         15           3963         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         15           3961         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         2           3961         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         2           3961         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3963         NEUROLOGY         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3963         NURSE PRACTITIONER, FAMILY HEALTH         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         3	3956	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3962         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3962         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Denied         1           3963         FAMILY PRACTICE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Denied         2           3963         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         16           3966         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         16           3961         INTERNAL MEDICINE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         2           3956         NEUROLOGY         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3951         NURSE PRACTITIONER, ACUTE CARE         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3956         NURSE PRACTITIONER, FAMILY HEALTH         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT         Approved         1           3963         NURSE PRACTITIONER, FAMILY HEALTH         OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN         DIABETIC AGENT <t< td=""><td>3965</td><td>FAMILY PRACTICE</td><td>OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN</td><td>DIABETIC AGENT</td><td>Approved</td><td>1</td></t<>	3965	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
PAPER   PRACTICE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Denied   1	3951	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	6
PAMILY PRACTICE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Denied 2  3983 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 15  3966 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 16  3961 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2  3951 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3966 NEUROLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3951 NURSE PRACTITIONER, ACUTE CARE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 30  3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3963 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2  3966 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3967 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3968 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3969 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3969 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3962	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 15 3956 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 16 3961 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3951 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NEUROLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT DENIED APPROVED 1 3951 NURSE PRACTITIONER, ACUTE CARE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3966 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3962	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3956 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 16 3961 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3951 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NEUROLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Denied 1 3951 NURSE PRACTITIONER, ACUTE CARE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NURSE PRACTITIONER, FAMILLY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 NURSE PRACTITIONER, FAMILLY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 8 3961 NURSE PRACTITIONER, FAMILLY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILLY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILLY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 NURSE PRACTITIONER, FAMILLY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3964 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3965 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3966 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3963	FAMILY PRACTICE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Denied	2
SPECIAL MEDICINE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   2   3951   INTERNAL MEDICINE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   1   3956   NEUROLOGY   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Denied   1   3951   NURSE PRACTITIONER, ACUTE CARE   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   1   3956   NURSE PRACTITIONER, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   3   3963   NURSE PRACTITIONER, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   3   3951   NURSE PRACTITIONER, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   1   3951   NURSE PRACTITIONER, FAMILY HEALTH   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   3   3963   NURSE PRACTITIONER, GERONTOLOGY   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   1   3963   NURSE PRACTITIONER, UNSPECIFIED   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   2   3   3963   NURSE PRACTITIONER, UNSPECIFIED   OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN   DIABETIC AGENT   Approved   3   3   3   3   3   3   3   3   3	3963	INTERNAL MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	15
3951 INTERNAL MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NEUROLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Denied 1 3951 NURSE PRACTITIONER, ACUTE CARE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 30 3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 8 3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3967 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3968 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3956	INTERNAL MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	16
3956 NEUROLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Denied 1 3951 NURSE PRACTITIONER, ACUTE CARE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 30 3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 8 3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3956 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3967 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3968 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3969 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3961	INTERNAL MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
NURSE PRACTITIONER, ACUTE CARE  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3956  NURSE PRACTITIONER, FAMILY HEALTH  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  30 3963  NURSE PRACTITIONER, FAMILY HEALTH  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  8 3961  NURSE PRACTITIONER, FAMILY HEALTH  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3951  NURSE PRACTITIONER, FAMILY HEALTH  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  3 3963  NURSE PRACTITIONER, GERONTOLOGY  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3963  NURSE PRACTITIONER, UNSPECIFIED  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  2 3956  NURSE PRACTITIONER, UNSPECIFIED  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  3 3963  PEDIATRICS  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3966  PHYSICIAN ASSISTANT, UNSPECIFIED  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3966  PHYSICIAN ASSISTANT, UNSPECIFIED  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3966  PHYSICIAN ASSISTANT, UNSPECIFIED  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 3966  PHYSICIAN ASSISTANT, UNSPECIFIED  OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN  DIABETIC AGENT  Approved  1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	3951	INTERNAL MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3966 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 30 3963 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3956 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3964 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3965 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3956	NEUROLOGY	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3966 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3951	NURSE PRACTITIONER, ACUTE CARE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3961 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3951 NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3956 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	30
NURSE PRACTITIONER, FAMILY HEALTH OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2  NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3  PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	8
NURSE PRACTITIONER, GERONTOLOGY OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2 3956 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3961	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3  NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3  PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1  PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3956 NURSE PRACTITIONER, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 3 3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3963	NURSE PRACTITIONER, GERONTOLOGY	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963 PEDIATRICS OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	3
3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 2	3963	PEDIATRICS	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	2
	3963	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3956	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 1	3956	PHYSICIAN, SURGERY, GENERAL	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956 UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 29	3956	UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	29
3963 UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 19	3963	UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	19
3951 UNSPECIFIED OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN DIABETIC AGENT Approved 6	3951	UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	6

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Denied	1
3964	UNSPECIFIED	OZEMPIC (2 MG/DOSE) 8MG/3ML SC SOPN	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	77
3969	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	7
3963	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	59
3963	ALLERGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3969	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	12
3964	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	28
3963	ANESTHESIOLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	CLINICAL NURSE SPECIALIST, ADULT HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3962	CLINICAL NURSE SPECIALIST, ADULT HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	CARDIOLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3969	EMERGENCY MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3969	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	FAMILY MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3964	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	9
3951	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	10
3965	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	36
3967	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3965	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	13
3962	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	10
3962	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	6
3951	FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3967	GASTROENTEROLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3964	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	5
3965	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	5
3963	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	22
3969	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	4
3963	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	12
3965	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	7
3962	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	5
3964	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	3
3969	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3967	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3967	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	INTERNAL MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3963	NURSE MIDWIFE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3962	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, COMMUNITY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3965	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	6
3965	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	6
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	52
3962	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	3
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	11
3964	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	11
3962	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3964	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	9
3969	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3967	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	14
3965	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3965	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	4
3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	4
3951	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3964	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	4
3969	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3962	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	NURSE PRACTITIONER, WOMEN'S HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	OBSTETRICS & GYNECOLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	OBSTETRICS & GYNECOLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3965	OBSTETRICS & GYNECOLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	PEDIATRICS	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3965	PEDIATRICS	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	5

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	3
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3963	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3963	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3964	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	PHYSICIAN, SURGERY, GENERAL	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3962	PHYSICIAN, SURGERY, GENERAL	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	PHYSICIAN, SURGERY, GENERAL	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3969	PLASTIC SURGERY	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	PULMONARY DISEASES	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3965	SPORTS MEDICINE, FAMILY PRACTICE	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	10
3963	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	57
3969	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3965	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	12
3963	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	124
3964	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	18
3969	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	10
3965	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	23
3964	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	14
3967	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3962	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Denied	6
3962	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	7
3951	UNSPECIFIED	OZEMPIC (SEMAGLUTIDE)	DIABETIC AGENT	Approved	3
3963	FAMILY PRACTICE	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	3
3961	FAMILY PRACTICE	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	1
3965	INTERNAL MEDICINE	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	1
3963	INTERNAL MEDICINE	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	2
3963	UNSPECIFIED	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	OZEMPIC 1 MG/DOSE (4 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC 1 MG/DOSE (4 MG/3 ML) SUBCUTANEOUS PEN INJECTOR (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	OZEMPIC 1 MG/DOSE(4 MG/3 ML) PEN INJECTOR	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	OZEMPIC 2/1.5 INJECTION	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	OZEMPIC 2MG/1.5ML	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC 2MG/1.5ML	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	OZEMPIC 2MG/1.5ML PEN	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	OZEMPIC 2MG/3ML PEN	DIABETIC AGENT	Approved	1
3951	UNSPECIFIED	OZEMPIC 2MG/3ML PEN	DIABETIC AGENT	Denied	1
3963	UNSPECIFIED	OZEMPIC 2MG/3ML PEN-INJECTOR (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	FAMILY PRACTICE	OZEMPIC 4MG/3ML PEN	DIABETIC AGENT	Denied	2
3956	FAMILY PRACTICE	OZEMPIC 4MG/3ML PEN	DIABETIC AGENT	Approved	1
3963	GENERAL PRACTICE	OZEMPIC 4MG/3ML PEN	DIABETIC AGENT	Denied	1
3963	PEDIATRICS	OZEMPIC 4MG/3ML PEN	DIABETIC AGENT	Denied	1
3963	PSYCHIATRY	OZEMPIC 4MG/3ML PEN	DIABETIC AGENT	Denied	1
3956	UNSPECIFIED	OZEMPIC 4MG/3ML PEN	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	OZEMPIC 8MG/3ML	DIABETIC AGENT	Denied	1
3956	FAMILY PRACTICE	OZEMPIC 8MG/3ML PEN	DIABETIC AGENT	Denied	1
3951	FAMILY PRACTICE	OZEMPIC 8MG/3ML PEN	DIABETIC AGENT	Denied	1
3956	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	135
3963	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	25
3963	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	52
3956	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	117
3956	CARDIOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	EMERGENCY MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3956	ANESTHESIOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	CLINICAL NURSE SPECIALIST, ADULT HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	CARDIOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	CARDIOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	CARDIOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, EMERGENCY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	EMERGENCY MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	EMERGENCY MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	EMERGENCY MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	FAMILY MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	FAMILY MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	6
3961	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3961	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3951	FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	9
3956	GENERAL PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3956	GENERAL PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	GENERAL PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3951	GENERAL PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	HEMATOLOGY & ONCOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3956	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	47
3951	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	4
3963	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	10
3963	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	5
3956	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	30
3961	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3961	INTERNAL MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3956	NEUROLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	NURSE PRACTITIONER, ACUTE CARE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	3
3956	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	5
3956	NURSE PRACTITIONER, ADULT HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	5
3956	NURSE PRACTITIONER, COMMUNITY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	64
3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	5
3956	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	55
3951	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	17

8480         NIRSE PRACTITIONER, PAMILY HEATH         OTEMPIC IN ISENABLUT DEI         DABETIC AGENT         Aprovad         5           3891         NURSE PRACTITIONER, PAMILY HEATH         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Aprovad         1           3893         NURSE PRACTITIONER, PAMILY HEATH         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Aprovad         1           3893         NURSE PRACTITIONER, CREDITO COY         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Aprovad         1           3893         NURSE PRACTITIONER, URSPROERIE         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Aprovad         1           3893         NURSE PRACTITIONER, URSPROERIE         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Dereid         1           3893         NURSE PRACTITIONER, URSPROERIE         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Dereid         1           3893         NURSE PRACTITIONER, URSPROERIE         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Dereid         1           3893         NURSE PRACTITIONER, VORNEN SHALLH         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Dereid         2           3893         OSTETICIS & VORNEOLOGY         OZEMPIC INI SENABLUT DEI         DABETIC AGENT         Dereid         2 <th>Carrier</th> <th>Prescriber Primary Specialty Description</th> <th>Drug Name</th> <th>Standard Code Description</th> <th>Decision</th> <th>Count</th>	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
986         NURSE PRACTITIONER, ROMILY HEALTH         OZEMPIC NU SERMACUTION         COMBRICAL SCHARD UTION         DARBET AGENT         Approvad         1           386         NURSE PRACTITIONER, ROSTETE OS SYNEODO         OZEMPIC NU SERMAGUTION         DARBET AGENT         Approvad         1           3898         NURSE PRACTITIONER, RUSPECERD         OZEMPIC NU SERMAGUTION         DARBET AGENT         Approvad         1           3863         NURSE PRACTITIONER, RUSPECERD         OZEMPIC NU SERMAGUTION         DARBET AGENT         Denied         1           3863         NURSE PRACTITIONER, RUSPECERD         OZEMPIC NU SERMAGUTION         DARBET AGENT         Denied         1           3863         NURSE PRACTITIONER, RUSPECERD         OZEMPIC NU SERMAGUTION         DARBET AGENT         Denied         1           3863         NURSE PRACTITIONER, RUSPECERD         OZEMPIC NU SERMAGUTION         DARBET AGENT         Denied         2           3863         NURSE PRACTITIONER, RUSPECERD         OZEMPIC NU SERMAGUTION         DARBET AGENT         Denied         2           3863         ORSTETRICS & ROYNEOU GOY         OZEMPIC NU SERMAGUTION         DARBET AGENT         Denied         2           3863         ORSTETRICS & ROYNEOU GOY         OZEMPIC NU SERMAGUTION         DARBET AGENT         DARBET AGENT <t< td=""><td>3963</td><td>NURSE PRACTITIONER, FAMILY HEALTH</td><td>OZEMPIC INJ (SEMAGLUTIDE)</td><td>DIABETIC AGENT</td><td>Approved</td><td>5</td></t<>	3963	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	5
896         NURSE PRACTITIONER, GERONTOLOGY         OFFMENDLINISK MAGUITOFI         DARRET AGENT         Permode         1           393         NUSSE PRACTITIONER, UNSPECIFIED         OZEMBECHNISSK MAGUITOFI         DARRET AGENT         Approved         1           3866         NUSSE PRACTITIONER, UNSPECIFIED         OZEMBECHNISSK MAGUITOFI         DARRET CAGENT         Devised         1           3863         NUSSE PRACTITIONER, UNSPECIFIED         OZEMBECHNISSK MAGUITOFI         DARRET CAGENT         Devised         1           3863         NUSSE PRACTITIONER, UNSPECIFIED         OZEMBECHNISSK MAGUITOFI         DIABET CAGENT         Opened         1           3863         NUSSE PRACTITIONER, UNSPECIFIED         OZEMBECHNISSK MAGUITOFI         DIABET CAGENT         Opened         1           3863         NUSSE PRACTITIONER, WORNER'S FEALTH         OZEMBECHNISSK MAGUITOFI         DIABET CAGENT         Opened         1           3963         OSSTETRICS & ONECOLOGY         OZEMBECHNISSK MAGUITOFI         DIABET CAGENT         Opened         2           3963         OSSTETRICS & ONECOLOGY         OZEMBECHNISSK MAGUITOFI         DIABET CAGENT         Opened         2           3963         OSSTETRICS & ONECOLOGY         OZEMBECHNISSK MAGUITOFI         DIABET CAGENT         Opened         1	3961	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
8933         NINSE PRACTITIONER OBSTETRICS & GYNECOLO OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Approvad         1           9566         NURSE PRACTITIONER UNSPECIFED         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Approvad         11           9566         NURSE PRACTITIONER UNSPECIFED         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Denied         3           9561         NURSE PRACTITIONER, UNSPECIFED         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Denied         3           9562         NURSE PRACTITIONER, UNSPECIFED         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Denied         1           9563         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Denied         1           9564         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Denied         1           9565         ORSTETRICS & CYNECOLOGY         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Denied         1           9566         ORSTETRICS & CYNECOLOGY         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Approvad         1           9561         ORSTETRICS & CYNECOLOGY         OZEMPIC NU GEMAGLUTIDE)         DIABETIC AGENT         Approvad         1 <tr< td=""><td>3961</td><td>NURSE PRACTITIONER, FAMILY HEALTH</td><td>OZEMPIC INJ (SEMAGLUTIDE)</td><td>DIABETIC AGENT</td><td>Approved</td><td>1</td></tr<>	3961	NURSE PRACTITIONER, FAMILY HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
585         OXY         OXY PREFIXE MERCHANDED         OXEMPTICAL MERCHANDED         PREFIXE MERCHANDED         Approved         1           3986         NURSE PRACTITIONER, UNSPECIFED         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3983         NURSE PRACTITIONER, UNSPECIFED         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3983         NURSE PRACTITIONER, UNSPECIFED         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3986         NURSE PRACTITIONER, UNSPECIFED         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3988         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3988         OSESTETICS & GYNECOLOGY         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3983         OSESTETICS & GYNECOLOGY         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3983         OSESTETICS & GYNECOLOGY         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3984         OSESTETICS & GYNECOLOGY         OZEMPTIC NU SEMAGLUTIDE)         DIABETIC AGENT         Approved         1<	3956	NURSE PRACTITIONER, GERONTOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3886         NURSE PRACTITIONER, UNSPECHED         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Denied         3           3893         NURSE PRACTITIONER, UNSPECHED         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Denied         3           3894         NURSE PRACTITIONER, UNSPECHED         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Denied         1           3896         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Denied         1           3896         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Denied         1           3996         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Denied         2           3983         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Approved         1           3986         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Approved         1           3986         OSTETRICA SA GYNECOLOGY         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Approved         1           3986         OSTETRICA SA GYNECOLOGY         OZEMPIC INJ ISBAGLUTIDEI         DIABETIC AGENT         Approved         1 <t< td=""><td>3963</td><td></td><td>OZEMPIC INJ (SEMAGLUTIDE)</td><td>DIABETIC AGENT</td><td>Approved</td><td>1</td></t<>	3963		OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
883         NURSE PRACTITIONER, UNSPECIFIED         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3961         NURSE PRACTITIONER, UNSPECIFIED         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3963         NURSE PRACTITIONER, VINSPECIFIED         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3966         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3968         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3968         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3968         OBSTETRICS & GYNECOLOGY         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3969         OSTEDPATHIC MAINTEULATE MEDICINE         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3960         OSTEDPATHIC MAINTEULATE MEDICINE         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3961         PEDIATRICS         OZEMPIC NI ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1	3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	11
3851         NURSE PRACTITIONER, UNSPECIFED         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Deried         1           3863         NURSE PRACTITIONER, UNSPECIFED         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Approved         1           3863         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Denied         1           3863         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Denied         2           3863         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Denied         2           3863         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Approved         1           3863         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Approved         1           3863         OSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Approved         1           3864         OSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Approved         1           3868         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE         DIABETIC AGENT         Approved         1	3956	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	14
8983         NURSE PRACTITIONER, UNSPECIFIED         OZEMPIC INJ ISEMAGLUTIDE)         DABBETIC AGENT         Approved         1           3966         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NJ ISEMAGLUTIDE)         DABBETIC AGENT         Denied         1           3963         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3966         OBSTETRICS & GYNECOLOGY         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3963         OBSTETRICS & GYNECOLOGY         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Operived         2           3966         OPHTHALIMOLOGY         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Oproved         1           3966         OSTEOPRINC MAINPULATIVE MEDICINE         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Oproved         1           3967         PEDIATRICS         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Oproved         1           3961         PEDIATRICS         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Oproved         1           3961         PEDIATRICS         OZEMPIC NJ ISEMAGLUTIDE)         DIABETIC AGENT         Oproved         1           3961         PEDIATRICS	3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
3966         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Denied         1           3863         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Denied         1           3863         DISTETRICS & GYNECOLOGY         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Denied         2           3863         OBSTETRICS & GYNECOLOGY         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Approved         2           3863         OBSTETRICS & GYNECOLOGY         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Approved         1           3866         OPHITAL MOLOGY         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Approved         1           3866         OSTEOPRITICIS MANIPULATIVE MEDICINE         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Denied         1           3863         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Approved         2           3861         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         Approved         2           3861         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDES         DIABETIC AGENT         DENIED         2           3862         PHYSICIAN ASSIS	3951	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3983         NURSE PRACTITIONER, WOMEN'S HEALTH         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3989         OBSTETRICS & GYNECOLOGY         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3983         OBSTETRICS & GYNECOLOGY         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3986         OBSTETRICS & GYNECOLOGY         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3986         OFFITAL MOLOGY         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3986         OSTEOPRATHIC MANIPULATIVE MEDICINE         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3986         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3981         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3986         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3981         PEDIATRICS         OZEMPIC IN ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3986         PHYSICIAN ASSISTANT, UNSPECIFIED	3963	NURSE PRACTITIONER, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3966         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         2           3963         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3963         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3966         OPHITALMOLOGY         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3968         POLIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3969         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3961         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3961         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3961         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         8           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         4           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         O	3956	NURSE PRACTITIONER, WOMEN'S HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3963         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3966         OPHTHALMOLOGY         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3966         OSTEOPATHIC MANIPULATIVE MEDICINE         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3966         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3963         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3961         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3961         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         8           3966         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3961         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         3           3961         PHYSICIAN ASSISTANT,	3963	NURSE PRACTITIONER, WOMEN'S HEALTH	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963         OBSTETRICS & GYNECOLOGY         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3966         OPHTHALMOLOGY         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3966         OSTEOPATHIC MANIPULATIVE MEDICINE         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Dened         1           3963         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3951         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3951         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3951         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3951         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3956         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         8           3951         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         3           3963         PHYSICIAN ASSISTANT, UNSPECIFIED	3956	OBSTETRICS & GYNECOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3956         OPHTHALMOLOGY         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3956         OSTEOPATHIC MANIPULATIVE MEDICINE         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3956         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3963         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3951         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3951         PEDIATRICS         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3956         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         8           3953         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3963         PHYSICIAN, ASSISTANT, UNSPECIFIED         OZEMPIC INJ (SEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3963         PHYS	3963	OBSTETRICS & GYNECOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	2
3956         OSTEOPATHIC MANIPULATIVE MEDICINE         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3956         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3963         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3951         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3951         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3951         PEDIATRICS         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         1           3956         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         8           3951         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Denied         8           3953         PHYSICIAN ASSISTANT, UNSPECIFIED         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         2           3953         PHYSICIAN, ASSISTANT, UNSPECIFIED         OZEMPIC INJ ISEMAGLUTIDE)         DIABETIC AGENT         Approved         1           3953         PHYSICIAN,	3963	OBSTETRICS & GYNECOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3966PEDIATRICSOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied13963PEDIATRICSOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTApproved23951PEDIATRICSOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTApproved13961PEDIATRICSOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied13956PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTApproved83956PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied83961PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied13963PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied33951PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTApproved23963PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTApproved13964PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTApproved43965PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied53966PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied13961PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENTDenied13966PHYSICIAN, GERIATRIC MEDICINEOZEMPIC INJ ISEMAGLUTIDE)DIABETIC AGENT	3956	OPHTHALMOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
PEDIATRICS OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3951 PEDIATRICS OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3951 PEDIATRICS OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 8  3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3964 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3965 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT APPROVED 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT APPROVED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT APPROVED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1  3966 PHYSICIAN, SURGERY, GENERAL DENIED 1  3966 PH	3956	OSTEOPATHIC MANIPULATIVE MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
9561 PEDIATRICS OZEMPIC INJ ISEMAGLUTIDE) DIABETIC AGENT Approved 1 3951 PEDIATRICS OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 8 3956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 8 3951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 3 3951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 3 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 2 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5 3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3956	PEDIATRICS	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951     PEDIATRICS     OZEMPIC INI (SEMAGLUTIDE)     DIABETIC AGENT     Denied     1       3956     PHYSICIAN ASSISTANT, UNSPECIFIED     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Approved     8       3956     PHYSICIAN ASSISTANT, UNSPECIFIED     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     8       3951     PHYSICIAN ASSISTANT, UNSPECIFIED     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     1       3963     PHYSICIAN ASSISTANT, UNSPECIFIED     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     3       3951     PHYSICIAN ASSISTANT, UNSPECIFIED     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     3       3951     PHYSICIAN ASSISTANT, UNSPECIFIED     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Approved     2       3963     PHYSICIAN, ENDOCRINOLOGY     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Approved     1       3956     PHYSICIAN, ENDOCRINOLOGY     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     5       3951     PHYSICIAN, ENDOCRINOLOGY     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     1       3956     PHYSICIAN, ENDOCRINOLOGY     OZEMPIC INJ (SEMAGLUTIDE)     DIABETIC AGENT     Denied     1       3956     PHYSICIAN, ENDOCRINOLOGY     OZEMPIC INJ (SEMAGLUTIDE)	3963	PEDIATRICS	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3956PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTApproved83956PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied13961PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied13963PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTApproved23963PHYSICIAN ASSISTANT, UNSPECIFIEDOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTApproved13966PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTApproved43956PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied53951PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied13961PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied13966PHYSICIAN, ENDOCRINOLOGYOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied13966PHYSICIAN, GERIATRIC MEDICINEOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTApproved13966PHYSICIAN, GERIATRIC MEDICINEOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTApproved13966PHYSICIAN, SURGERY, GENERALOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied13966PHYSICIAN, SURGERY, GENERALOZEMPIC INJ (SEMAGLUTIDE)DIABETIC AGENTDenied1	3951	PEDIATRICS	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
9956 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 8 3951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 3 3951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 2 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4 3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5 3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3951	PEDIATRICS	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 3 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 2 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4 3966 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 5 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3966 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3966 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	8
PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 3  9951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 2  3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4  3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5  3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3956 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED DENIED DENIED DENIED 1  3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED DENIED 1  3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED DENIED DENIED 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	8
9951 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 2 3963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4 3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5 3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, PHYSICAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- INDOCRINOLOGY DEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- INDOCRINOLOGY DEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
9963 PHYSICIAN ASSISTANT, UNSPECIFIED OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4 3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5 3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, PHYSICIAN MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, PHYSICIAN MEDICINE & REHABILITA- INDICATE AGENT DIABETIC	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	3
PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 4  3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5  3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	2
3956 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 5 3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, PHYSICIAL MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY DENIED DIABETIC AGENT DENIED 1 3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT DENIED 1	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
3951 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, PHYSICIAN PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3956	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	4
3961 PHYSICIAN, ENDOCRINOLOGY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3956	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	5
3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1 3956 PHYSICIAN, PHYSICIAN MEDICINE & REHABILITA- TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1 3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE)	3951	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956 PHYSICIAN, GERIATRIC MEDICINE OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1  3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3961	PHYSICIAN, ENDOCRINOLOGY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1  3956 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Denied 1	3956	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
TION / PHYSIATRY  OZEMPIC INJ (SEMAGLUTIDE)  DIABETIC AGENT  Denied  1  3956  PHYSICIAN, SURGERY, GENERAL  OZEMPIC INJ (SEMAGLUTIDE)  DIABETIC AGENT  Denied  1	3956	PHYSICIAN, GERIATRIC MEDICINE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1
	3956		OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3951 PHYSICIAN, SURGERY, GENERAL OZEMPIC INJ (SEMAGLUTIDE) DIABETIC AGENT Approved 1	3956	PHYSICIAN, SURGERY, GENERAL	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
	3951	PHYSICIAN, SURGERY, GENERAL	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PSYCHIATRY	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	REGISTERED NURSE, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	4
3963	REGISTERED NURSE, UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	SPORTS MEDICINE, FAMILY PRACTICE	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	124
3963	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	52
3956	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	139
3951	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	16
3963	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	20
3961	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	3
3951	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Approved	4
3961	UNSPECIFIED	OZEMPIC INJ (SEMAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	UNSPECIFIED	PANTOPRAZOLE SODIUM 40MG TABLETS	PROTON PUMP INHIBITOR	Denied	1
3956	FAMILY PRACTICE	PANTOPRAZOLE TAB 40MG	PROTON PUMP INHIBITOR	Approved	1
3963	DENTIST, UNSPECIFIED	PENCICLOVIR	ANTIVIRALS	Approved	1
3963	UNSPECIFIED	PENCICLOVIR	ANTIVIRALS	Approved	1
3963	FAMILY PRACTICE	PENTAZOCINE-NALOXONE 50-0.5MG TABLETS	OPIOID ANALGESICS	Approved	1
3964	DERMATOLOGY	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3969	DERMATOLOGY	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3962	DERMATOLOGY	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3951	DERMATOLOGY	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Denied	1
3969	ALLERGY & IMMUNOLOGY	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3964	FAMILY PRACTICE	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3963	NEPHROLOGY / RENAL MEDICINE	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	2
3969	UNSPECIFIED	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Denied	1
3963	UNSPECIFIED	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Denied	2
3969	UNSPECIFIED	PIMECROLIMUS	DERMATOLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	PIMECROLIMUS 1 % TOPICAL CREAM (ELIDEL)	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	PIMECROLIMUS 1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3951	DERMATOLOGY	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3963	DERMATOLOGY	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	4
3956	DERMATOLOGY	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3963	ALLERGY & IMMUNOLOGY	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	PEDIATRICS	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3963	UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3963	UNSPECIFIED	PIMECROLIMUS 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	4
3963	DERMATOLOGY	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	3
3956	DERMATOLOGY	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	2
3961	FAMILY PRACTICE	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	2
3956	FAMILY PRACTICE	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	2
3956	OBSTETRICS & GYNECOLOGY	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	PEDIATRICS	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Denied	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	3
3956	UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Denied	2
3956	UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Approved	4
3963	UNSPECIFIED	PIMECROLIMUS CREAM	DERMATOLOGICAL AGENTS	Denied	1
3963	PULMONARY DISEASES	PIRFENIDONE	ANTIFIBROTIC AGENT	Approved	1
3963	UNSPECIFIED	PIRFENIDONE	ANTIFIBROTIC AGENT	Approved	1
3963	UNSPECIFIED	PLEGRIDY	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	HEMATOLOGY	POMALYST	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	POMALYST	ANTINEOPLASTICS	Approved	2
3963	UNSPECIFIED	POMALYST	ANTINEOPLASTICS	Approved	1
3956	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	7
3956	CARDIOLOGY	PRALUENT	LIPOTROPICS	Approved	6
3956	CARDIOLOGY	PRALUENT	LIPOTROPICS	Denied	10
3951	CARDIOLOGY	PRALUENT	LIPOTROPICS	Denied	3
3956	CARDIOLOGY, INTERVENTIONAL	PRALUENT	LIPOTROPICS	Denied	1
3961	CARDIOLOGY	PRALUENT	LIPOTROPICS	Approved	1
3963	CARDIOLOGY	PRALUENT	LIPOTROPICS	Denied	4

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	CARDIOLOGY	PRALUENT	LIPOTROPICS	Approved	1
3963	CARDIOLOGY, INTERVENTIONAL	PRALUENT	LIPOTROPICS	Denied	1
3961	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	1
3963	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	3
3951	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	2
3956	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Approved	1
3956	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Denied	6
3956	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Approved	1
3963	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Denied	5
3963	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	PRALUENT	LIPOTROPICS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	PRALUENT	LIPOTROPICS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PRALUENT	LIPOTROPICS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	1
3951	NURSE PRACTITIONER, UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	1
3956	UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	15
3956	UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	7
3951	UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	1
3961	UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	1
3961	UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	2
3963	UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	3
3963	UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	1
3951	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	12
3963	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	3
3963	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	4
3956	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	9
3956	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	19
3963	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	4
3965	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	5
3956	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	4
3962	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3964	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3951	ANESTHESIOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3963	EMERGENCY MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	EMERGENCY MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3963	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	10
3964	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3961	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	2
3962	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3969	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	5
3969	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3951	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3965	FAMILY PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	GENERAL PRACTICE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	4
3965	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	3
3969	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3969	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3964	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3961	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3963	INTERNAL MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3963	NEUROLOGICAL SURGERY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3967	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3965	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3964	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	3
3963	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	2
3963	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	2
3951	NEUROLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN	NEUROLOGICAL AGENTS	Denied	8
3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN	NEUROLOGICAL AGENTS	Denied	4
3962	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN	NEUROLOGICAL AGENTS	Approved	3
3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3965	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	3
3951	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3963	OBSTETRICS & GYNECOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	ORTHOPEDIC SURGERY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	4
3963	ORTHOPEDIC SURGERY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	PHYSICIAN, ANESTHESIOLOGY, PAIN MANAGEMENT	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3951	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3969	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	2
3963	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3963	PODIATRIST, PRIMARY MEDICINE	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3963	PODIATRIST, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	PSYCHIATRY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3963	PSYCHIATRY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	RHEUMATOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3956	RHEUMATOLOGY	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3963	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	22
3963	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	10
3956	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	12
3956	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	34
3962	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	2
3965	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	3
3965	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	2
3951	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	12
3951	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	4
3964	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Approved	1
3964	UNSPECIFIED	PREGABALIN	NEUROLOGICAL AGENTS	Denied	1
3956	ANESTHESIOLOGY	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	4
3956	FAMILY PRACTICE	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	4
3951	FAMILY PRACTICE	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1

8886         GRAFMER PRACTICIF         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3983         NEUROLOGICAL SURGERY         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3983         NEUROLOGY         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3983         NEUROLOGY         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3983         NURSE PRACTITIONER, MAILY HEALTH         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3985         PRINCIPAL SASSISTANT, UNSPECIFIED         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3985         PRINCIPAL SASSISTANT, UNSPECIFIED         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3983         PRINCIPAL PRINCIPAL PRINCIPAL         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3985         PRINCIPAL PRINCIPAL         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         1           3985         PRINCIPAL PRINCIPAL         PREGRADAL NIONGO FICAPS         NEUROLOGICAL AGENTS         Approved         2	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
9881         NEUROLOCY         PRECABALIN YROMG OR CARS         NEUROLOCY ALPENTS         Approved         1           3883         NEUROLOCY         PRECABALIN YROMG OR CARS         NEUROLOCICAL ACENTS         Approved         1           3883         NURSE PRACTITIONER, DANICH FEATH         PRECABALIN YROMG OR CARS         NEUROLOGICAL ACENTS         Approved         1           3896         NUMB PRACTITIONER, UNSPECIFIED         PRECABALIN YROMG OR CARS         NEUROLOGICAL ACENTS         Approved         1           3961         PHYSICARA ASSISTANT, UNSPECIFIED         PRECABALIN YROMG OR CARS         NEUROLOGICAL ACENTS         Approved         1           3963         PHYSICARA ASSISTANT, UNSPECIFIED         PRECABALIN YROMG OR CARS         NEUROLOGICAL AGENTS         Approved         1           3963         PHYSICARA PROSECRAL PRECIDENT REPRAIRLITION         PRECABALIN YROMG OR CARS         NEUROLOGICAL AGENTS         Approved         1           3965         PHYSICARA PROSECRAL PRECIDENT REPRAIRLITION         PRECABALIN YROMG OR CARS         NEUROLOGICAL AGENTS         Approved         1           3966         PRECABALIN YROMG OR CARS         NEUROLOGICAL AGENTS         Approved         1           3961         UNSPECIFIED         PRECABALIN YROMG OR CARS         NEUROLOGICAL AGENTS         Approved         1	3956	GENERAL PRACTICE	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3883         NEUROLOCY         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3883         NURSE PRACTITIONER, PARMILY HEALTH         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3886         PARIS PRACTITIONER, UNSECRIFED         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3896         PARIS CANA SSISTANT, UNSECRIFED         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3896         PHYSICIAN ASSISTANT, UNSECRIFED         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3896         PHYSICIAN ASSISTANT UNSECRIFED         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3996         PHYSICIAN ASSISTANT UNSECRIFED         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3996         PHYSICIAN ASSISTANT UNSECRIFED         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3996         PHYSICIAN SESTIMAT         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3996         PREGABALIN 100MIG OR CAPS         NEUROLOGICAL AGENTS         Approved	3963	INTERNAL MEDICINE	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3
SMESI         NURSE PRACTITIONER, FAMILY HEALTH         PRECABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3983         NURSE PRACTITIONER, UNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3966         PAN NEDICINE         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3961         PHYSICIAN ASSISTANT LUNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3961         PHYSICIAN ASSISTANT LUNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3963         PHYSICIAN ASSISTANT LUNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3960         PHYSICIAN ASSISTANT LUNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3960         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3961         UNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3961         UNSPECIFED         PREGABALIN TOMOG OR CAPS         NEUROLOGICAL ACENTS         Approved         2	3963	NEUROLOGICAL SURGERY	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
1985   NURSE PRACTITIONER, UNSPECIFIED   PREGABALIN 100MG OR CAPS   NEUROLOGICAL AGENTS   Approved   1   1   1   1   1   1   1   1   1	3963	NEUROLOGY	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
8986         PAIN MEDICNE         PREGABALIN 100MG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3998         PHYSICAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3981         PHYSICAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL ACENTS         Approved         1           3983         PHYSICAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         PHYSICAN PHYSICAL MEDICINE & REHABILITAD         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         RIFLUMATOLOGY         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         0           3987         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3983         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3981         LAMILY PRACTICE         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3981         ANESTHESIOLOGY         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1      <	3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3866         PHYSICIAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3951         PHYSICIAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3868         PHYSICIAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3868         PHYSICIAN, PHYSICAL MEDICINE & REHABILITATA         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3868         RIEUMATOLOGY         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3861         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3861         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3861         FAMILY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3861         ANESTHESIOLOGY         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3861         FAMILY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1 <td>3963</td> <td>NURSE PRACTITIONER, UNSPECIFIED</td> <td>PREGABALIN 100MG OR CAPS</td> <td>NEUROLOGICAL AGENTS</td> <td>Approved</td> <td>1</td>	3963	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3851         PHYSICIAN ASSISTANT UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3863         PHYSICIAN ASSISTANT, UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3863         PHYSICIAN, PHYSICAL MEDIGINE & REHABILITA         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3866         RIFUMATOLOGY         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3867         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3863         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3863         UNSPECIFIED         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3861         FAMILY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3861         ANESTHESIOLOGY         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3863         FAMILY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1	3956	PAIN MEDICINE	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
39863         PHYSICIAN ASSISTANT UNSPECIFED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           39866         PHYSICIAN, PHYSICIAN MEDICINE & REHABILITA         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         RHEUMATOLOGY         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         6           3981         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3982         UNSPECIFIED         PREGABALIN 100MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3981         FAMILY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3981         ANESTHESIOLOGY         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3981         ANIEY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3983         FAMILY PRACTICE         PREGABALIN 150MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           39861	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
PHYSICAN, PHYSICAL MEDICINE & REHABILTA-   PREGABALIN 100MG OR CAPS   NEUROLOGICAL AGENTS   Approved   1	3951	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
TION / PHYSIATRY PRESARAIN IONING OR CAPS NEUROLOGICAL AGENTS Approved I 1 3966 RHEUMATOLOGY PREGABALIN 100MG OR CAPS NEUROLOGICAL AGENTS Approved 6 3961 UISSPECIFIED PREGABALIN 100MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 UISSPECIFIED PREGABALIN 100MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 UISSPECIFIED PREGABALIN 100MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3961 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3966 ANESTHESIOLOGY PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3966 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3966 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3966 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3961 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3964 FAMILY PRACTICE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3965 INTERNAL MEDICINE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3966 INTERNAL MEDICINE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3967 SINTERNAL MEDICINE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3968 NEUROLOGICAL AGENTS Approved 1 3969 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3969 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 2 3960 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3960 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3960 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3961 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3961 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3961 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3961 NURSE PRACTITIONER, F	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 100MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
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956 INTERNAL MEDICINE PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1 3963 NEUROLOGY PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 2 3963 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 3 3969 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1 3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1 3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3956	INTERNAL MEDICINE	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3
NEUROLOGY  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  1  3966  NURSE PRACTITIONER, FAMILY HEALTH  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  2  3963  NURSE PRACTITIONER, FAMILY HEALTH  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  3  3969  NURSE PRACTITIONER, FAMILY HEALTH  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  1  3956  NURSE PRACTITIONER, FAMILY HEALTH  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Denied  1  3951  NURSE PRACTITIONER, FAMILY HEALTH  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  1  3951  NURSE PRACTITIONER, UNSPECIFIED  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  1  3951  PHYSICIAN ASSISTANT, UNSPECIFIED  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  1  3963  PHYSICIAN ASSISTANT, UNSPECIFIED  PREGABALIN 150MG OR CAPS  NEUROLOGICAL AGENTS  Approved  1  Approved  1	3963	INTERNAL MEDICINE	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 2 3963 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 3 3969 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1 3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3956	INTERNAL MEDICINE	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Denied	1
3963 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3969 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1 3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3963	NEUROLOGY	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1  3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1  3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1  3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1  3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Denied 1 3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3
3951 NURSE PRACTITIONER, FAMILY HEALTH PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3969	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951 NURSE PRACTITIONER, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Denied	1
3951 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3951	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963 PHYSICIAN ASSISTANT, UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3951	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
	3951	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
RHEUMATOLOGY PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 1	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
	3963	RHEUMATOLOGY	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956 UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 4	3956	UNSPECIFIED	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	4
3963 UNSPECIFIED PREGABALIN 150MG OR CAPS NEUROLOGICAL AGENTS Approved 3	3963	UNSPECIFIED	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	UNSPECIFIED	PREGABALIN 150MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3951	ANESTHESIOLOGY	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3969	FAMILY PRACTICE	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Denied	1
3956	FAMILY PRACTICE	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Denied	1
3956	NEUROLOGY	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	RHEUMATOLOGY	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	PREGABALIN 200MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	PREGABALIN 225MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951	FAMILY PRACTICE	PREGABALIN 225MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	PREGABALIN 225MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3951	FAMILY PRACTICE	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3963	FAMILY PRACTICE	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	PHYSICIAN, ENDOCRINOLOGY	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	PREGABALIN 25MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	PREGABALIN 300MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956	NEUROLOGY	PREGABALIN 300MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 300MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3951	UNSPECIFIED	PREGABALIN 300MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	PREGABALIN 300MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	ANESTHESIOLOGY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3951	ANESTHESIOLOGY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951	FAMILY PRACTICE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3
3963	FAMILY PRACTICE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	6
3956	FAMILY PRACTICE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	8
3961	FAMILY PRACTICE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956	INTERNAL MEDICINE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NEUROLOGY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NEUROLOGY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956	ORTHOPEDIC SURGERY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Denied	1
3963	PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	PODIATRIST, GENERAL PRACTICE	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	RHEUMATOLOGY	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951	UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3969	UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	7
3956	UNSPECIFIED	PREGABALIN 50MG OR CAPS	NEUROLOGICAL AGENTS	Approved	7
3963	FAMILY PRACTICE	PREGABALIN 75 MG CAPSULE [LYRICA]	NEUROLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	PREGABALIN 75 MG ORAL CAPSULE (LYRICA)	NEUROLOGICAL AGENTS	Approved	1
3951	FAMILY PRACTICE	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	6
3956	ANESTHESIOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	7
3956	EMERGENCY MEDICINE	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3951	ANESTHESIOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	11
3963	FAMILY PRACTICE	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	7
3951	INTERNAL MEDICINE	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NEUROLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3965	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	5
3951	NURSE PRACTITIONER, FAMILY HEALTH	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, GERONTOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3964	NURSE PRACTITIONER, GERONTOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	3

SAMESIAND   NUMBER PRACTITIONER, UNSPECIFIED   PRECABALIN 75MG OR CAPS   NEUROLOGICAL AGENTS   Agented   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
9960         Physician Assistant Unspecified         PREGRAM INTERMS OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3886         Physician Physician Wickins & Rethability         Precadal IN TAMIG OR CAPS         NEUROLOGICAL AGENTS         Approved         4           3986         Physician Physician Wickins & Rethability         PREGRAM Physician Wickins & Pethability         REGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3987         Physician Physican Wickins & Rethability         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         PRODIATISIS GENERAL PRACTICE         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         PRELIMATICLOGY         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3986         PRELIMATICLOGY         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3986         UNSPECIFIED         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGRAM NAME OR CAPS         NEUROLOGICAL AGENTS	3963	NURSE PRACTITIONER, UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
9896         PHYSICIAN, PRYSICAL MEDICINE & REHABILITA         PRECABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         4           983         PHYSICIAN, PRYSICAL MEDICINE & REHABILITA         PRECABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1           981         PHYSICIAN, PRYSICAL MEDICINE & REHABILITA         PRECABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1           986         PODIATRIST, GENERAL PRACTICE         PREGABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1           9861         RIFELDIANTOLOGY         PREGABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         2           9865         HIFELDIANTOLOGY         PREGABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         2           9866         HIFELDIANTOLOGY         PREGABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1           9867         UNSPECIFIED         PREGABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1           9863         UNSPECIFIED         PRECABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1           9863         UNSPECIFIED         PRECABALIN TAMO OR CAPS         NEUROLOGICAL AGENTS         Approved         1 <td>3961</td> <td>ORTHOPEDIC SURGERY</td> <td>PREGABALIN 75MG OR CAPS</td> <td>NEUROLOGICAL AGENTS</td> <td>Approved</td> <td>1</td>	3961	ORTHOPEDIC SURGERY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
TONN PRINSTAFF	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
PRESIDENT PRINSICAL MEDICINE & REHABILITA-   PREGRABLIN 79MC OR CAPS   NEUROLOGICAL AGENTS   Approved   7   1   1   1   1   1   1   1   1   1	3956		PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	4
100   PHYSIARTHY   PRESARLIN 78NG OR CAPS   NEUROLOGICAL AGENTS   Approved   1   1   1   1   1   1   1   1   1	3963		PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
8966         RHEUMATOLOGY         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3951         RHEUMATOLOGY         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3965         RHEUMATOLOGY         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3966         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3968         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3968         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3961         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3966         UNSPECIFIED         PREGABALIN 75MG OR CAPS         <	3951		PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
8851         RHEUMATOLOGY         PREGABALIN 76MG OR CAPS         NEUROLOGICAL AGENTS         Approved         2           3865         RHEUMATOLOGY         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3956         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3959         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3965         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         4           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3965         UNSPECIFIED         PREGABALIN 75MG OR CAPS         <	3956	PODIATRIST, GENERAL PRACTICE	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
8986         RHELIMATOLOGY         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Denied         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3983         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         PREGABALIN 75MG OR CAPS <td< td=""><td>3956</td><td>RHEUMATOLOGY</td><td>PREGABALIN 75MG OR CAPS</td><td>NEUROLOGICAL AGENTS</td><td>Approved</td><td>1</td></td<>	3956	RHEUMATOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3956         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Denied         1           3956         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3961         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3964         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3965         UNSPECIFIED         PROLA         PROCIATION         NEUROLOGICAL AGENTS         Approved         1           3966         PULMONARY DISEASES         PROLA         RE	3951	RHEUMATOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	2
3956         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3951         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         4           3963         UNSPECIFIED         PREGABALIN RB         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREMARIN TAB 0.625MG         ESTROGENS         Approved         1           3966         UNSPECIFIED         PREMARIN TAB 0.625MG         ESTROGENS         Approved         1           3968         UNSPECIFIED         PREMARIN TAB 0.625MG         ESTROGENS         Approved         1           3969         ULIMONARY DISEASES         PROLASTINC         RESPIRATORY AGENTS         Approved         1           3961         CLINICAL NURSE SPECIALIST, FAMILY HEALTH         PROLIA         BONE-MODIFYING AGENT         Approved         1           3963         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         5           3963         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         1 <td>3965</td> <td>RHEUMATOLOGY</td> <td>PREGABALIN 75MG OR CAPS</td> <td>NEUROLOGICAL AGENTS</td> <td>Approved</td> <td>1</td>	3965	RHEUMATOLOGY	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	1
3983         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         10           3961         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         4           3965         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREGABALIN 75MG OR CAPS         ESTROGENS         Approved         1           3966         UNSPECIFIED         PROCRIT         HEMATINCS & BLOOD CELL STIMULATORS         Denied         1           3966         PULMONARY DISEASES         PROCASTINC         RESPIRATORY AGENTS         Approved         1           3961         CLINICAL NURSE SPECIALIST, FAMILY HEALTH         PROLIA         BONE-MODIFYING AGENT         Approved         1           3963         EMERGENCY MEDICINE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3964         EMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         5           3963         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3966         HEMATOLOGY & ONCOLOGY         PROLIA         BONE-MODIFYING AGENT         Approved </td <td>3956</td> <td>UNSPECIFIED</td> <td>PREGABALIN 75MG OR CAPS</td> <td>NEUROLOGICAL AGENTS</td> <td>Denied</td> <td>1</td>	3956	UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Denied	1
3951         UNSPECIFIED         PREGABALIN 75MG OR CAPS         NEUROLOGICAL AGENTS         Approved         4           3965         UNSPECIFIED         PREGABALIN ER         NEUROLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         PREMARIN TAB 0.625MG         ESTROGENS         Approved         1           3966         UNSPECIFIED         PREMARIN TAB 0.625MG         ESTROGENS         Approved         1           3966         UNSPECIFIED         PROLASTINC         RESPIRATORY AGENTS         Approved         1           3966         PULMONARY DISEASES         PROLASTINC         RESPIRATORY AGENTS         Approved         1           3961         CLINICAL NURSE SPECIALIST, FAMILY HEALTH         PROLIA         BONE-MODIFYING AGENT         Approved         1           3966         EMERGENCY MEDICINE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3968         EMERGENCY MEDICINE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3969         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3966         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         1 <tr< td=""><td>3956</td><td>UNSPECIFIED</td><td>PREGABALIN 75MG OR CAPS</td><td>NEUROLOGICAL AGENTS</td><td>Approved</td><td>10</td></tr<>	3956	UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	10
3986         UNSPECIFIED         PREGABALIN ER         NEUROLOGICAL AGENTS         Approved         1           3983         UNSPECIFIED         PREMARIN TAB 0.625MG         ESTROGENS         Approved         1           3956         UNSPECIFIED         PROCRIT         HEMATINIC'S BLOOD CELL STIMULATORS         Denied         1           3956         PULMONARY DISEASES         PROLASTIN-C         RESPIRATORY AGENTS         Approved         1           3961         CLINICAL NURSE SPECIALIST FAMILY HEALTH         PROLIA         BONE-MODIFYING AGENT         Approved         1           3963         EMERGENCY MEDICINE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3964         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3963         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3966         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3967         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3968         HEMATOLOGY & ONCOLOGY         PROLIA         BONE-MODIFYING AGENT         Approved         1	3963	UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	10
3983         UNSPECIFIED         PREMARINTAB 0.625MG         ESTROGENS         Approved         1           3956         UNSPECIFIED         PROCRIT         HEMATINICS & BLOOD CELL STIMULATORS         Denied         1           3956         PULMONARY DISEASES         PROLASTINC         RESPIRATORY AGENTS         Approved         1           3956         PULMONARY DISEASES         PROLASTINC         RESPIRATORY AGENTS         Denied         1           3956         PULMONARY DISEASES         PROLASTINC         RESPIRATORY AGENTS         Denied         1           3956         PULMONARY DISEASES         PROLIA         BONE-MODIFYING AGENT         Approved         1           3956         EMERGENCY MEDICINE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3956         EMERGENCY MEDICINE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3956         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         2           3956         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3956         FAMILY PRACTICE         PROLIA         BONE-MODIFYING AGENT         Approved         1           3956	3951	UNSPECIFIED	PREGABALIN 75MG OR CAPS	NEUROLOGICAL AGENTS	Approved	4
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3956PULMONARY DISEASESPROLASTIN-CRESPIRATORY AGENTSApproved13966PULMONARY DISEASESPROLASTIN-CRESPIRATORY AGENTSDenied13961CLINICAL NURSE SPECIALIST, FAMILY HEALTHPROLIABONE-MODIFYING AGENTApproved13956EMERGENCY MEDICINEPROLIABONE-MODIFYING AGENTApproved53956FAMILY PRACTICEPROLIABONE-MODIFYING AGENTApproved23956FAMILY PRACTICEPROLIABONE-MODIFYING AGENTApproved23956FAMILY PRACTICEPROLIABONE-MODIFYING AGENTApproved23956HEMATOLOGY & ONCOLOGYPROLIABONE-MODIFYING AGENTDenied13963HEMATOLOGY & ONCOLOGYPROLIABONE-MODIFYING AGENTApproved13956INTERNAL MEDICINEPROLIABONE-MODIFYING AGENTApproved33956INTERNAL MEDICINEPROLIABONE-MODIFYING AGENTApproved33956INTERNAL MEDICINEPROLIABONE-MODIFYING AGENTApproved33956INTERNAL MEDICINEPROLIABONE-MODIFYING AGENTApproved33956NURSE PRACTITIONER, FAMILY HEALTHPROLIABONE-MODIFYING AGENTApproved13956NURSE PRACTITIONER, UNSPECIFIEDPROLIABONE-MODIFYING AGENTApproved23963NURSE PRACTITIONER, UNSPECIFIEDPROLIABONE-MODIFYING AGENTApproved13966PHYSICIAN ASSISTANT, UNSPECIFIED <t< td=""><td>3963</td><td>UNSPECIFIED</td><td>PREMARIN TAB 0.625MG</td><td>ESTROGENS</td><td>Approved</td><td>1</td></t<>	3963	UNSPECIFIED	PREMARIN TAB 0.625MG	ESTROGENS	Approved	1
9366 PULMONARY DISEASES PROLASTIN-C RESPIRATORY AGENTS Denied 1 9361 CLINICAL NURSE SPECIALIST, FAMILY HEALTH PROLIA BONE-MODIFYING AGENT Approved 1 9366 EMERGENCY MEDICINE PROLIA BONE-MODIFYING AGENT Approved 1 9366 FAMILY PRACTICE PROLIA BONE-MODIFYING AGENT Approved 5 9363 FAMILY PRACTICE PROLIA BONE-MODIFYING AGENT Approved 2 9366 FAMILY PRACTICE PROLIA BONE-MODIFYING AGENT Approved 2 9366 FAMILY PRACTICE PROLIA BONE-MODIFYING AGENT Denied 2 9366 FAMILY PRACTICE PROLIA BONE-MODIFYING AGENT Denied 1 9366 HEMATOLOGY & ONCOLOGY PROLIA BONE-MODIFYING AGENT Denied 1 9366 HEMATOLOGY & ONCOLOGY PROLIA BONE-MODIFYING AGENT Approved 1 9366 INTERNAL MEDICINE PROLIA BONE-MODIFYING AGENT Denied 1 9366 INTERNAL MEDICINE PROLIA BONE-MODIFYING AGENT Denied 1 9366 NURSE PRACTITIONER, FAMILY HEALTH PROLIA BONE-MODIFYING AGENT Denied 1 9366 NURSE PRACTITIONER, FAMILY HEALTH PROLIA BONE-MODIFYING AGENT Approved 1 9366 NURSE PRACTITIONER, FAMILY HEALTH PROLIA BONE-MODIFYING AGENT Approved 1 9366 NURSE PRACTITIONER, LINE PROLIA BONE-MODIFYING AGENT Approved 1 9366 NURSE PRACTITIONER, LINE PROLIA BONE-MODIFYING AGENT Approved 1 9366 NURSE PRACTITIONER, LINE PROLIA BONE-MODIFYING AGENT Approved 1 9366 NURSE PRACTITIONER, LINE PROLIA BONE-MODIFYING AGENT Approved 1 9366 NURSE PRACTITIONER, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 9366 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 9366 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1	3956	UNSPECIFIED	PROCRIT	HEMATINICS & BLOOD CELL STIMULATORS	Denied	1
3961CLINICAL NURSE SPECIALIST, FAMILY HEALTHPROLIABONE-MODIFYING AGENTApproved13956EMERGENCY MEDICINEPROLIABONE-MODIFYING AGENTApproved13956FAMILY PRACTICEPROLIABONE-MODIFYING AGENTApproved53963FAMILY PRACTICEPROLIABONE-MODIFYING AGENTApproved23956FAMILY PRACTICEPROLIABONE-MODIFYING AGENTDenied23956HEMATOLOGY & ONCOLOGYPROLIABONE-MODIFYING AGENTDenied13963HEMATOLOGY & ONCOLOGYPROLIABONE-MODIFYING AGENTApproved13956INTERNAL MEDICINEPROLIABONE-MODIFYING AGENTDenied13956INTERNAL MEDICINEPROLIABONE-MODIFYING AGENTApproved33956NURSE PRACTITIONER, FAMILY HEALTHPROLIABONE-MODIFYING AGENTApproved13956NURSE PRACTITIONER, FAMILY HEALTHPROLIABONE-MODIFYING AGENTApproved13956NURSE PRACTITIONER, UNSPECIFIEDPROLIABONE-MODIFYING AGENTApproved13956PHYSICIAN ASSISTANT, UNSPECIFIEDPROLIABONE-MODIFYING AGENTApproved13956PHYSICIAN ASSISTANT, UNSPECIFIEDPROLIABONE-MODIFYING AGENTApproved13956PHYSICIAN ASSISTANT, UNSPECIFIEDPROLIABONE-MODIFYING AGENTApproved1	3956	PULMONARY DISEASES	PROLASTIN-C	RESPIRATORY AGENTS	Approved	1
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3956 NURSE PRACTITIONER, FAMILY HEALTH PROLIA BONE-MODIFYING AGENT Approved 1 3956 NURSE PRACTITIONER, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 2 3963 NURSE PRACTITIONER, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Denied 1	3956	INTERNAL MEDICINE	PROLIA	BONE-MODIFYING AGENT	Approved	3
3956 NURSE PRACTITIONER, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 2 3963 NURSE PRACTITIONER, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Denied 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	PROLIA	BONE-MODIFYING AGENT	Denied	1
3963 NURSE PRACTITIONER, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Denied 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	PROLIA	BONE-MODIFYING AGENT	Approved	1
3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Denied 1	3956	NURSE PRACTITIONER, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	2
3956 PHYSICIAN ASSISTANT, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Denied 1	3963	NURSE PRACTITIONER, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	1
	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	1
3956 REGISTERED NURSE, UNSPECIFIED PROLIA BONE-MODIFYING AGENT Approved 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Denied	1
The state of the s	3956	REGISTERED NURSE, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	6
3963	UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Denied	2
3956	UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Denied	2
3963	CLINICAL NURSE SPECIALIST, UNSPECIFIED	PROMACTA	HEMOSTATICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	PROMACTA	HEMOSTATICS	Approved	1
3963	INTERNAL MEDICINE	PROMACTA	HEMOSTATICS	Approved	1
3963	UNSPECIFIED	PROMACTA	HEMOSTATICS	Approved	2
3963	UNSPECIFIED	PROMACTA	HEMOSTATICS	Denied	1
3963	DERMATOLOGY	PROTOPIC 0.03% EX OINT	TOPICAL SKIN PRODUCT	Approved	1
3951	UNSPECIFIED	PROTOPIC 0.03% EX OINT	TOPICAL SKIN PRODUCT	Approved	1
3962	PULMONARY DISEASES	PROVIGIL 200MG (MODAFINIL)	STIMULANTS	Approved	1
3969	INFECTIOUS DISEASES	PYRIMETHAMINE	ANTI-INFECTIVES	Approved	1
3963	FAMILY PRACTICE	QBREXZA (GLYCOPYRRONIUM)	HYPERHIDROSIS	Denied	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	QBREXZA (GLYCOPYRRONIUM)	HYPERHIDROSIS	Approved	1
3963	FAMILY PRACTICE	QBREXZA 2.4% EX PADS	HYPERHIDROSIS	Approved	1
3963	UNSPECIFIED	QBREXZA 2.4% EX PADS	HYPERHIDROSIS	Approved	3
3963	INTERNAL MEDICINE	QBREXZA 2.4% PAD	HYPERHIDROSIS	Approved	1
3962	FAMILY PRACTICE	QULIPTA 10MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3969	UNSPECIFIED	QULIPTA 10MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3969	UNSPECIFIED	QULIPTA 10MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3951	FAMILY PRACTICE	QULIPTA 10MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 10MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	QULIPTA 10MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	UNSPECIFIED	QULIPTA 10MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	UNSPECIFIED	QULIPTA 10MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	FAMILY PRACTICE	QULIPTA 30MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	NEUROLOGY	QULIPTA 30MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	FAMILY PRACTICE	QULIPTA 30MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3961	FAMILY PRACTICE	QULIPTA 30MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3956	UNSPECIFIED	QULIPTA 30MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3951	UNSPECIFIED	QULIPTA 30MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	UNSPECIFIED	QULIPTA 30MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	FAMILY PRACTICE	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	4
3956	FAMILY PRACTICE	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	FAMILY PRACTICE	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Denied	1
3951	NEUROLOGY	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NEUROLOGY	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	UNSPECIFIED	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	3
3963	UNSPECIFIED	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	5
3962	UNSPECIFIED	QULIPTA 60MG OR TABS	MIGRAINE TREATMENT	Approved	1
3962	FAMILY PRACTICE	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	FAMILY PRACTICE	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	2
3962	FAMILY PRACTICE	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	2
3963	FAMILY PRACTICE	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3964	FAMILY PRACTICE	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	NEUROLOGY	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	2
3951	NEUROLOGY	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3969	NEUROLOGY	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	2
3962	NEUROLOGY	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, GERONTOLOGY	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3965	NURSE PRACTITIONER, UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	7
3964	UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3967	UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3962	UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3962	UNSPECIFIED	QULIPTA 60MG TABLET (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3951	FAMILY PRACTICE	QULIPTA 60MG TABLETS	MIGRAINE TREATMENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG TABLETS	MIGRAINE TREATMENT	Approved	1
3956	EMERGENCY MEDICINE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	FAMILY PRACTICE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	5
3956	FAMILY PRACTICE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	6
3956	FAMILY PRACTICE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
3951	FAMILY PRACTICE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	INTERNAL MEDICINE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	INTERNAL MEDICINE	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	2
3963	NEUROLOGY	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	2
3956	NEUROLOGY	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	5
3956	NEUROLOGY	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	3

Section   Number Practificher, Parkhalt   Quill'ità ADMIG Relatis MICCERNATT   MIGRANE TRATAMENT   Approved   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
NURSE PRACTITIONER, UNSPECIFED   QUIPTA BONG TABLETS (ATOGEPANT)   MIGRANE TREATMENT   Approved   1	3956	NURSE PRACTITIONER, FAMILY HEALTH	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	5
NURSE PRACTITIONER, UNSPECIFIED   OULPTA 600MG TABLETS (ATOGEPANT)   MIGRAINET REFATMENT   Approved 1	3956	NURSE PRACTITIONER, GERONTOLOGY	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
SHEET   NUMBER PRACTITIONER, UNSPECIFED   OULIPTA BOMG TABLETS (ATOGEMENT)   MIGRANE TREATMENT   Denied   1	3956	NURSE PRACTITIONER, UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
1996   NURSE PRACTITIONER, UNSPECIFIED   QULIPTA GOMG TABLETS (ATDGEPANT)   MIGRAINE TREATMENT   Approved   1	3963	NURSE PRACTITIONER, UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
PEDIATRICS	3961	NURSE PRACTITIONER, UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
PHYSICIAN, INFOSICAL MEDICINE & REHABILITA   QULITA GOMETBALETS IATOGEPANTI   MIGRANETREATMENT   Approved   2	3956	NURSE PRACTITIONER, UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	1
PhySICAL PRIVSCAL MEDICINE & REHABILITA-   QULIPTA BONG TABLETS IATGGEPANTI   MIGRANE TREATMENT   Denied   3   3   3   3   3   3   3   3   3	3956	PEDIATRICS	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	1
3956   TION / PHYSIATRY   CHUPTA GOMG FRELETS KRINGEPANTI   MICHANIER PREATMENT   Denied   2	3956	· ·	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	2
3956         UNSPECIFIED         QUILPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Approved         21           3958         UNSPECIFIED         QUILPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Approved         21           3963         UNSPECIFIED         QUILPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Denied         2           3963         UNSPECIFIED         QUILPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Approved         5           3983         FAMILY PRACTICE         QUIVID 25MG TABLETS         HYPNOTIC         Denied         1           3983         CARDIOLOGY, INTERVENTIONER, ACUTE CARE         QUIVID 25MG TABL         HYPNOTIC         Denied         1           3986         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Denied         1           3986         UNSPECIFIED         RANOLAZINE ER         ANTI	3956		QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	3
3956         UNSPECIFIED         OULIPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Approved         21           3983         UNSPECIFIED         GULIPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Denied         2           3983         UNSPECIFIED         GULIPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Approved         5           3983         FAMILY PRACTICE         QUVIVIO 25MG TABLETS         HYPNOTIC         Denied         1           3983         NURSE PRACTITIONER, ACUTE CARE         QUVIVIO 50MG TAB         HYPNOTIC         Denied         1           3983         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Denied         1           3986         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Denied         1           3986         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Denied         1           3986         UNSPECIFIED         RANOLAZINE ER         ANTIANGINAL         Denied         1           3986         UNSPECIFIED         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         Approved         1           3986         UNSPECIFIED         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         <	3956	REGISTERED NURSE, UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	2
1983   UNSPECIFIED	3956	UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	14
9983         UNSPECIFIED         OULIPTA 60MG TABLETS (ATOGEPANT)         MIGRAINE TREATMENT         Approved         5           3983         FAMILY PRACTICE         OUVIVIO 25MG TABLETS         HYPNOTIC         Denied         1           3983         NURSE PRACTITIONER, ACUTE CARE         OUVIVIO 50MG TAB         HYPNOTIC         Denied         1           3983         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Denied         1           3956         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Approved         1           3956         UNSPECIFIED         RANOLAZINE ER         ANTIANGINAL         Denied         1           3956         UNSPECIFIED         RANOLAZINE ER         ANTIANGINAL         Denied         1           3951         UNSPECIFIED         RANOLAZINE ER         ANTIANGINAL         Denied         1           3956         INTERNAL MEDICINE         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         Approved         2           3951         UNSPECIFIED         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         Approved         2           3956         INTERNAL MEDICINE         RANOLAZINE ER 500MG ORTB12         ANTIANGINAL         Approved         2     <	3956	UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	21
3963         FAMILY PRACTICE         QUVIVIO 26MG TABLETS         HYPNOTIC         Denied         1           3963         NURSE PRACTITIONER, ACUTE CARE         QUVIVIO 60MG TAB         HYPNOTIC         Denied         1           3963         CARDIOLOGY         RANOLAZINE ER         ANTIANGINAL         Denied         1           3966         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Approved         1           3966         CARDIOLOGY, INTERVENTIONAL         RANOLAZINE ER         ANTIANGINAL         Approved         1           3966         NURSE PRACTITIONER, FAMILY HEALTH         RANOLAZINE ER         ANTIANGINAL         Denied         1           3966         UNSPECIFIED         RANOLAZINE ER         ANTIANGINAL         Denied         1           3961         UNSPECIFIED         RANOLAZINE ER         ANTIANGINAL         Denied         1           3963         CARDIOLOGY         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         Approved         1           3966         INTERNAL MEDICINE         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         Approved         2           3956         INTERNAL MEDICINE         RANOLAZINE ER 1000MG ORTB12         ANTIANGINAL         Approved         2	3963	UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Denied	2
9963 NURSE PRACTITIONER, ACUTE CARE OUVIVIG BOMG TAB HYPNOTIC Denied 1 3963 CARDIOLOGY RANOLAZINE ER ANTIANGINAL Denied 1 3968 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Denied 1 3966 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Denied 1 3966 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Approved 1 3966 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 3 3966 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 3 3961 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 3 3963 CARDIOLOGY RANOLAZINE ER ANTIANGINAL Denied 1 3966 INTERNAL MEDICINE RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 1 3966 INTERNAL MEDICINE RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 1 3966 ANESTHESIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3966 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3968 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3969 UNSPECIFIED RESOLUCION REGRANEX (BECAPLERMIN) DERMAT	3963	UNSPECIFIED	QULIPTA 60MG TABLETS (ATOGEPANT)	MIGRAINE TREATMENT	Approved	5
2963 CARDIOLOGY RANOLAZINE ER ANTIANGINAL Denied 1 2966 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Denied 1 2956 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Denied 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER ANTIANGINAL Denied 1 2956 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 1 2956 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 1 2956 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 1 2956 INTERNAL MEDICINE RANOLAZINE ER OLOMIG ORTB12 ANTIANGINAL Approved 1 2956 INTERNAL MEDICINE RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 1 2956 ANESTHESIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 CUNICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 2956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL APPROVED 1 2956 NURSE P	3963	FAMILY PRACTICE	QUVIVIQ 25MG TABLETS	HYPNOTIC	Denied	1
9956 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Denied 1 3956 CARDIOLOGY, INTERVENTIONAL RANOLAZINE ER ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER ANTIANGINAL Denied 1 3956 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 3 3951 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 1 3963 CARDIOLOGY RANOLAZINE ER ANTIANGINAL Denied 1 3966 INTERNAL MEDICINE RANOLAZINE ER 1000MG ORT B12 ANTIANGINAL Approved 1 3956 ANESTHESIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 2 3956 ANESTHESIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 CARDIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 CARDIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 CARDIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 CARDIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 CARDIOLOGY RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3958 UNSPECIFIED RANOLAZINE ER 500MG ORT B12 ANTIANGINAL Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3960 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS 3963 Denied 2	3963	NURSE PRACTITIONER, ACUTE CARE	QUVIVIQ 50MG TAB	HYPNOTIC	Denied	1
3956CARDIOLOGY, INTERVENTIONALRANOLAZINE ERANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ERANTIANGINALDenied13956UNSPECIFIEDRANOLAZINE ERANTIANGINALDenied33951UNSPECIFIEDRANOLAZINE ERANTIANGINALDenied13963CARDIOLOGYRANOLAZINE ER 1000MG ORTB12ANTIANGINALApproved13956INTERNAL MEDICINERANOLAZINE ER 1000MG ORTB12ANTIANGINALApproved23956ANESTHESIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13951CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved23956CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956CLINICAL NURSE SPECIALIST, ADULT HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, ADULT HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956UNSPECIFIEDREGRANEX (BECAPLERMIN)DERMATOLOGICAL AGENTSApproved13963OBSTETRICS & GYNECOLOGYREGRANEX (BECAPLERMIN)DERMATOLO	3963	CARDIOLOGY	RANOLAZINE ER	ANTIANGINAL	Denied	1
NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER ANTIANGINAL Denied 1  3956 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 3  3951 UNSPECIFIED RANOLAZINE ER ANTIANGINAL Denied 1  3963 CARDIOLOGY RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 1  3956 INTERNAL MEDICINE RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 2  3956 ANESTHESIOLOGY RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 1  3951 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 UNSPECIFIED RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 UNSPECIFIED RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1  3956 UNSPECIFIED RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 2  3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1  3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2	3956	CARDIOLOGY, INTERVENTIONAL	RANOLAZINE ER	ANTIANGINAL	Denied	1
3956UNSPECIFIEDRANOLAZINE ERANTIANGINALDenied33951UNSPECIFIEDRANOLAZINE ERANTIANGINALDenied13963CARDIOLOGYRANOLAZINE ER 1000MG ORTB12ANTIANGINALApproved13956INTERNAL MEDICINERANOLAZINE ER 1000MG ORTB12ANTIANGINALApproved23956ANESTHESIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13951CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved23956CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956CLINICAL NURSE SPECIALIST, ADULT HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, ADULT HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956UNSPECIFIEDRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved23963OBSTETRICS & GYNECOLOGYREGRANEX (BECAPLERMIN)DERMATOLOGICAL AGENTSApproved13956NEUROLOGYREGRANEX (BECAPLERMIN)DERMATOLOGICAL AGENTSApproved13956NEUROLOGYREMICADE 100MG INJECTIONBIOLOGICALSDenied23963CARDIOLOGYREMICADE 100MG INJECTIONBIOLOGICALS <t< td=""><td>3956</td><td>CARDIOLOGY, INTERVENTIONAL</td><td>RANOLAZINE ER</td><td>ANTIANGINAL</td><td>Approved</td><td>1</td></t<>	3956	CARDIOLOGY, INTERVENTIONAL	RANOLAZINE ER	ANTIANGINAL	Approved	1
3951UNSPECIFIEDRANOLAZINE ERANTIANGINALDenied13963CARDIOLOGYRANOLAZINE ER 1000MG ORTB12ANTIANGINALApproved13956INTERNAL MEDICINERANOLAZINE ER 1000MG ORTB12ANTIANGINALApproved23956ANESTHESIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13951CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved23956CARDIOLOGYRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956CLINICAL NURSE SPECIALIST, ADULT HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, ADULT HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956NURSE PRACTITIONER, FAMILY HEALTHRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved13956UNSPECIFIEDRANOLAZINE ER 500MG ORTB12ANTIANGINALApproved23963OBSTETRICS & GYNECOLOGYREGRANEX (BECAPLERMIN)DERMATOLOGICAL AGENTSApproved13956NEUROLOGYREGRANEX (BECAPLERMIN)DERMATOLOGICAL AGENTSApproved13956NEUROLOGYREMICADE 100MG (NJECTION)BIOLOGICALSDenied23963CARDIOLOGYREPATHALIPOTROPICSDenied1	3956	NURSE PRACTITIONER, FAMILY HEALTH	RANOLAZINE ER	ANTIANGINAL	Denied	1
APPROVED 1  APPROVED 2  ANTIANGINAL APPROVED 1  APPROVED 2  APPROVED 2  APPROVED 2  APPROVED 3  APPROVED 1  APPROV	3956	UNSPECIFIED	RANOLAZINE ER	ANTIANGINAL	Denied	3
3956 INTERNAL MEDICINE RANOLAZINE ER 1000MG ORTB12 ANTIANGINAL Approved 2 3956 ANESTHESIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3951 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 2 3956 CARDIOLOGY RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG ORTB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA	3951	UNSPECIFIED	RANOLAZINE ER	ANTIANGINAL	Denied	1
3956 ANESTHESIOLOGY RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3951 CARDIOLOGY RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3956 CARDIOLOGY RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REGRANEX (BECAPLERMIN) BIOLOGICALS Denied 2 3963 CARDIOLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 14	3963	CARDIOLOGY	RANOLAZINE ER 1000MG ORTB12	ANTIANGINAL	Approved	1
Approved 2 3956 CARDIOLOGY RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	INTERNAL MEDICINE	RANOLAZINE ER 1000MG ORTB12	ANTIANGINAL	Approved	2
3956 CARDIOLOGY RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	ANESTHESIOLOGY	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	1
3956 CLINICAL NURSE SPECIALIST, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3951	CARDIOLOGY	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	2
3956 NURSE PRACTITIONER, ADULT HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	CARDIOLOGY	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 1 3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	1
3956 UNSPECIFIED RANOLAZINE ER 500MG OR TB12 ANTIANGINAL Approved 2 3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	NURSE PRACTITIONER, ADULT HEALTH	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	1
3963 OBSTETRICS & GYNECOLOGY REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	NURSE PRACTITIONER, FAMILY HEALTH	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	1
3969 UNSPECIFIED REGRANEX (BECAPLERMIN) DERMATOLOGICAL AGENTS Approved 1 3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3956	UNSPECIFIED	RANOLAZINE ER 500MG ORTB12	ANTIANGINAL	Approved	2
3956 NEUROLOGY REMICADE 100MG INJECTION BIOLOGICALS Denied 2 3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3963	OBSTETRICS & GYNECOLOGY	REGRANEX (BECAPLERMIN)	DERMATOLOGICAL AGENTS	Approved	1
3963 CARDIOLOGY REPATHA LIPOTROPICS Denied 14	3969	UNSPECIFIED	REGRANEX (BECAPLERMIN)	DERMATOLOGICAL AGENTS	Approved	1
	3956	NEUROLOGY	REMICADE 100MG INJECTION	BIOLOGICALS	Denied	2
3965 CARDIOLOGY REPATHA LIPOTROPICS Denied 1	3963	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	14
	3965	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	CARDIOLOGY, INTERVENTIONAL	REPATHA	LIPOTROPICS	Approved	1
3963	CARDIOLOGY	REPATHA	LIPOTROPICS	Approved	5
3964	CARDIOLOGY	REPATHA	LIPOTROPICS	Approved	2
3969	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	2
3964	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	4
3965	CARDIOLOGY	REPATHA	LIPOTROPICS	Approved	1
3951	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	1
3963	CARDIOLOGY, INTERVENTIONAL	REPATHA	LIPOTROPICS	Approved	1
3963	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	8
3963	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Approved	3
3951	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	4
3965	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	1
3951	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Approved	1
3965	HOSPITALIST	REPATHA	LIPOTROPICS	Approved	1
3969	HOSPITALIST	REPATHA	LIPOTROPICS	Approved	1
3969	HOSPITALIST	REPATHA	LIPOTROPICS	Denied	1
3963	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Denied	10
3963	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Approved	2
3965	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Denied	2
3964	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	2
3962	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3963	PEDIATRICS	REPATHA	LIPOTROPICS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	1
3963	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	10
3963	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	13
3965	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	3
3965	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3969	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	2
3951	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	2
3969	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	2
3951	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3964	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	2
3963	OPTOMETRIST, UNSPECIFIED	RESTASIS (CYCLOSPORINE OPHTHALMIC 0.05% EMULSION)	OPHTHALMIC PREPARATIONS	Approved	3

8486         INSPECIPIED         RETAINS 0.0% OF PAULI         OPERALATIONS         Aperament         1           856         UNSPECIPIED         RETACRIT         HEMATOCOCTY & ONCOLORY         Accorded         1           3866         UNSPECIPIED         RETICALIT         HEMATOCOCTTA ACENTS         Approach         1           3866         PHYSICIAN ASSISTATI (UNSPECIPE)         RETINA A 00% SEX CREA         DEMATOCOCTA ACENTS         Approach         1           3867         UNSPECIPIED         RETINA A 00% SEX CREA         DEMATOCOCTA ACENTS         Approach         1           3868         UNSPECIPIED         REVIATO 20MS TASELET         APITHEDETASTICS         Approach         1           3869         HEMATOCOCY ACCOCLORY         REVIATO         APITHEDETASTICS         Approach         1           3861         HEMATOCOCY A CONCOLORY         REVIATO         APITHEDETASTICS         Approach         1           3863         HEMATOCOCY A CONCOLORY         REVIATO         MISCARIA CHECKTER         Aproach         1           3863         HEMATOCOCY A CONCOLORY         REVIATO         APITHEDETASTIC         Aproach         1           3863         HEMATOCOCY A CONCOLORY         REVIATO         APITHEDETASTIC         Aproach         1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
998         UNSPECTED         RETACT         RETACT         PHISTORNA SISTRATUS MEDIA ASSTRATUS METIA ADDRESS EX CREA         PHISTORIA ASSTRATUS MEDICAL SERTIS         Approved         1           3806         DIASPECTED         RETINA ADDRESS EX CREA         DERMAZTIO COLCAC ASFRITS         Approved         1           3808         UNSPECIFED         REVAILO ZUMO TABLET         ANI HIMPERIENSIVE         Approved         1           3808         HEMAZOLOZY & RONCOLOGY         REVIMID         AMTINEOPLASTICS         Approved         1           3856         HEMAZOLOZY & RONCOLOGY         MEMIND         AMTINEOPLASTICS         Approved         1           3858         HEMAZOLOZY & RONCOLOGY         REVIMID         AMTINEOPLASTICS         Approved         1           3858         HEMAZOLOZY & RONCOLOGY         REVIDIO         AMTINEOPLASTICS         Approved         1           3863         HEMAZOLOZY & RONCOLOZY         REVIDIO         AMTINEOPLASTICS         Approved         1           3893         MISERPA DEL MINIOR         REVODY TOMORICA RELEASADITION         MERCANETE TELEATARITY         Approved         1           3893         MISERPAZITIO RELEA         REVODY TOMORICA RELEASADITION         MERCANETE TELEATARITY         Approved         1           3893         <	3963	UNSPECIFIED	RESTASIS 0.05% OP EMUL	OPHTHALMIC PREPARATIONS	Approved	1
8965         PHYSICIAN ASSISTANT, INSPECIEFD         RETINA DEPOS ONS BEL         DERMATOLOGICAL AGENTS         Agenced         1           3933         UNSEPCIFED         RETINA DEPOS ONS BEL         DERMATOLOGICAL AGENTS         Approved         1           3936         UNSEPCIFED         RETINA DEPOS ONS BEL         AMTHERPHISSIPE         Approved         1           3930         HEMATOLOGY & ONDOLOGY         REVILIND         AMTHER DELASTICS         Approved         1           3961         HEMATOLOGY & ONDOLOGY         REVILIND         AMTHER DELASTICS         Approved         1           3963         HEMATOLOGY & ONDOLOGY         REVILIND         AMTHER DELASTICS         Approved         2           3963         HEMATOLOGY & ONDOLOGY         REVILIND         AMTHER DELASTICS         Approved         2           3963         HEMATOLOGY & ONDOLOGY         REVILIND         AMTHER DELASTICS         Approved         1           3963         HEMATOLOGY         ANDERS PRACTICITIES         REVINDO         MERCANITERATURET         Approved         1           3963         HEMATOLOGY         REVINDO MONDATABLETS LASMIDITAN         MERCANITERATURET         Approved         1           3963         HINTERNAL MERICURE         REVINDO MONDATABLETS LASMIDITAN <t< td=""><td>3956</td><td>HEMATOLOGY &amp; ONCOLOGY</td><td>RETACRIT</td><td>HEMATOPOIETIC AGENT</td><td>Denied</td><td>1</td></t<>	3956	HEMATOLOGY & ONCOLOGY	RETACRIT	HEMATOPOIETIC AGENT	Denied	1
9881         UNSFECTFED         RETINA MICRO DURS ICEL         DERMATOLOCICAL ACENTS         Approved         1           3881         UNSFECTFED         REVAITO ZOMOTABLET         ANTINYTERTENSIVE         Approved         1           3895         HEMATOLOSY         REVLIMID         ANTINEDRASTICS         Approved         1           3951         HEMATOLOSY & ONCOLOGY         REVLIMID         ANTINEDRASTICS         Approved         1           3968         HEMATOLOGY & ONCOLOGY         REVLIMID         ANTINEDRASTICS         Approved         1           3968         HEMATOLOGY & ONCOLOGY         REVLIMID         ANTINEDRASTICS         Approved         1           3983         UNSECRICIO         REVLIMID         ANTINEDRASTICS         Approved         1           3983         UNSECRIFICA         REVLOVO TOMOS CRUSTAS         MIGRANET REATMENT         Approved         1           3983         NIESTERAL MEDICINE         REVLOVO TOMOS CRUSTAS         MIGRANET REATMENT         Approved         1           3983         NIESTERAL MEDICINE         REVLOVO TOMOS CRUSTAS ESTALASMICITAN         MIGRANET REATMENT         Approved         1           3983         UNSECUTED         REVLOVA TOMOS CRUSTAS ESTALASMICITAN         MIGRANET REATMENT         Approved	3956	UNSPECIFIED	RETACRIT	HEMATOPOIETIC AGENT	Approved	1
9983         UNSPECIFIED         REVAIND 20MSTABLET         ANTHYPERTENSIVE         Approval         1           3950         HEMATOLOGY         REVLMID         ARTINEDRASTICS         Approval         1           3951         HEMATOLOGY & ONCOLOGY         REVLMID         ARTINEDRASTICS         Approval         1           3952         HEMATOLOGY & ONCOLOGY         REVLMID         ARTINEDRASTICS         Approval         1           3963         PHISCIAN, ONCOLOGY MEDICAL         REVLMID         ARTINEDRASTICS         Approval         1           3963         PHISCIAN, ONCOLOGY MEDICAL         REVLMID ORDING ARB         ARTINEDRASTICS         Approval         1           3963         ARESTHESIOLOGY         REVLOW 100MG TABLETS LLASVIDITAN         MIGRANE TREATMENT         Approval         1           3963         INTERNAL MEDICINE         REVLOW 100MG TABLETS LLASVIDITAN         MIGRANE TREATMENT         Approval         1           3963         UNSECRETIONER, SMILL HEALTH         REVLOW 100MG TABLETS LLASVIDITAN         MIGRANE TREATMENT         Approval         1           3963         UNSECRETIONER         REVLOW 100MG TABLETS LLASVIDITAN         MIGRANE TREATMENT         Approval         1           3963         UNSECRETE         REVLOW 100MG TABLETS LLASVIDITAN	3965	PHYSICIAN ASSISTANT, UNSPECIFIED	RETIN-A 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
988h         HEMATOLOCY         REV.IMID         ATTINEOPLASTICS         Approved         1           3861         HEMATOLOSY & ONOCLOGY         REV.IMID         ANTHEOPLASTICS         Approved         1           3866         HEMATOLOSY & ONOCLOGY         REV.IMID         ANTHEOPLASTICS         Approved         1           3863         HEMATOLOSY         REV.IMID         ANTINEOPLASTICS         Approved         1           3863         JURSPECIFIED         REV.OW 1000G ATABETS (LASMIDITAN)         MIGRARIE TREATMENT         Approved         1           3863         ANESTHESIOLOSY         REV.OW 1000G TABLETS (LASMIDITAN)         MIGRARIE TREATMENT         Approved         1           3863         INTERNAL MEDICINE         REV.OW 1000G TABLETS (LASMIDITAN)         MIGRARIE TREATMENT         Approved         1           3863         PAISCIANA ASSISTANT UNSPECIFIED         REV.OW 1000G TABLETS (LASMIDITAN)         MIGRARIE TREATMENT         Approved         1           3863         UNSPECIFIED         REV.OW 1000G TABLETS (LASMIDITAN)         MIGRARIE TREATMENT         Approved         1           3863         UNSPECIFIED         REV.OW 1000G TABLETS (LASMIDITAN)         MIGRARIE TREATMENT         Approved         1           3863         UNSPECIFIED         REV.OW 1000G TABLE	3963	UNSPECIFIED	RETIN-A MICRO 0.04% GEL	DERMATOLOGICAL AGENTS	Approved	1
3851         PIEMATOLOGY & ONCOLOGY         REVLIMID         ANTINEOPLASTICS         Approved         1           3966         HEMATOLOGY & ONCOLOGY         REVLIMID         ANTINEOPLASTICS         Approved         1           3963         PHYSICAN, DOKOLOGY MEDICAL         REVLIMID         ANTINEOPLASTICS         Approved         1           3963         UNSPECIFIED         REVLOW 100MG CRIABS         MIGRINE TREATMENT         Approved         1           3963         ANESTHESIOLOGY         REVLOW 100MG TABLETS (LASAIDITAN)         MIGRANE TREATMENT         Approved         1           3965         ALBEST PRACTITIONER, FAMILY HEALTH         REVLOW 100MG TABLETS (LASAIDITAN)         MIGRANE TREATMENT         Approved         1           3963         PHYSICAN ASSISTANT, UNSPECIFIED         REVLOW 100MG TABLETS (LASAIDITAN)         MIGRANE TREATMENT         Approved         1           3963         UNSPECIFIED         REVLOW 100MG TABLETS (LASAIDITAN)         MIGRANE TREATMENT         Approved         1           3963         UNSPECIFIED         REVLOW 100MG TABLETS (LASAIDITAN)         MIGRANE TREATMENT         Approved         1           3963         UNSPECIFIED         REVLOW 100MG TABLETS (LASAIDITAN)         MIGRANE TREATMENT         Approved         1           3964         UNSP	3963	UNSPECIFIED	REVATIO 20MG TABLET	ANTIHYPERTENSIVE	Approved	1
8966         HEMATOLOCY & ONCOLOGY         REV.IMID         ANTINEDPLASTICS         Approved         1           3983         PHYSICIAN, ONCOLOGY MEDICAL         REV.IMID         ANTINEDPLASTICS         Approved         1           3983         UNSPECIFIED         REV.IMID         ANTINEDPLASTICS         Approved         1           3983         UNSPECIFIED         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Denied         1           3983         INTERNAL MEDICINE         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Approved         1           3983         INTERNAL MEDICINE         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Approved         1           3983         UNSPECIFIED         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Approved         1           3983         UNSPECIFIED         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Approved         1           3983         UNSPECIFIED         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Approved         1           3983         UNSPECIFIED         REV.OW 100MG TABLETS (LASMIDITAN)         MIGRAINETREATMENT         Approved         2           3983         UNSPECIFIED         REV.OW	3956	HEMATOLOGY	REVLIMID	ANTINEOPLASTICS	Approved	1
3983         PHYSICIAN, ONCOLOGY, MEDICAL         REVUMID         ANTINEOPLASTICS         Approved         1           3983         UNSPECIFIED         REVVOW 100MG ORTABS         MICRANIE TREATMENT         Approved         1           3983         ANESTHESIOLOGY         BEYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3983         INTERNAL MEDICINE         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3985         NUSSE PRACTITIONER, FAMILY HEALTH         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MICRANIE TREATMENT         Approved         1 <t< td=""><td>3951</td><td>HEMATOLOGY &amp; ONCOLOGY</td><td>REVLIMID</td><td>ANTINEOPLASTICS</td><td>Approved</td><td>1</td></t<>	3951	HEMATOLOGY & ONCOLOGY	REVLIMID	ANTINEOPLASTICS	Approved	1
3833         UNSPECIFIED         REYVOW 100MG OR TABS         MIGRAINE TREATMENT         Approved         1           3853         ANESTHESIOLOGY         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Denied         1           3863         INTERNAL MEDICINE         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3865         NURSE RRACTITIONER, FAMILY HEALTH         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3863         PHYSICIAN ASSISTANT, UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3863         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3863         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3863         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3863         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3863         UNSPECIFIED         RIVORD TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1	3956	HEMATOLOGY & ONCOLOGY	REVLIMID	ANTINEOPLASTICS	Approved	1
3983         ANESTHESIOLOGY         REYVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Denied         1           3983         INTERNAL MEDICINE         REYVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         NURSE PRACTITIONER, FAMILY HEALTH         REYVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         REYVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         REVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         REVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         REVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         REVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         DERMATOLOGY         REVOW 100MGTABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         2	3963	PHYSICIAN, ONCOLOGY, MEDICAL	REVLIMID	ANTINEOPLASTICS	Approved	1
3983         INTERNAL MEDICINE         REYVOW 100MG TABLETS ILASMIDITANI)         MIGRAINE TREATMENT         Approved         1           3965         NURSE PRACTITIONER, FAMILY HEALTH         REYVOW 100MG TABLETS ILASMIDITANI         MIGRAINE TREATMENT         Approved         1           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         REYVOW 100MG TABLETS ILASMIDITANI         MIGRAINE TREATMENT         Approved         1           3963         UNSPECIFIED         REVYOW 100MG TABLETS ILASMIDITANI         MIGRAINE TREATMENT         Approved         1           3963         UNSPECIFIED         REVYOW 100MG TABLETS ILASMIDITANI         DERMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         RHOFADE 1% EXCREA         DERMATOLOGICAL AGENTS         Approved         2           3963         USBRATOLOGY         RHOFADE 1% EXCREA         DERMATOLOGY         Approved         2           3965         DERMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/MARDS         Approved         2           3963         PARMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/MARDS         Approved         1           3963         PARMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/MARDS         Approved         1           3963         PARMATOLOGY<	3963	UNSPECIFIED	REYVOW 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3966         NURSE PRACTITIONER, FAMILY HEALTH         REVYOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         REVYOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3963         UNSPECIFIED         REVYOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3963         UNSPECIFIED         RHOFADE 1 % FOPICAL CREAM         DERMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         RHOFADE 1 % FOPICAL CREAM         DERMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         RHOFADE 1 % EXCREA         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         FAMILY PRACTICE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3961         INTERNAL M	3963	ANESTHESIOLOGY	REYVOW 100MG TABLETS (LASMIDITAN)	MIGRAINE TREATMENT	Denied	1
3963         PHYSICIAN ASSISTANT UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3983         UNSPECIFIED         RHOFADE 1 % TOPICAL CREAM         DERMATOLOGICAL AGENTS         Approved         1           3983         UNSPECIFIED         RHOFADE 1 % EX CREA         DERMATOLOGICAL AGENTS         Approved         2           3986         DERMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         4           3986         DERMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3986         DERMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3986         DERMATOLOGY         RINVOO 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3986         PAMILY PRACTICE         RINVOO 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3986         INTERNAL MEDICINE         RINVOO 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3986         INTERNAL MEDICINE         RINVOO 15MG	3963	INTERNAL MEDICINE	REYVOW 100MG TABLETS (LASMIDITAN)	MIGRAINE TREATMENT	Approved	1
3963         UNSPECIFIED         REYVOW 100MG TABLETS (LASMIDITAN)         MIGRAINE TREATMENT         Approved         1           3963         UNSPECIFIED         RHOFADE 1 % TOPICAL CREAM         DERMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         RHOFADE 1 % EX CREA         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3966         FAMILY PRACTICE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3966         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3961         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMA	3965	NURSE PRACTITIONER, FAMILY HEALTH	REYVOW 100MG TABLETS (LASMIDITAN)	MIGRAINE TREATMENT	Approved	1
3963         UNSPECIFIED         RHOFADE 1 % TOPICAL CREAM         DERMATOLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         RHOFADE 1% EX CREA         DERMATOLOGY         Approved         2           3963         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         4           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3963         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Denied         1           3963         FAMILY PRACTICE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3964         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3965         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3966         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         A	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	REYVOW 100MG TABLETS (LASMIDITAN)	MIGRAINE TREATMENT	Approved	1
3963         UNSPECIFIED         RHOFADE 1% EX CREA         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         4           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         2           3966         DERMATOLOGY         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         FAMILY PRACTICE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3963         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3964         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3965         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS         Approved         1           3966         INTERNAL MEDICINE         RINVOQ 15MG         IMMUNOSUPPRESSIVES/DMARDS	3963	UNSPECIFIED	REYVOW 100MG TABLETS (LASMIDITAN)	MIGRAINE TREATMENT	Approved	1
3963DERMATOLOGYRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved43956DERMATOLOGYRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved23965DERMATOLOGYRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963FAMILY PRACTICERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSDenied13964FAMILY PRACTICERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13966INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13961INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13965INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13966INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13966INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved43963NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13964NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13969PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13964PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIM	3963	UNSPECIFIED	RHOFADE 1 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956DERMATOLOGYRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved23965DERMATOLOGYRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963FAMILY PRACTICERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSDenied13956FAMILY PRACTICERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13966INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13961INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13965INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13966NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved43963NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13969NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13969NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13969PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13964PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved23963PHYSICIAN ASSI	3963	UNSPECIFIED	RHOFADE 1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3965DERMATOLOGYRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963FAMILY PRACTICERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSDenied13956FAMILY PRACTICERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSDenied23956INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13961INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13965INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13966INTERNAL MEDICINERINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13969NURSE PRACTITIONER, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13960PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13964PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13963PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved13964PHYSICIAN ASSISTANT, UNSPECIFIEDRINVOQ 15MGIMMUNOSUPPRESSIVES/DMARDSApproved23964PHYSICIA	3963	DERMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
FAMILY PRACTICE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3963 FAMILY PRACTICE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 2 3956 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 2 3956 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3961 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3965 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3966 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2	3956	DERMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
FAMILY PRACTICE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 2  3956 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 2  3956 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3961 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3965 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3966 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3968 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3965	DERMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
NITERNAL MEDICINE   RINVOQ 15MG   IMMUNOSUPPRESSIVES/DMARDS   Approved   1	3963	FAMILY PRACTICE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 2  3966 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3961 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3965 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 4  3963 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2	3956	FAMILY PRACTICE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
SPECIAL MEDICINE   RINVOQ 15MG   IMMUNOSUPPRESSIVES/DMARDS   Approved   1	3963	INTERNAL MEDICINE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3965 INTERNAL MEDICINE RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 4 3963 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2	3963	INTERNAL MEDICINE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3966 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 4  3963 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1	3956	INTERNAL MEDICINE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3961	INTERNAL MEDICINE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2  3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3965	INTERNAL MEDICINE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3956	NURSE PRACTITIONER, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956 NURSE PRACTITIONER, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3963	NURSE PRACTITIONER, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3969	NURSE PRACTITIONER, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3956	NURSE PRACTITIONER, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Approved 2 3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3969	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3964	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963 PHYSICIAN ASSISTANT, UNSPECIFIED RINVOQ 15MG IMMUNOSUPPRESSIVES/DMARDS Denied 1	3964	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
3956	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3963	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
3951	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3965	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3961	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3969	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3963	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	10
3956	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	6
3963	DERMATOLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3956	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3961	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	RINVOQ 45MG + 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	RINVOQ 45MG + 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	RINVOQ 45MG + 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	GASTROENTEROLOGY	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	GASTROENTEROLOGY	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	UNSPECIFIED	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PULMONARY DISEASES	RIOCIGUAT	ANTIHYPERTENSIVE	Approved	1

FAMILY PRACTICE RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3963 INTERNAL MEDICINE RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3966 INTERNAL MEDICINE RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3956 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3956 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3963 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3963 NEUROLOGY RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied  3963 NURSE PRACTITIONER, UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied  3964 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied  3965 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied  3966 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied  3967 FAMILY PRACTICE RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied  3968 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied  3969 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied  3960 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved  3956 PULMONARY DISEASES ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1 1 1 1 1 1
3956 INTERNAL MEDICINE RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Approved 3963 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3963 NEUROLOGY RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3963 NURSE PRACTITIONER, UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3964 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3966 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3963 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Approved 3963 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3963 NEUROLOGY RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3963 NURSE PRACTITIONER, UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3966 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3967 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3968 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Approved 3969 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3960 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Approved 3963 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3963 NEUROLOGY RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3963 NURSE PRACTITIONER, UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3966 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3964 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	<u>'</u>
3963 UNSPECIFIED RIZATRIPTAN NON-NARCOTIC ANALGESICS Denied 3963 NEUROLOGY RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3963 NURSE PRACTITIONER, UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3966 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Approved 3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3966 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3963NEUROLOGYRIZATRIPTAN ODTNON-NARCOTIC ANALGESICSDenied3963NURSE PRACTITIONER, UNSPECIFIEDRIZATRIPTAN ODTNON-NARCOTIC ANALGESICSDenied3956UNSPECIFIEDRIZATRIPTAN ODTNON-NARCOTIC ANALGESICSApproved3962FAMILY PRACTICERIZATRIPTAN TABLETSNON-NARCOTIC ANALGESICSDenied3963FAMILY PRACTICERIZATRIPTAN TABLETSNON-NARCOTIC ANALGESICSDenied3956INTERNAL MEDICINEROFLUMILASTPHOSPHODIESTERASE 4 INHIBITORApproved	, '
3963 NURSE PRACTITIONER, UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Approved 3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3956 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Denied 3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Approved 3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3956 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 UNSPECIFIED RIZATRIPTAN ODT NON-NARCOTIC ANALGESICS Approved 3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3956 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3962 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3956 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3963 FAMILY PRACTICE RIZATRIPTAN TABLETS NON-NARCOTIC ANALGESICS Denied 3956 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 INTERNAL MEDICINE ROFLUMILAST PHOSPHODIESTERASE 4 INHIBITOR Approved	1
	1
3956 PLILMONARY DISEASES ROFI LIMILAST 250MCG OR TARS PHOSPHODIESTERASE A INHIBITOR Approved	1
TO ENTONATION DISEASES THOU PROPERTY OF THE PR	3
3956 FAMILY PRACTICE ROFLUMILAST 500MCG OR TABS PHOSPHODIESTERASE 4 INHIBITOR Approved	2
3963 FAMILY PRACTICE ROFLUMILAST 500MCG OR TABS PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 NURSE PRACTITIONER, UNSPECIFIED ROFLUMILAST 500MCG OR TABS PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 PULMONARY DISEASES ROFLUMILAST 500MCG OR TABS PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3956 UNSPECIFIED ROFLUMILAST 500MCG OR TABS PHOSPHODIESTERASE 4 INHIBITOR Approved	1
3963 FAMILY PRACTICE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	4
3964 FAMILY PRACTICE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3963 FAMILY PRACTICE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Denied	4
3951 FAMILY PRACTICE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3969 FAMILY PRACTICE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3965 FAMILY PRACTICE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	2
3963 INTERNAL MEDICINE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Denied	4
3965 INTERNAL MEDICINE RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3964 NURSE PRACTITIONER, FAMILY HEALTH RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3963 NURSE PRACTITIONER, FAMILY HEALTH RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Denied	3
3962 NURSE PRACTITIONER, FAMILY HEALTH RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3963 NURSE PRACTITIONER, FAMILY HEALTH RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3963 NURSE PRACTITIONER, UNSPECIFIED RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	2
3963 NURSE PRACTITIONER, UNSPECIFIED RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Denied	1
3964 NURSE PRACTITIONER, UNSPECIFIED RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3964 PHYSICIAN ASSISTANT, UNSPECIFIED RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	1
3963 UNSPECIFIED RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Denied	
3963 UNSPECIFIED RYBELSUS (SEMAGLUTIDE) ANTIDIABETICS Approved	8

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3965	UNSPECIFIED	RYBELSUS (SEMAGLUTIDE)	ANTIDIABETICS	Approved	5
3964	UNSPECIFIED	RYBELSUS (SEMAGLUTIDE)	ANTIDIABETICS	Denied	1
3964	UNSPECIFIED	RYBELSUS (SEMAGLUTIDE)	ANTIDIABETICS	Approved	2
3965	UNSPECIFIED	RYBELSUS (SEMAGLUTIDE)	ANTIDIABETICS	Denied	1
3963	INTERNAL MEDICINE	RYBELSUS 14MG OR TABS	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	RYBELSUS 14MG OR TABS	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	RYBELSUS 14MG OR TABS	ANTIDIABETICS	Approved	1
3951	UNSPECIFIED	RYBELSUS 14MG OR TABS	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	RYBELSUS 14MG OR TABS	ANTIDIABETICS	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	1
3951	FAMILY PRACTICE	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	2
3963	FAMILY PRACTICE	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	4
3963	FAMILY PRACTICE	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Denied	1
3962	FAMILY PRACTICE	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	1
3951	INTERNAL MEDICINE	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	1
3963	INTERNAL MEDICINE	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	1
3963	NEUROLOGY	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Approved	9
3963	UNSPECIFIED	RYBELSUS 3MG OR TABS	ANTIDIABETICS	Denied	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	1
3963	FAMILY PRACTICE	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	2
3951	FAMILY PRACTICE	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	1
3963	PEDIATRICS	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	9
3951	UNSPECIFIED	RYBELSUS 7MG OR TABS	ANTIDIABETICS	Approved	1
3965	UNSPECIFIED	RYDAPT	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	SAPROPTERIN	ENZYMES	Approved	1
3956	FAMILY PRACTICE	SAVELLA (MILNACIPRAN)	ANALGESIC	Approved	1
3956	INTERNAL MEDICINE	SAVELLA (MILNACIPRAN)	ANALGESIC	Denied	1
3956	UNSPECIFIED	SAVELLA (MILNACIPRAN)	ANALGESIC	Denied	2
3963	FAMILY PRACTICE	SAVELLA 100MG OR TABS	ANALGESIC	Approved	1
3956	INTERNAL MEDICINE	SAVELLA 25MG OR TABS	ANALGESIC	Approved	1
3956	FAMILY PRACTICE	SAVELLA 50MG OR TABS	ANALGESIC	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	SAVELLA 50MG OR TABS	ANALGESIC	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, UNSPECIFIED	SAVELLA 50MG ORTABS	ANALGESIC	Approved	1
3956	UNSPECIFIED	SAVELLA 50MG ORTABS	ANALGESIC	Approved	1
3964	UNSPECIFIED	SAXENDA (LIRAGLUTIDE)	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	SEMAGLUTIDE (1 MG/DOSE) 4 MG/3ML SUBCUTA- NEOUS SOLUTION PEN-INJECTOR	ANTIDIABETICS	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	SEMAGLUTIDE (OZEMPIC) 0.25 MG OR 0.5 MG (2 MG/3 ML) PEN	ANTIDIABETICS	Approved	1
3963	FAMILY PRACTICE	SEMAGLUTIDE 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	ANTIDIABETICS	Approved	1
3963	INTERNAL MEDICINE	SEMAGLUTIDE 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	ANTIDIABETICS	Approved	1
3951	UNSPECIFIED	SEMAGLUTIDE 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	SEMAGLUTIDE 0.25 MG OR 0.5 MG (2 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	ANTIDIABETICS	Approved	1
3963	DERMATOLOGY	SERNIVO (BRAND ONLY) (BETAMETHASONE DIPROP) SPRAY	TOPICAL CORTICOSTEROID	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	SERNIVO (BRAND ONLY) (BETAMETHASONE DIPROP) SPRAY	TOPICAL CORTICOSTEROID	Approved	2
3963	UNSPECIFIED	SERNIVO (BRAND ONLY) (BETAMETHASONE DIPROP) SPRAY	TOPICAL CORTICOSTEROID	Approved	1
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	4
3965	FAMILY PRACTICE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3951	FAMILY PRACTICE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3965	FAMILY PRACTICE	SILDENAFIL 20MG TABLET	VASODILATORS	Approved	1
3963	INTERNAL MEDICINE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3969	INTERNAL MEDICINE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3951	CARDIOLOGY	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	5
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	3
3951	INTERNAL MEDICINE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3969	INTERNAL MEDICINE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Approved	1
3956	PULMONARY DISEASES	SILDENAFIL 20MG TABLETS	VASODILATORS	Approved	1
3951	RHEUMATOLOGY	SILDENAFIL 20MG TABLETS	VASODILATORS	Approved	1
3963	UROLOGY	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	11
3964	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	2
3951	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Approved	1
3956	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Approved	2
3965	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	UNSPECIFIED	SILDENAFIL SUSPENSION	VASODILATORS	Approved	1
3963	UNSPECIFIED	SILDENAFIL SUSPENSION	VASODILATORS	Denied	1
3956	GASTROENTEROLOGY	SIMPONI 100MG	ANTIARTHRITICS	Approved	1
3956	RHEUMATOLOGY	SIMPONI 50MG	ANTIARTHRITICS	Denied	1
3956	FAMILY PRACTICE	SIMVASTATIN 80MG	HYPERCHOLESTEROLEMIA	Approved	2
3956	FAMILY PRACTICE	SIMVASTATIN 80MG OR TABS	HYPERCHOLESTEROLEMIA	Approved	2
3963	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3963	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3
3951	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	DERMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	9
3956	DERMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3963	DERMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	10
3951	DERMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3951	DERMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3963	DERMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	3
3963	FAMILY PRACTICE	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3956	GASTROENTEROLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	INTERNAL MEDICINE	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	INTERNAL MEDICINE	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3
3956	NURSE PRACTITIONER, ACUTE CARE	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	4
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	RHEUMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3956	RHEUMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	4

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	RHEUMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3956	RHEUMATOLOGY	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	2
3963	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	11
3965	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3956	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	20
3951	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	4
3956	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	5
3964	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3961	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	UNSPECIFIED	SKYRIZI 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	2
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3951	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	DERMATOLOGY	SKYRIZI 360MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	SKYRIZI 360MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 360MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	SKYRIZI 360MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3956	UNSPECIFIED	SKYRIZI 360MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3951	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	UNSPECIFIED	SKYRIZI 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	GASTROENTEROLOGY	SKYRIZI 600MG + 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3
3963	GASTROENTEROLOGY	SKYRIZI 600MG + 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	SKYRIZI 600MG + 360MG + 180MG + 150MG + 75MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3965	DERMATOLOGY	SKYRIZI PEN 150MG/ML SC SOAJ	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	UNSPECIFIED	SLYND 4MG TABLETS	CONTRACEPTIVES	Denied	1
3956	FAMILY PRACTICE	SOLIQUA (INSULIN GLARGINE-LIXISENATIDE)	ANTIDIABETICS	Denied	2
3963	UNSPECIFIED	SOLIQUA (INSULIN GLARGINE-LIXISENATIDE)	ANTIDIABETICS	Denied	1
3963	UNSPECIFIED	SOLIQUA (INSULIN GLARGINE-LIXISENATIDE)	ANTIDIABETICS	Approved	1
3956	UNSPECIFIED	SOLIQUA (INSULIN GLARGINE-LIXISENATIDE)	ANTIDIABETICS	Denied	1
3963	FAMILY PRACTICE	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	2
3956	FAMILY PRACTICE	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	2
3951	FAMILY PRACTICE	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1

8569         INTERNAL MEDICINE         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvade         4           8383         INTERNAL MEDICINE         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvad         1           8366         NURSE PRACTITIONER, FAMILY HEALTH         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvad         1           3651         NURSE PRACTITIONER, FAMILY HEALTH         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvad         1           3651         SPORTIS MEDICINE, FAMILY PRACTIC         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvad         4           3656         UNSPECIFED         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvad         4           3658         UNSPECIFED         SOLIULA 100-33UNTMCGMIL SCISOPN         ANTIDIABETICS         Approvad         4           3659         HEMATICLOSY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approvad         1           3650         HEMATICLOSY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approvad         1           3660         HEMATICLOSY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approvad         1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3996   NURSE PRACTITIONER, FAMILY HEALTH   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3961   NURSE PRACTITIONER, FAMILY HEALTH   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3968   PHYSICIAN ASSISTANT, UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3969   UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3969   UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3960   UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3960   UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3960   UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3960   UNSPECIFIED   SOLIQUA 100-33UNT MCGML SC SOPN   ANTIDABETICS   Approved   1   3960   HEMATOLOGY & ONCOLOGY   SOMATULINE DEPOT   SOMATOSTATIN ANALOG   Approved   1   3960   INTERNAL MEDICINE   SOMATULINE DEPOT   SOMATOSTATIN ANALOG   Approved   1   3960   INTERNAL MEDICINE   SOMATULINE DEPOT   SOMATOSTATIN ANALOG   Approved   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Approved   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Approved   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   1   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied   6   3960   UNSPECIFIED   SPRINGS D. 9% EX SUSP   ANTIPARASTICS   Denied	3956	INTERNAL MEDICINE	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	4
3961         NURSE PRACTITIONER, FAMILY HEALTH         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3966         PHYSICIAN ASSISTANT, UNSPECIFED         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3961         SPORTS MEDICINE, FAMILY PRACTICE         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         4           3963         UNSPECIFIED         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         4           3963         UNSPECIFIED         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3966         HEMATIO LORY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATI NANALOG         Approved         1           3967         HEMATIO LORY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATI NANALOG         Approved         1           3968         HEMATIO LORY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATI NANALOG         Approved         1           3969         PEDIATRICS         SPINOSAD 0.9% EX SUSP         ANTIPARASTICS         Approved         1           3966         UNSPECIFIED         SPINOSAD 0.9% EX SUSP         ANTIPARASTICS         Approved         1           3966	3963	INTERNAL MEDICINE	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1
3966         PHYSICIAN ASSISTANT, UNSPECIFIED         SOLIQUA 100-33UNTENCG/MIL SC SOPN         ANTIDIABETICS         Approved         1           3951         SPORTIS MEDICINE, FAMILY PRACTICE         SOLIQUA 100-33UNTENCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3963         UNSPECIFIED         SOLIQUA 100-33UNTENCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3963         UNSPECIFIED         SOLIQUA 100-33UNTENCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3966         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3963         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3963         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3963         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3963         PEDIATRICS         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3963         PEDIATRICS         SPINOSAD SUSPENDED         ANTIPARASTICS         Approved         1           3963         PEDIATRICS	3956	NURSE PRACTITIONER, FAMILY HEALTH	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1
3951         SPORTS MEDICINE, FAMILY PRACTICE         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         4           3956         UNSPECIFIED         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         4           3963         UNSPECIFIED         SOLIOUA 100-33UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3966         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3968         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3966         INTERNAL MEDICINE         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3966         INTERNAL MEDICINE         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3967         PEDIATRICS         SPIRIOSAD 0.9% EX SUSP         ANTIPARASTICS         Approved         1           3968         PEDIATRICS         SPIRIOSAD 0.9% EX SUSP         ANTIPARASTICS         Approved         1           3969         UNSPECIFIED         SPIRIVA HANDIHALER 18MCG CAP         ASTHMA         Denied         1           3963         FAMILY PRACTICE         SPRAVATO         ANTI	3951	NURSE PRACTITIONER, FAMILY HEALTH	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1
3956   UNSPECIFIED	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1
3963         UNSPECIFIED         SOLIOUA 10033UNT-MCG/ML SC SOPN         ANTIDIABETICS         Approved         1           3966         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3963         HEMATOLOGY & ONCOLOGY         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3966         INTERNAL MEDICINE         SOMATULINE DEPOT         SOMATOSTATIN ANALOG         Approved         1           3967         PEDIATRICS         SPINOSAD 0.9% EX SUSP         ANTIPARASITICS         Approved         1           3966         PEDIATRICS         SPINOSAD 0.9% EX SUSP         ANTIPARASITICS         Approved         1           3966         PEDIATRICS         SPINOSAD 0.9% EX SUSP         ANTIPARASITICS         Approved         1           3966         UNSPECIFIED         SPINOSAD SUSPENSION         ANTIPARASITICS         Denied         1           3963         UNSPECIFIED         SPINOSAD SUSPENSION         ANTIPARASITICS         Denied         1           3963         UNSPECIFIED         SPRAVATO         ANTIDEPRESSANTS         Denied         1           3963         PARAILY PRACTICE         SPRAVATO         ANTIDEPRESSANTS         Denied         1 <td>3951</td> <td>SPORTS MEDICINE, FAMILY PRACTICE</td> <td>SOLIQUA 100-33UNT-MCG/ML SC SOPN</td> <td>ANTIDIABETICS</td> <td>Approved</td> <td>1</td>	3951	SPORTS MEDICINE, FAMILY PRACTICE	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1
3966 HEMATOLOGY & ONCOLOGY SOMATULINE DEPOT SOMATOSTATIN ANALOG Approved 1 3963 HEMATOLOGY & ONCOLOGY SOMATULINE DEPOT SOMATOSTATIN ANALOG Approved 1 3966 INTERNAL MEDICINE SOMATULINE DEPOT SOMATOSTATIN ANALOG Approved 1 3968 PEDIATRICS SPINOSAD 0.9% EX SUSP ANTIPARASITICS Approved 1 3969 PEDIATRICS SPINOSAD 0.9% EX SUSP ANTIPARASITICS Approved 1 3960 UNSPECIFIED SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3961 UNSPECIFIED SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3963 FAMILY PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3963 GENERAL PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3964 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3965 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3966 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3967 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3968 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3960 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3960 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3961 PEDIATRICS SPRAVATO ANTIDEPRESSANTS Denied 3 3963 NURSE PRACTITIONER, UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 3 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 6 3964 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3965 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3966 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3967 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3968 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3969 SUNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1 3969 SUNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1 3960 SUNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1 3960 SUNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1 3961 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1	3956	UNSPECIFIED	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	4
HEMATOLOGY & ONCOLOGY   SOMATULINE DEPOT   SOMATOSTATIN ANALOG   Approved   1	3963	UNSPECIFIED	SOLIQUA 100-33UNT-MCG/ML SC SOPN	ANTIDIABETICS	Approved	1
3956 INTERNAL MEDICINE SOMATULINE DEPOT SOMATOSTATIN ANALOG Approved 1 3963 PEDIATRICS SPINOSAD 0.9% EX SUSP ANTIPARASITICS Approved 1 3956 PEDIATRICS SPINOSAD 0.9% EX SUSP ANTIPARASITICS Approved 1 3956 UNSPECIFIED SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3956 UNSPECIFIED SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3956 UNSPECIFIED SPIRIVA HANDIHALER 18MCG CAP ASTHMA Denied 1 3963 FAMILY PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3963 GENERAL PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3964 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3964 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3960 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3960 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3960 NURSE PRACTITIONER, UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 3 3961 PEDIATRICS SPRAVATO ANTIDEPRESSANTS Denied 6 3962 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 6 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3960 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3960 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3960 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3961 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3964 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3965 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3966 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1	3956	HEMATOLOGY & ONCOLOGY	SOMATULINE DEPOT	SOMATOSTATIN ANALOG	Approved	1
3963PEDIATRICSSPINOSAD 0.9% EX SUSPANTIPARASITICSApproved13966PEDIATRICSSPINOSAD 0.9% EX SUSPANTIPARASITICSApproved13956UNSPECIFIEDSPINOSAD SUSPENSIONANTIPARASITICSDenied13963UNSPECIFIEDSPIRIVA HANDIHALER 18MCG CAPASTHMADenied13963FAMILY PRACTICESPRAVATOANTIDEPRESSANTSDenied13963GENERAL PRACTICESPRAVATOANTIDEPRESSANTSApproved23963NURSE PRACTITIONER, FAMILY HEALTHSPRAVATOANTIDEPRESSANTSDenied13964NURSE PRACTITIONER, FAMILY HEALTHSPRAVATOANTIDEPRESSANTSApproved13963NURSE PRACTITIONER, PSYCHIATRICSPRAVATOANTIDEPRESSANTSDenied13969NURSE PRACTITIONER, PSYCHIATRICSPRAVATOANTIDEPRESSANTSDenied13963NURSE PRACTITIONER, UNSPECIFIEDSPRAVATOANTIDEPRESSANTSDenied33961PEDIATRICSSPRAVATOANTIDEPRESSANTSDenied33963PSYCHIATRYSPRAVATOANTIDEPRESSANTSDenied63963PSYCHIATRYSPRAVATOANTIDEPRESSANTSDenied13963PSYCHIATRYSPRAVATOANTIDEPRESSANTSApproved13963PSYCHIATRYSPRAVATOANTIDEPRESSANTSApproved13963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved23963UNSPECIFIED	3963	HEMATOLOGY & ONCOLOGY	SOMATULINE DEPOT	SOMATOSTATIN ANALOG	Approved	1
3956 PEDIATRICS SPINOSAD 0.9% EX SUSP ANTIPARASITICS Approved 1 3956 UNSPECIFIED SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3956 UNSPECIFIED SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3956 UNSPECIFIED SPINOSAD SUSPENSION ANTIDEPRESSANTS Denied 1 3963 FAMILY PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3963 GENERAL PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3964 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3965 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3966 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3960 NURSE PRACTITIONER, UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 1 3961 PEDIATRICS SPRAVATO ANTIDEPRESSANTS Denied 3 3962 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 6 3962 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3964 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 1 3965 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3966 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3966 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3966 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3967 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3968 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3969 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3969 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3960 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3961 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3964 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3965 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2	3956	INTERNAL MEDICINE	SOMATULINE DEPOT	SOMATOSTATIN ANALOG	Approved	1
SPINOSAD SUSPENSION ANTIPARASITICS Denied 1 3956 UNSPECIFIED SPIRIVA HANDIHALER 18MCG CAP ASTHMA Denied 1 3963 FAMILY PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3963 GENERAL PRACTICE SPRAVATO ANTIDEPRESSANTS Denied 1 3963 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3964 NURSE PRACTITIONER, FAMILY HEALTH SPRAVATO ANTIDEPRESSANTS Denied 1 3965 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3966 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3967 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1 3968 NURSE PRACTITIONER, UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 1 3969 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 3 3960 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 6 3961 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3962 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3964 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 1 3965 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3966 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3967 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3968 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1 3969 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3969 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1 3960 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2	3963	PEDIATRICS	SPINOSAD 0.9% EX SUSP	ANTIPARASITICS	Approved	1
3956UNSPECIFIEDSPIRIVA HANDIHALER 18MCG CAPASTHMADenied13963FAMILY PRACTICESPRAVATOANTIDEPRESSANTSDenied13963GENERAL PRACTICESPRAVATOANTIDEPRESSANTSApproved23963NURSE PRACTITIONER, FAMILY HEALTHSPRAVATOANTIDEPRESSANTSDenied13964NURSE PRACTITIONER, FAMILY HEALTHSPRAVATOANTIDEPRESSANTSApproved13963NURSE PRACTITIONER, PSYCHIATRICSPRAVATOANTIDEPRESSANTSDenied13969NURSE PRACTITIONER, PSYCHIATRICSPRAVATOANTIDEPRESSANTSDenied13963NURSE PRACTITIONER, UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved23951PEDIATRICSSPRAVATOANTIDEPRESSANTSDenied33963PSYCHIATRYSPRAVATOANTIDEPRESSANTSDenied63962PSYCHIATRYSPRAVATOANTIDEPRESSANTSDenied13963PSYCHIATRYSPRAVATOANTIDEPRESSANTSApproved13961UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved13963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved23963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved23963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved2	3956	PEDIATRICS	SPINOSAD 0.9% EX SUSP	ANTIPARASITICS	Approved	1
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NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1  3969 NURSE PRACTITIONER, PSYCHIATRIC SPRAVATO ANTIDEPRESSANTS Denied 1  3963 NURSE PRACTITIONER, UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2  3951 PEDIATRICS SPRAVATO ANTIDEPRESSANTS Denied 3  3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 6  3962 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1  3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1  3963 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Denied 1  3964 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1  3965 PSYCHIATRY SPRAVATO ANTIDEPRESSANTS Approved 1  3966 ANTIDEPRESSANTS APPROVED 1  3967 ANTIDEPRESSANTS APPROVED 1  3968 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS APPROVED 1  3969 ANTIDEPRESSANTS APPROVED 2  3960 ANTIDEPRESSANTS APPROVED 3  3960 ANTIDEPRESSANTS APPROVED 3  3960 ANTIDEPRESSANTS APPROVED 3	3963	NURSE PRACTITIONER, FAMILY HEALTH	SPRAVATO	ANTIDEPRESSANTS	Denied	1
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3962PSYCHIATRYSPRAVATOANTIDEPRESSANTSDenied13963PSYCHIATRYSPRAVATOANTIDEPRESSANTSApproved13951UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved13963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved23963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSDenied3	3951	PEDIATRICS	SPRAVATO	ANTIDEPRESSANTS	Denied	3
3963PSYCHIATRYSPRAVATOANTIDEPRESSANTSApproved13951UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved13963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSApproved23963UNSPECIFIEDSPRAVATOANTIDEPRESSANTSDenied3	3963	PSYCHIATRY	SPRAVATO	ANTIDEPRESSANTS	Denied	6
3951 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1 3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 3	3962	PSYCHIATRY	SPRAVATO	ANTIDEPRESSANTS	Denied	1
3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 2 3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 3	3963	PSYCHIATRY	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3963 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Denied 3	3951	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	1
	3963	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	2
3964 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1	3963	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Denied	3
	3964	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3962 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1	3962	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3965 UNSPECIFIED SPRAVATO ANTIDEPRESSANTS Approved 1	3965	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3963 HEMATOLOGY & ONCOLOGY SPRYCEL ANTINEOPLASTICS Approved 2	3963	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	2
3951 HEMATOLOGY & ONCOLOGY SPRYCEL ANTINEOPLASTICS Approved 1	3951	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	1
3956 HEMATOLOGY & ONCOLOGY SPRYCEL ANTINEOPLASTICS Denied 1	3956	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Denied	1
3956 INTERNAL MEDICINE SPRYCEL ANTINEOPLASTICS Approved 2	3956	INTERNAL MEDICINE	SPRYCEL	ANTINEOPLASTICS	Approved	2
3963 UNSPECIFIED SPRYCEL ANTINEOPLASTICS Approved 1	3963	UNSPECIFIED	SPRYCEL	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	SPRYCEL	ANTINEOPLASTICS	Approved	2
3962	UNSPECIFIED	STELARA 45MG/0.5ML	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	DERMATOLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3961	DERMATOLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	DERMATOLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3964	DERMATOLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	EMERGENCY MEDICINE	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	FAMILY PRACTICE	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3956	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	DERMATOLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	DERMATOLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	EMERGENCY MEDICINE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3956	FAMILY PRACTICE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	FAMILY PRACTICE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3956	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
3956	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3963	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	GENERAL PRACTICE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	INTERNAL MEDICINE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PEDIATRICS	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PEDIATRICS	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PSYCHIATRY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	5
3963	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	6
3965	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3962	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	STIVARGA	ANTINEOPLASTICS	Approved	1
3965	HEMATOLOGY & ONCOLOGY	STIVARGA	ANTINEOPLASTICS	Approved	1
3956	GASTROENTEROLOGY	SUCRAID (SACROSIDASE)	METABOLIC ENZYMES	Approved	1
3956	UNSPECIFIED	SUCRAID (SACROSIDASE)	METABOLIC ENZYMES	Denied	1
3956	UNSPECIFIED	SUCRAID 8500UNIT/ML OR SOLN	METABOLIC ENZYMES	Approved	1
3963	HEMATOLOGY & ONCOLOGY	SUCRALFATE 1GM/10ML SUS	GASTROINTESTINAL AGENTS	Approved	1
3962	FAMILY PRACTICE	SUMATRIPTAN 20MG NASAL SPRAY	NON-NARCOTIC ANALGESICS	Denied	1
3956	PEDIATRICS	SUMATRIPTAN 20MG/ACT NA SOLN	NON-NARCOTIC ANALGESICS	Approved	1
3963	NEUROLOGY	SUMATRIPTAN AUTO-INJECTOR 6MG/0.5ML	NON-NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	SUMATRIPTAN SPRAY 20MG	NON-NARCOTIC ANALGESICS	Approved	1
3951	UNSPECIFIED	SUMATRIPTAN SPRAY 20MG	NON-NARCOTIC ANALGESICS	Approved	1
3956	FAMILY PRACTICE	SUMATRIPTAN TABLET	NON-NARCOTIC ANALGESICS	Denied	4
3956	FAMILY PRACTICE	SUMATRIPTANTABLET	NON-NARCOTIC ANALGESICS	Approved	1
3956	INTERNAL MEDICINE	SUMATRIPTAN TABLET	NON-NARCOTIC ANALGESICS	Denied	1
3963	NEUROLOGY	SUMATRIPTAN TABLET	NON-NARCOTIC ANALGESICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	SUMATRIPTANTABLET	NON-NARCOTIC ANALGESICS	Denied	1
3956	UNSPECIFIED	SUMATRIPTAN TABLET	NON-NARCOTIC ANALGESICS	Denied	5
3956	UNSPECIFIED	SUMATRIPTANTABLET	NON-NARCOTIC ANALGESICS	Approved	2
3956	FAMILY MEDICINE	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Approved	2
3956	FAMILY PRACTICE	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Approved	1
3963	FAMILY PRACTICE	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Denied	1
3956	NURSE PRACTITIONER, ACUTE CARE	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Denied	1
3963	PULMONARY DISEASES	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Approved	1

DASPEDITED   SUNDSTITUTED   SUNDSTITUTED   Device   1   1   1   1   1   1   1   1   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
See	3961	UNSPECIFIED	SUNOSI (SOLRIAMFETOL)	NARCOLEPSY AGENTS	Denied	1
SP66   INTERNAL MEDICINE	3963	FAMILY PRACTICE	SUNOSI 75MG OR TABS	NARCOLEPSY AGENTS	Approved	1
STANLAR GRAND ONLY IFLUCCINOLONS OLL   TOPICAL CORTICOSTEROID   Approved   1	3963	UNSPECIFIED	SUPPRELIN LA	HORMONES/HORMONE MODIFIERS	Denied	1
	3956	INTERNAL MEDICINE	SYMLINPEN 60 1500MCG/1.5ML SC SOPN	ANTIDIABETICS	Approved	1
SPEAK   NITERNAL MEDICINE   SYNLARDY (EMBACLIFLOZIN METFORMIN)   ANTIDIABETICS   Approved   1	3963	DERMATOLOGY		TOPICAL CORTICOSTEROID	Approved	1
SPECIAL NUMBER   SPECIFIED   SYNLARDY   EMPRICIFIC DIAMETER   SATURABRICS   Approved   1	3963	FAMILY PRACTICE	SYNJARDY (EMPAGLIFLOZIN-METFORMIN)	ANTIDIABETICS	Approved	1
3966   UNSPECIFIED	3956	INTERNAL MEDICINE	SYNJARDY (EMPAGLIFLOZIN-METFORMIN)	ANTIDIABETICS	Approved	1
3966   FAMILY PRACTICE	3963	REGISTERED NURSE, UNSPECIFIED	SYNJARDY (EMPAGLIFLOZIN-METFORMIN)	ANTIDIABETICS	Approved	1
Syntardy 12,5-1000Mg or Tabs	3956	UNSPECIFIED	SYNJARDY (EMPAGLIFLOZIN-METFORMIN)	ANTIDIABETICS	Denied	2
SP66   NURSE PRACTITIONER, FAMILY HEALTH   SYNLARDY 12.5-1000MG OR TABS   ANTIDIABETICS   Approved   1	3956	FAMILY PRACTICE	SYNJARDY 12.5-1000MG OR TABS	ANTIDIABETICS	Approved	3
3966	3951	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY 12.5-1000MG OR TABS	ANTIDIABETICS	Approved	1
3963   UNSPECIFIED   SYNJARDY 12.5-1000MG OR TABS   ANTIDIABETICS   Approved   1	3956	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY 12.5-1000MG OR TABS	ANTIDIABETICS	Approved	1
3956   INTERNAL MEDICINE   SYNJARDY 12.5-800MG OR TABS   ANTIDIABETICS   Approved   1	3956	UNSPECIFIED	SYNJARDY 12.5-1000MG OR TABS	ANTIDIABETICS	Approved	4
SPAIL PRACTICE   SYNLARDY 5-1000MG ORTABS   ANTIDIABETICS   Approved   1	3963	UNSPECIFIED	SYNJARDY 12.5-1000MG OR TABS	ANTIDIABETICS	Approved	1
NURSE PRACTITIONER, UNSPECIFIED SYNJARDY 5-1000MG OR TABS ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY 5-1000MG OR TABS ANTIDIABETICS Approved 2  3956 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1  3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5  3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5  3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5  3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 FAMILY PRACTICE SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 ONSPECIFIED SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1  3967 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1  3968 ONSPECIFIED SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1  3969 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1	3951	INTERNAL MEDICINE	SYNJARDY 12.5-500MG OR TABS	ANTIDIABETICS	Approved	1
SYNJARDY S-1000MG ORTABS ANTIDIABETICS Approved 2 3956 FAMILY PRACTICE SYNJARDY S-600MG ORTABS ANTIDIABETICS Approved 2 3963 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 2 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5 3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5 3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 10-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 10-1000MG ORTB24 ANTIDIABETICS Approved 1 3951 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG ORTB24 ANTIDIABETICS Approved 1	3956	FAMILY PRACTICE	SYNJARDY 5-1000MG OR TABS	ANTIDIABETICS	Approved	1
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FAMILY PRACTICE  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Approved  1  3956  FAMILY PRACTICE  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Approved  2  3956  NURSE PRACTITIONER, FAMILY HEALTH  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Denied  1  3956  NURSE PRACTITIONER, FAMILY HEALTH  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Approved  1  3956  PHYSICIAN ASSISTANT, UNSPECIFIED  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Approved  1  3956  UNSPECIFIED  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Approved  5  3956  UNSPECIFIED  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Denied  1  3963  UNSPECIFIED  SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)  ANTIDIABETICS  Denied  1  3956  FAMILY PRACTICE  SYNJARDY XR (ION PROCEED AND PROCEED A	3956	UNSPECIFIED	SYNJARDY 5-1000MG OR TABS	ANTIDIABETICS	Approved	2
9966 FAMILY PRACTICE SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 2 3966 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1 3966 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3966 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3966 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5 3966 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1 3963 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3966 FAMILY PRACTICE SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1 3966 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1 3966 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1 3966 UNSPECIFIED SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Denied 1 3967 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3968 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3969 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3960 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3960 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3960 FAMILY PRACTICE SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3960 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1 3960 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12-5-1000MG OR TB24 ANTIDIABETICS Approved 1	3956	FAMILY PRACTICE	SYNJARDY 5-500MG OR TABS	ANTIDIABETICS	Approved	2
NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1  3966 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3966 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5  3966 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1  3963 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3966 FAMILY PRACTICE SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3969 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Denied 1  3961 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Denied 1  3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3960 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3963	FAMILY PRACTICE	SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)	ANTIDIABETICS	Approved	1
3956   NURSE PRACTITIONER, FAMILY HEALTH   SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)   ANTIDIABETICS   Approved   1	3956	FAMILY PRACTICE	SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)	ANTIDIABETICS	Approved	2
PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5  3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1  3963 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1  3956 FAMILY PRACTICE SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 3  3951 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Denied 1  3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3966 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3967 AND APPROVED 1  3968 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3969 AND APPROVED 1  3960 AN	3956	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)	ANTIDIABETICS	Denied	1
3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 5 3956 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Denied 1 3963 UNSPECIFIED SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR) ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 2 3963 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 3 3951 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Denied 1 3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)	ANTIDIABETICS	Approved	1
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3963 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 10-1000MG OR TB24 ANTIDIABETICS Approved 3 3951 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Denied 1 3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3963	UNSPECIFIED	SYNJARDY XR (EMPAGLIFLOZIN-METFORMIN SR)	ANTIDIABETICS	Approved	1
3956 UNSPECIFIED SYNJARDY XR 10-1000MG ORTB24 ANTIDIABETICS Approved 3 3951 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG ORTB24 ANTIDIABETICS Denied 1 3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG ORTB24 ANTIDIABETICS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG ORTB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG ORTB24 ANTIDIABETICS Approved 1	3956	FAMILY PRACTICE	SYNJARDY XR 10-1000MG OR TB24	ANTIDIABETICS	Approved	2
3951 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Denied 1 3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3963	UNSPECIFIED	SYNJARDY XR 10-1000MG OR TB24	ANTIDIABETICS	Approved	1
3963 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3956	UNSPECIFIED	SYNJARDY XR 10-1000MG OR TB24	ANTIDIABETICS	Approved	3
3956 FAMILY PRACTICE SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3951	FAMILY PRACTICE	SYNJARDY XR 12.5-1000MG ORTB24	ANTIDIABETICS	Denied	1
3963 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1  3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3963	FAMILY PRACTICE	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Approved 1	3956	FAMILY PRACTICE	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	1
	3963	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	1
3963 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR 12.5-1000MG OR TB24 ANTIDIABETICS Denied 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	1
	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Denied	1

Basel         UNSPECIFIED         SYNLARDY XR 125-1000MG ORTE24         ANTDIABETICS         Approved         5           3863         UNSPECIFIED         SYNLARDY XR 125-1000MG ORTE24         ANTDIABETICS         Approved         1           3861         UNSPECIFIED         SYNLARDY XR 125-1000MG ORTE24         ANTDIABETICS         Approved         1           3866         FAMILY PRACTICE         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         1           3861         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         1           3863         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         1           3863         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         1           3861         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         1           3861         NURSE PRACTITIONER, LINSPECIFIED         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         1           3866         UNSPECIFIED         SYNLARDY XR 25-1000MG ORTE24         ANTDIABETICS         Approved         2           3867         UNSPECIFIED         SYNLARDY	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951         UNSPECIFIED         SYNLARDY XR 12.5-1000MG OR TB24         ANTIDIABETICS         Approved         1           3961         FAMILY PRACTICE         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3961         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3968         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3968         INTERNAL MEDICINE         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3961         NURSE PRACTITIONER, IAMILY HEALTH         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3969         PHYSICIAN ASSISTANT UNSPECIFED         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3968         UNSPECIFIED         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         1           3969         PHYSICIAN ASSISTANT UNSPECIFIED         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         2           3969         UNSPECIFIED         SYNLARDY XR 25-1000MG OR TB24         ANTIDIABETICS         Approved         2           3960 <td>3956</td> <td>UNSPECIFIED</td> <td>SYNJARDY XR 12.5-1000MG OR TB24</td> <td>ANTIDIABETICS</td> <td>Approved</td> <td>6</td>	3956	UNSPECIFIED	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	6
3881         FAMILY PRACTICE         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3886         FAMILY PRACTICE         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3886         INTERNAL MEDICINE         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3886         INTERNAL MEDICINE         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3893         NITERNAL MEDICINE         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3896         NIRSE PRACTITIONER, LYSECHED         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3896         PHYSICIAN ASSISTANT, UNSPECIFIED         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3896         UNSPECIFIED         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3896         UNSPECIFIED         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         1           3896         UNSPECIFIED         SYNLARDY XR 26-1000MG OR TR24         ANTIDIABETICS         Approved         2           3896         UNSPECI	3963	UNSPECIFIED	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	1
3966   5MILY PRACTICE   5MILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3961   INTERNAL MEDICINE   5MILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3963   INTERNAL MEDICINE   5MILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3963   INTERNAL MEDICINE   5MILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3963   NURSE PRACTITIONER, MAILY HEALTH   5MILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3966   NURSE PRACTITIONER, LINSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3966   PHYSICIAN ASSISTANT, UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3968   UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3968   UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3969   ANTIDIABETICS   Approved   1   3960   UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   1   3960   UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   2   3960   UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   2   3960   UNSPECIFIED   SMILARDY XR 26-1000MG OR TB24   ANTIDIABETICS   Approved   2   3960   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   2   3961   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3963   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3963   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3964   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3965   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3966   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3967   DERMATOLOGY   TACROLIMUS 0.03% EX OINT   DERMATOLOGICAL AGENTS   Approved   1   3968   DERMATOLOGY   TACROLIMUS 0.03% EX OINTENT   DERMATOLOGICAL AGENTS   Approved   1   3969   DERMATOLOGY   TACROLIMUS 0.03% EX OIN	3951	UNSPECIFIED	SYNJARDY XR 12.5-1000MG OR TB24	ANTIDIABETICS	Approved	1
3951   INTERNAL MEDICINE	3961	FAMILY PRACTICE	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
3966         INTERNAL MEDICINE         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3963         INTERNAL MEDICINE         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3961         NURSE PRACTITIONER, INJECTIFIED         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3966         NURSE PRACTITIONER, UNSPECIFIED         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3966         PHYSICIAN ASSISTANT, UNSPECIFIED         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3963         TAMILY PRACTICE         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3963         DISPECIFIED         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         1           3963         DISPECIFIED         SYNJARDY XR 25-1000MG OR T824         ANTIDIABETICS         Approved         2           3963         DERMATOLOGY         TACROLIMUS 0.03% EX DINT         DERMATOLOGICAL AGENTS         Approved         2           3966         DERMATOLOGY         TACROLIMUS 0.03% EX DINT         DERMATOLOGICAL AGENTS         Approved         1           3967	3956	FAMILY PRACTICE	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
1963   INTERNAL MEDICINE   SYNLARDY XR 25-1000MG ORTB24   ANTIDIABETICS   Approved   1	3951	INTERNAL MEDICINE	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
NURSE PRACTITIONER, FAMILY HEALTH SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1  3966 NURSE PRACTITIONER, UNSPECIFIED SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1  3966 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1  3968 UNSPECIFIED SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1  3969 FAMILY PRACTICE SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1  3960 UNSPECIFIED SYNJARDY XR 5-1000MG ORTB24 ANTIDIABETICS Approved 1  3960 UNSPECIFIED SYNJARDY XR 5-1000MG ORTB24 ANTIDIABETICS Approved 2  3960 UNSPECIFIED SYNJARDY XR 5-1000MG ORTB24 ANTIDIABETICS Approved 2  3960 DERMATOLOGY TACROLIMUS 0.03% EX DINT DERMATOLOGICAL AGENTS Approved 3  3960 DERMATOLOGY TACROLIMUS 0.03% EX DINT DERMATOLOGICAL AGENTS Approved 1  3961 ALLERGY & IMMUNOLOGY TACROLIMUS 0.03% EX DINT DERMATOLOGICAL AGENTS Approved 1  3963 PEDIATRICS TACROLIMUS 0.03% EX DINT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% EX DINT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 DERMATOLOGY TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Denied 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Denied 1  3960 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved 1  3960 UNSPECIFIED TACROLIMUS 0.03% ONTMENT DERMATOLOGICAL AGENTS Approved	3956	INTERNAL MEDICINE	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
NURSE PRACTITIONER, UNSPECIFIED SYNJARDY XR 25-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR 25-1000MG OR TB24 ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 25-1000MG OR TB24 ANTIDIABETICS Approved 1 3953 FAMILY PRACTICE SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 5-1000MG OR TB24 ANTIDIABETICS Approved 2 3956 UNSPECIFIED SYNJARDY XR 5-1000MG OR TB24 ANTIDIABETICS Approved 2 3956 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 3 3951 ALERGY & IMMUNOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3953 PEDIATRICS TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3953 PEDIATRICS TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3956 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3956 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3956 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3956 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3956 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3959 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3960 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3961 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3962 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL	3963	INTERNAL MEDICINE	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
9966 PHYSICIAN ASSISTANT, UNSPECIFIED SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1 9968 UNSPECIFIED SYNJARDY XR 25-1000MG ORTB24 ANTIDIABETICS Approved 1 9963 FAMILY PRACTICE SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED ANTIDIABETICS Approved 1 9966 UNSPECIFIED SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED ANTIDIABETICS Approved 2 9968 UNSPECIFIED SYNJARDY XR 5-1000MG ORTB24 ANTIDIABETICS Approved 2 9969 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 3 9960 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 9961 ALLERGY & IMMUNOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 9963 UNSPECIFIED TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 9964 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 5 9965 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 9964 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 9969 DERMATOLOGY TACROLIMUS 0.03% OINTME	3951	NURSE PRACTITIONER, FAMILY HEALTH	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
SYNLARDY XR 25-1000MG OR TB24   ANTIDIABETICS   Approved   1	3956	NURSE PRACTITIONER, UNSPECIFIED	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
SYNJARDY XR 5 MG-1,000 MGTABLET, EXTENDED ANTIDIABETICS Approved 1 3956 UNSPECIFIED SYNJARDY XR 5-1000MG ORTB24 ANTIDIABETICS Approved 2 3963 DERMATOLOGY TACROLIMUS 0,03% EX OINT DERMATOLOGICAL AGENTS Approved 2 3951 ALLERGY & IMMUNOLOGY TACROLIMUS 0,03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3963 PEDIATRICS TACROLIMUS 0,03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3963 PEDIATRICS TACROLIMUS 0,03% EX OINT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0,03% EX OINT DERMATOLOGICAL AGENTS Approved 1 5 3965 DERMATOLOGY TACROLIMUS 0,03% EX OINT DERMATOLOGICAL AGENTS Approved 1 5 3962 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3964 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3969 DERMATOLOGY TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGICAL AGENTS Approved 1 3960 DERMATOLOGICAL AGENTS Approved 1 3961 UNSPECIFIED TACROLIMUS 0,03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 DERMATOLOGICAL AGENTS Approved 1 3964 DERMATOLOGICAL AGENTS Approved 1 3965 DERMATOLOGICAL AGENTS Approved 1 3969 DERMA	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
PANILL PRACTICE RELEASE SYNJARDY XR 5-1000MG ORTB24 ANTIDIABETICS Approved 2 3963 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 3 3956 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 39963 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 39963 PEDIATRICS TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 39963 UNSPECIFIED TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 5 3965 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1 39962 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39964 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39969 DERMATOLOGICAL AGENTS Approved 1 3997 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3997 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3998 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3998 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3999 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3999 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3999 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39993 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 39993 DERMATOLOGY TACR	3956	UNSPECIFIED	SYNJARDY XR 25-1000MG OR TB24	ANTIDIABETICS	Approved	1
DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 2  3956 DERMATOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 2  3951 ALLERGY & IMMUNOLOGY TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1  3963 PEDIATRICS TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 1  3963 UNSPECIFIED TACROLIMUS 0.03% EX OINT DERMATOLOGICAL AGENTS Approved 5  3965 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3962 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3965 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1  3969 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1  3960 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1  3961 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1  3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3963 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3964 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3965 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3966 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3967 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1  3968 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1	3963	FAMILY PRACTICE		ANTIDIABETICS	Approved	1
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DERMATOLOGY  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3964  DERMATOLOGY  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3969  DERMATOLOGY  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3963  DERMATOLOGY  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Denied  1  3965  PHYSICIAN ASSISTANT, UNSPECIFIED  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3969  PHYSICIAN ASSISTANT, UNSPECIFIED  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Denied  1  3967  UNSPECIFIED  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3961  UNSPECIFIED  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3963  UNSPECIFIED  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  1  3963  DERMATOLOGY  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  2  3963  DERMATOLOGY  TACROLIMUS 0.03% OINTMENT  DERMATOLOGICAL AGENTS  Approved  2	3963	UNSPECIFIED	TACROLIMUS 0.03% EX OINT	DERMATOLOGICAL AGENTS	Approved	5
DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3965 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3967 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3951 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 2 3963 DERMATOLOGY TACROLIMUS 0.1% TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3965	DERMATOLOGY	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
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DERMATOLOGY TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3965 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3967 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3951 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 2 3963 DERMATOLOGY TACROLIMUS 0.1% TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3964	DERMATOLOGY	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3965 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3969 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3967 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3951 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 2 3963 DERMATOLOGY TACROLIMUS 0.1% TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3969	DERMATOLOGY	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3969 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 1 3967 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3951 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 2 3963 DERMATOLOGY TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3963	DERMATOLOGY	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3967 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3951 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 2 3963 DERMATOLOGY TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3965	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3951 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Approved 1 3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 2 3963 DERMATOLOGY TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3969	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963 UNSPECIFIED TACROLIMUS 0.03% OINTMENT DERMATOLOGICAL AGENTS Denied 2 3963 DERMATOLOGY TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3967	UNSPECIFIED	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3963 DERMATOLOGY TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 2	3951	UNSPECIFIED	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
	3963	UNSPECIFIED	TACROLIMUS 0.03% OINTMENT	DERMATOLOGICAL AGENTS	Denied	2
3963 INTERNAL MEDICINE TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 1	3963	DERMATOLOGY	TACROLIMUS 0.1 % TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Approved	2
THE TIME MEDICINE THE PROPERTY OF THE PROPERTY	3963	INTERNAL MEDICINE	TACROLIMUS 0.1 % TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3963 NURSE PRACTITIONER, ACUTE CARE TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 1	3963	NURSE PRACTITIONER, ACUTE CARE	TACROLIMUS 0.1 % TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Denied 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	TACROLIMUS 0.1 % TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3956 PHYSICIAN ASSISTANT, UNSPECIFIED TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1 % TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3951 UNSPECIFIED TACROLIMUS 0.1 % TOPICAL OINTMENT DERMATOLOGICAL AGENTS Approved 1	3951	UNSPECIFIED	TACROLIMUS 0.1 % TOPICAL OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3963 DERMATOLOGY TACROLIMUS 0.1% EX OINT DERMATOLOGICAL AGENTS Approved 9	3963	DERMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	9

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	DERMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	2
3956	DERMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	3
3956	DERMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Denied	1
3963	ALLERGY & IMMUNOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Denied	1
3969	DERMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	2
3956	INTERNAL MEDICINE	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	4
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Denied	1
3963	RHEUMATOLOGY	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	14
3956	UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	7
3951	UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Approved	4
3963	UNSPECIFIED	TACROLIMUS 0.1% EX OINT	DERMATOLOGICAL AGENTS	Denied	1
3963	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	2
3956	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3962	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3962	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3964	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	2
3951	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3964	DERMATOLOGY	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3962	FAMILY PRACTICE	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	2
3963	INTERNAL MEDICINE	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	3
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3969	SURGERY, VASCULAR	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	7
3963	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	2
3951	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3969	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	4
3962	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3969	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3967	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	1
3965	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3964	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	2
3965	UNSPECIFIED	TACROLIMUS 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Approved	2
3956	DERMATOLOGY	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Approved	1
3956	DERMATOLOGY	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	3
3951	DERMATOLOGY	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	1
3963	DERMATOLOGY	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	1
3956	INTERNAL MEDICINE	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	5
3956	UNSPECIFIED	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	4
3963	UNSPECIFIED	TACROLIMUS OINT	DERMATOLOGICAL AGENTS	Denied	2
3956	UNSPECIFIED	TADALAFIL 2.5MG	VASODILATORS	Denied	1
3963	UNSPECIFIED	TADALAFIL 2.5MG	VASODILATORS	Denied	1
3956	CARDIOLOGY	TADALAFIL 20MG	VASODILATORS	Approved	3
3963	CARDIOLOGY	TADALAFIL 20MG	VASODILATORS	Approved	1
3963	FAMILY PRACTICE	TADALAFIL 20MG	VASODILATORS	Denied	1
3963	PULMONARY DISEASES	TADALAFIL 20MG	VASODILATORS	Approved	1
3963	UNSPECIFIED	TADALAFIL 20MG	VASODILATORS	Approved	1
3963	EMERGENCY MEDICINE	TADALAFIL 5 MG ORAL TABLET	VASODILATORS	Approved	1
3963	CARDIOLOGY	TADALAFIL 5MG	VASODILATORS	Denied	1
3956	FAMILY PRACTICE	TADALAFIL 5MG	VASODILATORS	Denied	5
3956	FAMILY PRACTICE	TADALAFIL 5MG	VASODILATORS	Approved	2
3963	FAMILY PRACTICE	TADALAFIL 5MG	VASODILATORS	Approved	1
3963	FAMILY PRACTICE	TADALAFIL 5MG	VASODILATORS	Denied	3
3963	INTERNAL MEDICINE	TADALAFIL 5MG	VASODILATORS	Denied	1
3956	INTERNAL MEDICINE	TADALAFIL 5MG	VASODILATORS	Denied	1
3963	INTERNAL MEDICINE	TADALAFIL 5MG	VASODILATORS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TADALAFIL 5MG	VASODILATORS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TADALAFIL 5MG	VASODILATORS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Denied	1
3963	UROLOGY	TADALAFIL 5MG	VASODILATORS	Denied	2
3956	UROLOGY	TADALAFIL 5MG	VASODILATORS	Approved	5
3963	UROLOGY	TADALAFIL 5MG	VASODILATORS	Approved	2
3951	UROLOGY	TADALAFIL 5MG	VASODILATORS	Denied	1
3963	UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Denied	4
3956	UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Approved	1
3956	UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Denied	14
3951	UNSPECIFIED	TADALAFIL 5MG	VASODILATORS	Approved	1
3956	FAMILY PRACTICE	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	2
3951	FAMILY PRACTICE	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	1
3956	FAMILY PRACTICE	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	5
3963	FAMILY PRACTICE	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	1
3956	INTERNAL MEDICINE	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	2
3961	NURSE PRACTITIONER, ADULT HEALTH	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	1
3956	PSYCHIATRY	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	1
3961	UROLOGY	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	1
3956	UROLOGY	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	1
3951	UROLOGY	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	1
3956	UROLOGY	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	1
3956	UNSPECIFIED	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	2
3963	UNSPECIFIED	TADALAFIL 5MG OR TABS	VASODILATORS	Approved	3
3963	UNSPECIFIED	TADALAFIL 5MG OR TABS	VASODILATORS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	TAGRISSO	ANTINEOPLASTICS	Approved	1
3956	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	7
3956	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	4
3963	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3951	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3956	FAMILY PRACTICE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	INTERNAL MEDICINE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3956	NURSE PRACTITIONER, ACUTE CARE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	2
3956	NURSE PRACTITIONER, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	17
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	2
3956	RHEUMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	2
3963	RHEUMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	15
3956	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	4
3961	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3964	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3963	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	4
3951	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	UNSPECIFIED	TALTZ 80MG/ML INJ	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	UNSPECIFIED	TALTZ 80MG/ML INJ	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	TALTZ 80MG/ML SC SOAJ	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3951	DERMATOLOGY	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	INTERNAL MEDICINE	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	4
3956	UNSPECIFIED	TAZAROTENE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	TAZAROTENE 0.1% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	TAZAROTENE CREAM 0.1%	DERMATOLOGICAL AGENTS	Denied	1
3951	UNSPECIFIED	TAZAROTENE CREAM 0.1%	DERMATOLOGICAL AGENTS	Denied	1
3956	DERMATOLOGY	TAZAROTENE GEL	DERMATOLOGICAL AGENTS	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	TAZAROTENE GEL	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	TAZORAC 0.05% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3956	INTERNAL MEDICINE	TAZORAC CREAM 0.05% (TAZAROTENE)	DERMATOLOGICAL AGENTS	Approved	1
3964	PLASTIC SURGERY	TEMOVATE 0.05% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	2
3951	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3956	LEGAL MEDICINE	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3956	MEDICAL ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3963	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	FAMILY PRACTICE	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Approved	1
3963	FAMILY PRACTICE	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Denied	2
3963	INTERNAL MEDICINE	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Approved	1
3963	UNSPECIFIED	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Approved	2
3963	UNSPECIFIED	TESTOSTERONE 1.62% TD GEL	ANDROGENS	Denied	1
3963	FAMILY PRACTICE	TESTOSTERONE 10 MG/ACT(2%)TD GEL	ANDROGENS	Approved	2
3956	FAMILY PRACTICE	TESTOSTERONE 10 MG/ACT(2%) TD GEL	ANDROGENS	Approved	1
3951	FAMILY PRACTICE	TESTOSTERONE 10 MG/ACT(2%)TD GEL	ANDROGENS	Approved	1
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE 20.25 MG/1.25GM(1.62%) TD GEL	ANDROGENS	Approved	1
3969	FAMILY PRACTICE	TESTOSTERONE 20.25 MG/ACT(1.62%) TD GEL	ANDROGENS	Denied	1
3963	PHYSICIAN, ENDOCRINOLOGY	TESTOSTERONE 20.25 MG/ACT(1.62%) TD GEL	ANDROGENS	Approved	1
3963	UNSPECIFIED	TESTOSTERONE 20.25 MG/ACT(1.62%) TD GEL	ANDROGENS	Approved	1
3951	UNSPECIFIED	TESTOSTERONE 25 MG/2.5GM (1%) TRANSDERMAL GEL (ANDROGEL;TESTIM)	ANDROGENS	Approved	1
3963	FAMILY PRACTICE	TESTOSTERONE 25 MG/2.5GM(1%) TD GEL	ANDROGENS	Approved	2
3965	FAMILY PRACTICE	TESTOSTERONE 25 MG/2.5GM(1%)TD GEL	ANDROGENS	Denied	2
3956	INTERNAL MEDICINE	TESTOSTERONE 25 MG/2.5GM(1%)TD GEL	ANDROGENS	Approved	1
3964	FAMILY PRACTICE	TESTOSTERONE 30MG/ACTTD SOLN	ANDROGENS	Denied	1
3963	FAMILY PRACTICE	TESTOSTERONE 50 MG/5GM(1%) TD GEL	ANDROGENS	Approved	1
3956	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 100MG/ML	ANDROGENS	Denied	1
3956	UNSPECIFIED	TESTOSTERONE CYPIONATE 100MG/ML	ANDROGENS	Denied	1
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Approved	1
3956	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Approved	4
3956	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Denied	2
3963	GENERAL PRACTICE	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Denied	1
3956	UROLOGY	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Approved	1
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE 100MG/ML IM SOLN	ANDROGENS	Approved	1
3956	UNSPECIFIED	TESTOSTERONE CYPIONATE 200 MG/ML INTRA- MUSCULAR OIL	ANDROGENS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE 200 MG/ML INTRA- MUSCULAR OIL (DEPO-TESTOSTERONE)	ANDROGENS	Approved	1
3956	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200 MG/ML INTRA- MUSCULAR OIL (DEPOTESTOTERONE)	ANDROGENS	Approved	1
3956	CHIROPRACTOR, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3956	EMERGENCY MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	1
3956	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	38
3951	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	4
3951	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	1
3956	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	9
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	5
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	8
3963	HEMATOLOGY & ONCOLOGY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3961	HEMATOLOGY & ONCOLOGY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3963	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3956	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	4
3961	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	1
3963	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3963	NURSE PRACTITIONER, ACUTE CARE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3956	NURSE PRACTITIONER, ADULT HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	13
3961	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	3
3951	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	3
3956	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	5
3956	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	3
3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	2
3956	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	6
3963	PEDIATRICS	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2
3956	PHYSICIAN, GERIATRIC MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3961	REGISTERED NURSE, EMERGENCY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3956	REGISTERED NURSE, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	2
3956	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	2
3956	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	3
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	10
3956	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	8
3956	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	18
3951	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	5
3951	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	2
3961	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	1
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Approved	1
3961	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML	ANDROGENS	Denied	1
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	33
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	21
3951	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	7
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	3
3956	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	3
3961	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	2
3951	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3965	FAMILY PRACTICE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3963	GYNECOLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3961	HEMATOLOGY & ONCOLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	3
3956	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3963	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	4
3963	NURSE PRACTITIONER, ACUTE CARE	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	2
3963	NURSE PRACTITIONER, ADULT HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	NURSE PRACTITIONER, ADULT HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	6
3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	9
3961	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	3
3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3951	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	2
3956	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	4

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3963	OPHTHALMOLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	2
3956	REGISTERED NURSE, EMERGENCY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3963	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	5
3956	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	4
3951	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	2
3963	UROLOGY	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	2
3956	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	5
3956	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	18
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	18
3964	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	5
3969	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3961	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3951	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Denied	1
3965	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	1
3951	UNSPECIFIED	TESTOSTERONE CYPIONATE 200MG/ML IM SOLN	ANDROGENS	Approved	2
3969	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	ALLERGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3951	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	5
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	33
3964	EMERGENCY MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3964	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	2
3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	6
3965	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	4
3965	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	9
3962	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3964	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	3
3969	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3962	FAMILY PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	3
3963	GENERAL PRACTICE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	13
3964	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	2
3964	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3969	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3965	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3951	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3951	INTERNAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3965	LEGAL MEDICINE	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	NURSE PRACTITIONER, ADULT HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	3
3951	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	4
3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	5
3964	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	3
3965	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3965	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	2
3964	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3962	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3965	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	2
3963	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	2
3963	PHYSICIAN, SURGERY, GENERAL	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	UROLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	2
3965	UROLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	2
3965	UROLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	3
3951	UROLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3963	UROLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	2
3962	UROLOGY	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	1
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	25
3963	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	5
3951	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	4
3965	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3962	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1

3965 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
MARCHER   MARCHER   TESTOSTERONE CYPONATE IN INJECTION   ANDROCENS   Approved   1	3969	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
PAMILY PRACTICE	3965	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Denied	4
PAMILY PRACTICE	3964	UNSPECIFIED	TESTOSTERONE CYPIONATE IM INJECTION	ANDROGENS	Approved	1
3003         NURSE PRACTITIONER, IFAMILY HEALTH         TESTOSTERONE CYPIONATE INJECTION         ANDROGENS         Denied         2           3003         NURSE PRACTITIONER, UNSPECIFIED         TESTOSTERONE CYPIONATE INJECTION         ANDROGENS         Denied         1           3003         OPHHALAMOLOGY         TESTOSTERONE CYPIONATE INJECTION         ANDROGENS         Denied         6           3003         UNSPECIFIED         TESTOSTERONE CYPIONATE INJECTION         ANDROGENS         Approved         1           3003         UNSER PRACTITIONER, WOMEN'S HEALTH         TESTOSTERONE ENANTHATE ZOOMAGNIL         ANDROGENS         Approved         1           30983         UNSECRIFICIO         TESTOSTERONE ENANTHATE ZOOMAGNIL         ANDROGENS         Approved         1           30986         UNSPECIFIED         TESTOSTERONE ENANTHATE ZOOMAGNIL         ANDROGENS         Approved         1           30986         UNSPECIFIED         TESTOSTERONE ENANTHATE ZOOMAGNIL         ANDROGENS         Approved         1           30987         URROLOGY         TESTOSTERONE ENANTHATE MINIECTION         ANDROGENS         Denied         2           30860         RITERNAL MEDICINE         TESTOSTERONE EL INVESTICATION         ANDROGENS         Denied         1           30876         FAMILY PRACTICE	3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Approved	1
NURSE PRACTITIONER, UNSPECIFIED   TESTOSTERONE CYPIONATE INJECTION   ANDROCENS   Deried   1	3963	FAMILY PRACTICE	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Denied	4
Defined   1   1   1   1   1   1   1   1   1	3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Denied	2
1988   UNSPECIFIED   TESTOSTERONE CYPIONATE INJECTION   ANDROGENS   Approved   1	3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Denied	1
1985   UNSPECIFIED   TESTOSTERONE CYPIONATE INJECTION   ANDROGENS   Approved   1	3963	OPHTHALMOLOGY	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Denied	1
1983   NURSE PRACTITIONER, WOMEN'S HEALTH   TESTOSTERONE ENANTHATE 200MG/ML   ANDROGENS   Denied   2	3963	UNSPECIFIED	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Denied	6
TESTOSTERONE ENANTHATE ZOMG/ML ANDROGENS Denied 2 3988 UNSPECIFIED TESTOSTERONE ENANTHATE ZOMG/ML ANDROGENS Approved 1 3989 FAMILY PRACTICE TESTOSTERONE ENANTHATE IN INJECTION ANDROGENS Denied 2 3989 UNDLOGY TESTOSTERONE ENANTHATE IN INJECTION ANDROGENS Denied 2 3989 UNDLOGY TESTOSTERONE GEL 1% (ZBMG) ANDROGENS Denied 1 3986 INTERNAL MEDICINE TESTOSTERONE GEL 1% (ZBMG) ANDROGENS Denied 1 3983 UNSPECIFIED TESTOSTERONE GEL 1% (ZBMG) ANDROGENS Denied 1 3983 UNSPECIFIED TESTOSTERONE GEL 1% (ZBMG) ANDROGENS Denied 2 3983 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE GEL 10MG/ACT ANDROGENS DENIED 1 3986 UROLOGY TESTOSTERONE GEL 10MG/ACT ANDROGENS DENIED 1 3986 UROLOGY TESTOSTERONE GEL 10MG/ACT ANDROGENS DENIED 1 3986 UNSPECIFIED TESTOSTERONE GEL 10MG/ACT ANDROGENS DENIED 1 3986 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1 3986 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1 3986 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 3986 NURSE PRACTI	3963	UNSPECIFIED	TESTOSTERONE CYPIONATE INJECTION	ANDROGENS	Approved	1
TESTOSTERONE ENANTHATE 200MG/ML ANDROGENS Approved 1  S883 FAMILY PRACTICE TESTOSTERONE ENANTHATE IM INJECTION ANDROGENS Denied 2  UROLOGY TESTOSTERONE ENANTHATE IM INJECTION ANDROGENS Approved 1  S886 UNSPECIFIED TESTOSTERONE GEL 1% (25MG) ANDROGENS Denied 1  S883 UNSPECIFIED TESTOSTERONE GEL 1% (25MG) ANDROGENS Denied 1  S883 UNSPECIFIED TESTOSTERONE GEL 1% (25MG) ANDROGENS Denied 1  S884 UNSPECIFIED TESTOSTERONE GEL 1% (25MG) ANDROGENS Denied 1  S886 FAMILY PRACTICE TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1  S886 UROLOGY TESTOSTERONE GEL 10MG/ACT ANDROGENS DENIED 1  S886 EMERGENCY MEDICINE TESTOSTERONE GEL 10MG/ACT ANDROGENS DENIED 1  S886 UROLOGY TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1  S888 FAMILY PRACTICE TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1  S888 FAMILY PRACTICE TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1  S889 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S889 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S889 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  S899 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL	3963	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE ENANTHATE 200MG/ML	ANDROGENS	Approved	1
FAMILY PRACTICE TESTOSTERONE ENANTHATE IM INJECTION ANDROGENS Denied 2 3898 UPOLOGY TESTOSTERONE ENANTHATE IM INJECTION ANDROGENS Approved 1 3966 INTERNAL MEDICINE TESTOSTERONE ENANTHATE IM INJECTION ANDROGENS Denied 1 3968 UNSPECIFED TESTOSTERONE GELL 1% (25MG) ANDROGENS Denied 2 3966 FAMILY PRACTICE TESTOSTERONE GELL 10MG/ACT ANDROGENS Denied 1 3983 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1 3966 UROLOGY TESTOSTERONE GELL 10MG/ACT ANDROGENS Denied 1 3968 UNSPECIFIED TESTOSTERONE GELL 10MG/ACT ANDROGENS Denied 1 3969 UROLOGY TESTOSTERONE GELL 10MG/ACT ANDROGENS Denied 1 3969 UROLOGY TESTOSTERONE GELL 10MG/ACT ANDROGENS Denied 1 3969 UROLOGY TESTOSTERONE GELL 10MG/ACT ANDROGENS Denied 1 3969 UROSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Denied 1 3969 UROSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Approved 1 3969 UROSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS APPROVED 1 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 8 3969 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 FAMILY PRACTICIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED DENIED 3	3956	UNSPECIFIED	TESTOSTERONE ENANTHATE 200MG/ML	ANDROGENS	Denied	2
UROLOGY   TESTOSTERONE ENANTHATE IM INJECTION   ANDROGENS   Approved   1	3956	UNSPECIFIED	TESTOSTERONE ENANTHATE 200MG/ML	ANDROGENS	Approved	1
INTERNAL MEDICINE   TESTOSTERONE GEL 1% (25MG)   ANDROGENS   Denied   1	3963	FAMILY PRACTICE	TESTOSTERONE ENANTHATE IM INJECTION	ANDROGENS	Denied	2
1963 UNSPECIFIED TESTOSTERONE GEL 1% (25MG) ANDROGENS Denied 2 1956 FAMILY PRACTICE TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1 1963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE GEL 10MG/ACT ANDROGENS Approved 1 1966 UROLOGY TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1 1968 UNSPECIFIED TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1 1968 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Denied 1 1968 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS DENIED 1 1968 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1 1968 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1969 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1966 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1967 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1968 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1969 TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2 1969 TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2 1960 TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2 1960 TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2 1960 NURSE PRACTITIONER TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2 1960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2 1960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1960 DENIED 1 1960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1 1960 DENIED TESTOSTERONE TRANSDERMAL GEL ANDROGEN	3969	UROLOGY	TESTOSTERONE ENANTHATE IM INJECTION	ANDROGENS	Approved	1
FAMILY PRACTICE TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE GEL 10MG/ACT ANDROGENS Approved 1  3966 UROLOGY TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1  3968 EMERGENCY MEDICINE TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1  3969 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Denied 1  3960 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Approved 1  3960 TESTOSTERONE TOPICAL GEL ANDROGENS APPROVED 1  3960 FAMILY PRACTICE TESTOSTERONE TOPICAL GEL ANDROGENS APPROVED 1  3960 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 8  3960 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 2  3960 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 NURSE PRACTITIONER, TONSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 NURSE PRACTITIONER, TONSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS DENIED 1  3960 UNSPECIFIED TESTOS	3956	INTERNAL MEDICINE	TESTOSTERONE GEL 1% (25MG)	ANDROGENS	Denied	1
NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE GEL 10MG/ACT ANDROGENS Denied 1 3966 UROLOGY TESTOSTERONE TOPICAL GEL ANDROGENS Denied 1 3964 EMERGENCY MEDICINE TESTOSTERONE TOPICAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Approved 1 3963 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1 3963 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 8 3963 GLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3964 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3965 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3965 PAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3966 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3967 Denied 1 3968 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3969 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	3963	UNSPECIFIED	TESTOSTERONE GEL 1% (25MG)	ANDROGENS	Denied	2
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Befield 1 Befield Testosterone topical gel Androgens Denied 1 Befield Testosterone topical gel Androgens Approved 1 Befield Testosterone transdermal gel Androgens Approved 1 Befield Testosterone transdermal gel Androgens Approved 1 Befield Testosterone transdermal gel Androgens Denied 8 Befield Testosterone transdermal gel Androgens Denied 8 Befield Testosterone transdermal gel Androgens Denied 1 Befield Testosterone transdermal gel Androgens Denied 1 Befield Testosterone transdermal gel Androgens Denied 1 Befield Testosterone transdermal gel Androgens Denied 2 Befield Testosterone transdermal gel Androgens Denied 2 Befield Testosterone transdermal gel Androgens Denied 2 Befield Testosterone transdermal gel Androgens Denied 1 Befield Testosterone transdermal gel Androgens Denied 2 Befield Testosterone transdermal gel Androgens Denied 2 Befield Testosterone transdermal gel Androgens Denied 2 Befield Testosterone transdermal gel Androgens Denied 1 Befield Testosterone transdermal gel Androgens Denied 4 Befield Testosterone transdermal gel Androgens Denied 1	3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE GEL 10MG/ACT	ANDROGENS	Approved	1
UNSPECIFIED TESTOSTERONE TOPICAL GEL ANDROGENS Approved 1  3963 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1  3963 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 8  3963 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3966 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, INSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3965 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3966 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3967 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3968 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3969 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3969 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3956	UROLOGY	TESTOSTERONE GEL 10MG/ACT	ANDROGENS	Denied	1
FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1  3963 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 8  3963 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3966 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3965 PAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3966 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 SPENACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3965 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3966 SINDER PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3967 SINDER PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3968 SINDER PRACTITIONER DENIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3969 SINDER PRACTITIONER DENIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3964	EMERGENCY MEDICINE	TESTOSTERONE TOPICAL GEL	ANDROGENS	Denied	1
FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 8  3963 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3966 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3965 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3966 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3967 DENIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3968 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3969 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3960 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	UNSPECIFIED	TESTOSTERONE TOPICAL GEL	ANDROGENS	Approved	1
CLINICAL NURSE SPECIALIST, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3963 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3965 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3966 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3967 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3968 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3969 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	FAMILY PRACTICE	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Approved	1
FAMILY MEDICINE  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  2  3965  FAMILY MEDICINE  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  3964  FAMILY PRACTICE  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  2  3965  INTERNAL MEDICINE  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  2  3966  NURSE PRACTITIONER, FAMILY HEALTH  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  3963  NURSE PRACTITIONER, FAMILY HEALTH  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  3963  NURSE PRACTITIONER, UNSPECIFIED  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  3963  PHYSICIAN ASSISTANT, UNSPECIFIED  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  3963  UNSPECIFIED  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  4  3963  UNSPECIFIED  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  4  3963  UNSPECIFIED  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  4  3964  UNSPECIFIED  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  TESTOSTERONE TRANSDERMAL GEL  ANDROGENS  Denied  1  Denied  1	3963	FAMILY PRACTICE	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	8
FAMILY MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3963 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3965 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  4  4  4  4  4  4  5  5  6  7  7  7  7  7  7  7  7  7  7  7  7	3963	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
3964 FAMILY PRACTICE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3963 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3966 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	FAMILY MEDICINE	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	2
3963 INTERNAL MEDICINE TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2 3965 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3965 ANDROGENS Denied 1	3965	FAMILY MEDICINE	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
3965 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1 3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3964	FAMILY PRACTICE	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	2
NURSE PRACTITIONER, FAMILY HEALTH TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 2  3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	INTERNAL MEDICINE	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	2
NURSE PRACTITIONER, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4  3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 2  3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3965	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
3963 PHYSICIAN ASSISTANT, UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 2 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	NURSE PRACTITIONER, FAMILY HEALTH	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 4 3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 2 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	NURSE PRACTITIONER, UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Approved	1
3963 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 2 3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Denied 1	3963	UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	4
	3963	UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Approved	2
	3964	UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
3964 UNSPECIFIED TESTOSTERONE TRANSDERMAL GEL ANDROGENS Approved 1	3964	UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Approved	1

DATE   DATE   DATE   TESTOSTERIONE TRANSCERMAL CEL   ADDROCENS   Derived   1   1   1   1   1   1   1   1   1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
Sect	3951	UNSPECIFIED	TESTOSTERONE TRANSDERMAL GEL	ANDROGENS	Denied	1
1	3969	FAMILY PRACTICE	TESTOSTERONE TRANSDERMAL SOLUTION	ANDROGENS	Approved	1
Second	3964	NURSE PRACTITIONER, WOMEN'S HEALTH	TESTOSTERONE TRANSDERMAL SOLUTION	ANDROGENS	Denied	1
	3963	UNSPECIFIED	TESTOSTERONE TRANSDERMAL SOLUTION	ANDROGENS	Denied	1
1996   NURSE PRACTITIONER, UNSPECIFIED   TETRABENAZINE   VESICULAR MONOAMNE TRANSPORTER 2 INHIB- Approved   1	3956	FAMILY PRACTICE	TETRABENAZINE		Denied	1
September   Sept	3951	NEUROLOGY	TETRABENAZINE		Denied	1
Septiment   Sept	3956	NURSE PRACTITIONER, UNSPECIFIED	TETRABENAZINE		Approved	1
S950   FOLINITY   LETABENN/CIN:   ITOR   United   1	3956	PSYCHIATRY	TETRABENAZINE		Approved	1
1963   UNSPECIFIED   TEZSPIRE	3956	PSYCHIATRY	TETRABENAZINE		Denied	1
1   1982   UNSPECIFIED   TEZSPIRE   ASTHMA   Denied   1   1   1   1   1   1   1   1   1	3963	ALLERGY & IMMUNOLOGY	TEZSPIRE	ASTHMA	Approved	1
UNSPECIFIED TEZSPIRE ASTHMA Denied 1  3963 HEMATOLOGY THALOMID ANTINEOPLASTICS Approved 1  3961 UNSPECIFIED THALOMID ANTINEOPLASTICS Approved 1  3962 UNSPECIFIED THALOMID ANTINEOPLASTICS Approved 1  3963 UNSPECIFIED THALOMID ANTINEOPLASTICS Approved 1  3964 UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1  3965 UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1  3966 UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1  3967 INTERNAL MEDICINE TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1  3968 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1  3969 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3960 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3961 FAMILY PRACTICE TRAMADOL (R) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1  3966 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3968 GERRAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3969 ANISSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 ANISSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PUNSICAN, PHYSICAL MEDICINE & REHABILITA-  TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PONSICAN, PHYSICAL MEDICINE & REHABILITA-  TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PONSICAN, PHYSICAL MEDICINE & REHABILITA-  TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PONSICAN, PHYSICAL MEDICINE & REHABILITA-  TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PONSICAN, PHYSICAL MEDICINE & REHABILITA-  TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PONSICAN, PHYSICAL MEDICINE & REHABILITA-  TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Approved 1  3960 PAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3963	UNSPECIFIED	TEZSPIRE	ASTHMA	Approved	1
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3961 UNSPECIFIED THALOMID ANTINEOPLASTICS Approved 1 3965 UNSPECIFIED THALOMID ANTINEOPLASTICS Approved 1 3962 UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1 3963 UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1 3963 UNSPECIFIED TIROSINT 88MC GAPSULES THYROID AGENTS Approved 1 3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3969 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3969 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3960 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1 3961 FAMILY PRACTICE TRAMADOL (B) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1 3966 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3968 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3969 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3960 PHYSICIAN PRYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS APPROVED 1 3960 PHYSICIAN PRYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS APPROVED 1 3960 PHYSICIAN PRYSICAL MEDICINE & REHABILITA- TRAMADOL SOMG TABLETS NARCOTIC ANALGESICS APPROVED 1	3963	UNSPECIFIED	TEZSPIRE	ASTHMA	Denied	1
3965 UNSPECIFIED THALOMID ANTINEOPLASTICS Approved 1 3962 UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1 3963 UNSPECIFIED TIROSINT 88MCG CAPSULES THYROID AGENTS Approved 1 3963 UNSPECIFIED TIROSINT 88MCG CAPSULES THYROID AGENTS Approved 1 3963 INTERNAL MEDICINE TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3969 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3963 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1 3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1 3965 ANESTHESIOLOGY TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 ANESTHESIOLOGY TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 FAMILY PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 GENERAL PRACTICE TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 FAMILY PRACTICE TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TON / PHYSICAL MEDICINE	3963	HEMATOLOGY	THALOMID	ANTINEOPLASTICS	Approved	1
UNSPECIFIED TIBSOVO ANTINEOPLASTICS Approved 1  3963 UNSPECIFIED TIROSINT 88MCG CAPSULES THYROID AGENTS Approved 1  3963 INTERNAL MEDICINE TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1  3969 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1  3963 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3961 FAMILY PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3956 ANESTHESIOLOGY TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3967 FAMILY PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3968 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3969 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION PHYSICIAN PHYSICAL MEDICINE & REHABILITATION PHYSICIAN PHYSICAL MEDICINE & REHABILITATION PHYSICATY TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 FAMILY PRACTICE TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3961 PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION PHYSICATY TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Approved 1  3966 FAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1  3967 FAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1  3968 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3961	UNSPECIFIED	THALOMID	ANTINEOPLASTICS	Approved	1
UNSPECIFIED TIROSINT 88MCG CAPSULES THYROID AGENTS Approved 1  3963 INTERNAL MEDICINE TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1  3969 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1  3963 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1  3965 ANESTHESIOLOGY TRAMADOL (I) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1  3966 ANESTHESIOLOGY TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3967 FAMILY PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3968 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3969 GENERAL PRACTICE TRAMADOL (I) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (I) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3960 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TION / PHYSICARY MEDICINE & REHABILITA-TION / PRYSICARY MEDICINE & REHABILITA	3965	UNSPECIFIED	THALOMID	ANTINEOPLASTICS	Approved	1
3963   INTERNAL MEDICINE   TOBRAMYCIN INHALATION SOLUTION   RESPIRATORY AGENTS   Approved   1	3962	UNSPECIFIED	TIBSOVO	ANTINEOPLASTICS	Approved	1
PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3963 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1 3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3961 FAMILY PRACTICE TRAMADOL (R) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1 3966 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TION / PHYSICAL MEDICINE & REHABILITA-TION / PHYSICAL MEDICINE & REHABILITA-TION / PHYSICAL MEDICINE & TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3963	UNSPECIFIED	TIROSINT 88MCG CAPSULES	THYROID AGENTS	Approved	1
3963 PULMONARY DISEASES TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Denied 1 3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3951 FAMILY PRACTICE TRAMADOL (R) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1 3956 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3968 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 FAMILY PRACTICE TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3964 FAMILY PRACTICE TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3963	INTERNAL MEDICINE	TOBRAMYCIN INHALATION SOLUTION	RESPIRATORY AGENTS	Approved	1
3963 UNSPECIFIED TOBRAMYCIN INHALATION SOLUTION RESPIRATORY AGENTS Approved 1 3951 FAMILY PRACTICE TRAMADOL (R) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1 3956 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3964 FAMILY PRACTICE TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3969	PULMONARY DISEASES	TOBRAMYCIN INHALATION SOLUTION	RESPIRATORY AGENTS	Approved	1
3951 FAMILY PRACTICE TRAMADOL (R) ER 200MG BIPHASIC TABLETS NARCOTIC ANALGESICS Denied 1 3956 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3965 FAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3963	PULMONARY DISEASES	TOBRAMYCIN INHALATION SOLUTION	RESPIRATORY AGENTS	Denied	1
3956 ANESTHESIOLOGY TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3965 FAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3963	UNSPECIFIED	TOBRAMYCIN INHALATION SOLUTION	RESPIRATORY AGENTS	Approved	1
3956 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3967 FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3965 FAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3951	FAMILY PRACTICE	TRAMADOL (R) ER 200MG BIPHASIC TABLETS	NARCOTIC ANALGESICS	Denied	1
FAMILY PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1  3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-TION / PHYSIATRY TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3963 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1  3965 FAMILY PRACTICE TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY TRAMADOL 50 MG TABLETS NARCOTIC ANALGESICS Approved 1	3956	ANESTHESIOLOGY	TRAMADOL (U) ER 100MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3965 GENERAL PRACTICE TRAMADOL (U) ER 100MG TABLETS NARCOTIC ANALGESICS Denied 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1 3965 FAMILY PRACTICE TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3956 ANESTHESIOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1	3956	FAMILY PRACTICE	TRAMADOL (U) ER 100MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY TRAMADOL (U) ER 200MG TABLETS NARCOTIC ANALGESICS Denied 1  3963 FAMILY PRACTICE TRAMADOL 50 MG TABLET NARCOTIC ANALGESICS Approved 1  3965 FAMILY PRACTICE TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3956 ANESTHESIOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1	3967	FAMILY PRACTICE	TRAMADOL (U) ER 100MG TABLETS	NARCOTIC ANALGESICS	Denied	1
PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY  TRAMADOL (U) ER 200MG TABLETS  NARCOTIC ANALGESICS  Denied  1  3963  FAMILY PRACTICE  TRAMADOL 50 MG TABLET  NARCOTIC ANALGESICS  Approved  1  3965  FAMILY PRACTICE  TRAMADOL 50 MG TABLETS  NARCOTIC ANALGESICS  Approved  1  3956  ANESTHESIOLOGY  TRAMADOL 50 MG TABLETS  NARCOTIC ANALGESICS  Approved  1	3965	GENERAL PRACTICE	TRAMADOL (U) ER 100MG TABLETS	NARCOTIC ANALGESICS	Denied	1
TION / PHYSIATRY  TRAMADOL (0) ER 200MG TABLETS  NARCOTIC ANALGESICS  Denied  1  3963  FAMILY PRACTICE  TRAMADOL 50 MG TABLET  NARCOTIC ANALGESICS  Approved  1  3965  FAMILY PRACTICE  TRAMADOL 50 MG TABLETS  NARCOTIC ANALGESICS  Approved  1  3956  ANESTHESIOLOGY  TRAMADOL 50 MG TABLETS  NARCOTIC ANALGESICS  Approved  1	3956	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL (U) ER 200MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3965 FAMILY PRACTICE TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3956 ANESTHESIOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1	3963		TRAMADOL (U) ER 200MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3956 ANESTHESIOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1	3963	FAMILY PRACTICE	TRAMADOL 50 MG TABLET	NARCOTIC ANALGESICS	Approved	1
	3965	FAMILY PRACTICE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
3962 ANESTHESIOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1	3956	ANESTHESIOLOGY	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
	3962	ANESTHESIOLOGY	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1

8486         SPATISTS SURGERY, DRAJA AMANDI LORGICIAL         TRAMADOL BANCTABLETS         APPORTICIAL ALGISICIS         Approach         1           3863         SAMINY PRACTICE         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Demoit         1           3893         FAMILY PRACTICE         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Approach         2           3893         FAMILY PRACTICE         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Approach         2           3896         RAMILY PRACTICE         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Approach         1           3896         INTERNAL MEDICINE         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Demoid         1           3893         INTERNAL MEDICINE         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Demoid         1           3894         NESSE PRACTITIORER, PAMILY HALLH         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Demoid         1           3895         NURSE PRACTITIORER, PAMILY HALLH         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Demoid         1           3896         NURSE PRACTITIORER, PAMILY HALLH         TRAMADOL BANCTABLETS         NAFOCTIC AMAL SERSIS         Demoid         1           3897	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3586         PMAILY PRACTICE         TRAMADOL SONG TABLETS         ARACOTIC ANALGESICS         Denied         1           3820         RAMINY PRACTICE         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Aproved         2           3836         RAMILY PRACTICE         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Denied         1           3866         RATENNAL MEDICINE         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Denied         1           3867         NITERNAL MEDICINE         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Denied         1           3868         INTERNAL MEDICINE         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Denied         1           3861         NITSER PACTITIONER, ADULT HEALTH         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Denied         1           3861         NURSE PRACTITIONER, EARLY HEALTH         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Denied         1           3862         PECATTIONER, EARLY HEALTH         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Denied         1           3863         NURSE PRACTITIONER, EARLY HEALTH         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Denied         1           3864 <td< td=""><td>3963</td><td>DENTIST, SURGERY, ORAL &amp; MAXILLOFACIAL</td><td>TRAMADOL 50MG TABLETS</td><td>NARCOTIC ANALGESICS</td><td>Denied</td><td>1</td></td<>	3963	DENTIST, SURGERY, ORAL & MAXILLOFACIAL	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3982         FAMILY PRACTICE         TRAMADOL BOND TABLETS         NANCOTIC ANALGESICS         Approved         1           3983         FAMILY PRACTICE         TRAMADOL BOND TABLETS         NARCOTIC ANALGESICS         Approved         2           3986         ARIZERATION         TRAMADOL BOND TABLETS         NARCOTIC ANALGESICS         Opended         4           3986         NTERNAL MEDIONE         TRAMADOL BOND TABLETS         NARCOTIC ANALGESICS         Opended         4           3983         NTERNAL MEDIONE         TRAMADOL BOND TABLETS         NARCOTIC ANALGESICS         Opended         1           3985         NURSE PRACTITIONER, ADULT HEALTH         TRAMADOL BOND TABLETS         NARCOTIC ANALGESICS         Opended         1           3986         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL BOND TABLETS         NARCOTIC CANALGESICS         Opended         1           3867         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL BOND TABLETS         NARCOTIC CANALGESICS         Opended         1           3869         UNISE PRACTITIONER, LAWISH HEALTH         TRAMADOL BOND TABLETS         NARCOTIC CANALGESICS         Opended         1           3860         OFFICIAL STANCES         TRAMADOL BOND TABLETS         NARCOTIC CANALGESICS         Opended         1           3862	3969	FAMILY PRACTICE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	2
9883         FRANITY PRACTICE         TRANADOL BOND TABLETS         NARCOTIC ANALCESICS         Approved         2           3885         FRANITY PRACTICE         TRANADOL BOND TABLETS         NARCOTIC ANALCESICS         Denied         1           3895         INTERNAL MEDICINE         TRANADOL BOND TABLETS         NARCOTIC ANALCESICS         Denied         1           3895         INTERNAL MEDICINE         TRANADOL BOND TABLETS         NARCOTIC ANALCESICS         Denied         1           3898         NURSE PRACTITIONER, ADULT HEALTH         TRANADOL BOND TABLETS         NARCOTIC ANALCESICS         Denied         1           3891         NURSE PRACTITIONER, ADULT HEALTH         TRANADOL BOND TABLETS         NARCOTIC CANALCESICS         Denied         1           3892         NURSE PRACTITIONER, FAMILY HEALTH         TRANADOL BOND TABLETS         NARCOTIC CANALCESICS         Denied         1           3996         NURSE PRACTITIONER, FAMILY HEALTH         TRANADOL BOND TABLETS         NARCOTIC CANALCESICS         Denied         1           3997         NURSE PRACTITIONER, FAMILY HEALTH         TRANADOL BOND TABLETS         NARCOTIC CANALCESICS         Approved         1           3998         NURSE PRACTITIONER, FAMILY HEALTH         TRANADOL BOND TABLETS         NARCOTIC CANALCESICS         Approved         1	3956	FAMILY PRACTICE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
9006         FAMILY PRACTICE         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Opinied         1           3006         NTERNAL MEDICINE         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Approved         4           3008         NTERNAL MEDICINE         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3008         NTERNAL MEDICINE         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3008         NURSE PRACTITIONER, ADULT HEALTH         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3008         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3009         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3007         NURSE PRACTITIONER, PAMILY HEALTH         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3007         NURSE PRACTITIONER, PAMILY HEALTH         TRAMADOL SOMG TABLETS         NARCOTIC CANALGESICS         Approved         1           3008         ORTHOPEDIC SURGERY         TRAMADOL SOMG TABLETS         NARCOTIC CANALGESICS         Approved         1	3962	FAMILY PRACTICE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
988         INTERNAL MEDICINE         TRAMADOL BUMGTABLETS         MARCOTIC ANALGESICS         Approved         4           3866         INTERNAL MEDICINE         TRAMADOL SOMGTABLETS         NARCOTIC ANALGESICS         Denied         1           3868         INTERNAL MEDICINE         TRAMADOL SOMGTABLETS         NARCOTIC ANALGESICS         Denied         1           3868         NURSE PRACTITIONER, ADULT HEALTH         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Approved         1           3861         NURSE PRACTITIONER, ADULT HEALTH         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Approved         1           3863         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Denied         1           3867         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Approved         1           3866         ORTHOPPIDE SURGERIY         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Approved         1           3862         PEDILATRISTIC MEDICINE         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Approved         1           3869         PODIZATRISTIC MEDICINE         TRAMADOL BUNGTABLETS         NARCOTIC ANALGESICS         Approved         1	3963	FAMILY PRACTICE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	2
9866         INTERNAL MEDICINE         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3983         INTERNAL MEDICINE         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3886         NURSE PRACTITIONER, ADULT HEALTH         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3893         NURSE PRACTITIONER, FAMILY HEALTH         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3896         NURSE PRACTITIONER, FAMILY HEALTH         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3897         NURSE PRACTITIONER, PAMILY HEALTH         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Approved         1           3896         ORTHOPEDIC SURGERY         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Approved         1           3892         PEDIATRICS         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Approved         1           3892         PEDIATRICS         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Approved         1           3892         PEDIATRICS         TERMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Approved         1           3893 <t< td=""><td>3965</td><td>FAMILY PRACTICE</td><td>TRAMADOL 50MG TABLETS</td><td>NARCOTIC ANALGESICS</td><td>Denied</td><td>1</td></t<>	3965	FAMILY PRACTICE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3983         INTERNAL MEDICINE         TRAMADOL SOMG TABLETS         NARCOTIC ANALGESICS         Denied         1           3986         NURSE PRACTITIONER, ADULT HEALTH         TRAMADOL SOMG TABLETS         NARGOTIC ANALGESICS         Denied         1           3983         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL SOMG TABLETS         NARGOTIC ANALGESICS         Denied         1           3983         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Denied         1           3987         NURSE PRACTITIONER, LANSPECHED         TRAMADOL SONG TABLETS         NARCOTIC ANALGESICS         Denied         1           3986         ORTHOPEDIC SURGERY         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Approved         1           3986         ORTHOPEDIC SURGERY         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Approved         1           3986         PHYSICAN, GERIATRIC MEDICINE         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Denied         1           3986         PHYSICAN, GERIATRIC MEDICINE         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Approved         1           3986         PODIATRIS UNSPECIFIED         TRAMADOL SONG TABLETS         NARCOTIC CANALGESICS         Approved         2	3965	INTERNAL MEDICINE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	4
3986   NURSE PRACTITIONER, ADULT HEALTH	3965	INTERNAL MEDICINE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3961   NURSE PRACTITIONER, FAMILY HEALTH	3963	INTERNAL MEDICINE	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3963         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3966         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3967         NURSE PRACTITIONER, UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3968         ORTHOPEDIC SURGERY         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3969         PEDIATRICS         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3960         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3961         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3962         PODIATRIST, UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3963         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3964         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         2           396	3956	NURSE PRACTITIONER, ADULT HEALTH	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3966         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3987         NURSE PRACTITIONER, UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3986         ORTHOPEDIC SURGERY         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3986         PEDIATRICS         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Approved         1           3986         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Approved         1           3986         PODIATRIST, UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Approved         1           3986         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Approved         2           3981         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Denied         1           3982         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Denied         1           3983         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC CANALGESICS         Approved         1           3980         UNSPECIFIED<	3951	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
NURSE PRACTITIONER, UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3960 ORTHOPEDIC SURGERY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3962 PEDIATRICS TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3966 PODIATRIST, UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC CANALGESICS Deried 1  3966 PODIATRIST, UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3964 RHEUMATOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3965 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2  3966 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2  3967 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3968 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Deried 1  3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Deried 1  3960 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS DERIED 1  3961 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS DERIED 1  3962 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS DERIED 1  3963 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2  3968 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3960 FAMILY PRACTICE TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3961 UNSPECIFIED TRAMADOL HCL IER BIPHASICI 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3963 UNSPECIFIED TRAMADOL HCL IER BIPHASICI 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3963 ANESTHESIOLOGY TRAMADOL HCL IS DIM GOR TABLET NARCOTIC ANALGESICS Approved 1  3964 ANESTHESIOLOGY TRAMADOL HCL IS DIM GOR TABLET NARCOTIC ANALGESICS Approved 6  3965 FAMILY PRACTICE TRAMADOL HCL IS DIM GOR TABLET NARCOTIC ANALGESICS Approved 6  3966 FAMILY PRACTICE TRAMADOL HCL IS DIM GOR TABLET NARCOTIC ANALGESICS Approved 6  3967 FAMILY PRACTICE TRAMADOL HCL IS DIM GOR TABLET NARCOTIC ANALGESICS Approved 6  3968 FAMILY PRACTICE TRAMADOL HCL SOMG OR TABLE NARCOTIC ANA	3963	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3956 ORTHOPEDIC SURGERY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3962 PEDIATRICS TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 PHYSICIAN, GERIATRIC MEDICINE TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 PODIATRIST, UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3968 PODIATRIST, UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2 3951 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2 3951 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3966 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3962 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3963 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3964 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1 3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2 3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3960 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3960 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3961 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED TRAMADOL HOL (ER BIPHASIC) 200MG ORTB24 NARCOTIC ANALGESICS Approved 1 3964 PARCOTIC ANALGESICS Approved 1 3965 PARMILY PRACTICE TRAMADOL HOL (ER BIPHASIC) 200MG ORTB24 NARCOTIC ANALGESICS Approved 1 3966 ANESTHESIOLOGY TRAMADOL HOL (ER BIPHASIC) 200MG ORTB25 NARCOTIC ANALGESICS Approved 6 3966 PARMILY PRACTICE TRAMADOL HOL 50MG OR TABS NARCOTIC ANALGESICS Approved 6 3966 PARMILY PRACTICE TRAMADOL HOL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 PARMILY PRACTICE TRAMADOL HOL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 PARMILY PRACTICE TRAMADOL HOL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 PARMILY PRACTICE TRAMADOL HOL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3966 PARMILY PRACTICE TRAMADOL HOL 50MG OR TABS N	3956	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Denied	1
3962         PEDIATRICS         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3966         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3966         PODIATRIST, UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3964         RHEUMATOLOGY         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3965         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         2           3951         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3966         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Denied         1           3967         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         2           3968         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         2           3969         UNSPECIFIED         TRAMADOL 50MG TABLETS         NARCOTIC ANALGESICS         Approved         1           3963         UNSPECIFIED         TRAMADOL HCL 60MG TABLETS	3967	NURSE PRACTITIONER, UNSPECIFIED	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
PHYSICIAN, GERIATRIC MEDICINE TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1  3956 PODIATRIST, UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3964 RHEUMATOLOGY TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3966 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2  3951 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2  3956 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1  3966 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1  3962 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Denied 1  3964 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 2  3969 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3961 UNSPECIFIED TRAMADOL 50MG TABLETS NARCOTIC ANALGESICS Approved 1  3966 FAMILY PRACTICE TRAMADOL HOL (EM BIPHASIC) 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3963 UNSPECIFIED TRAMADOL HOL (EM BIPHASIC) 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3966 ANESTHESIOLOGY TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 1  3966 ANESTHESIOLOGY TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 3  3963 ANESTHESIOLOGY TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 6  5966 FAMILY PRACTICE TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 6  3967 FAMILY PRACTICE TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 6  5968 FAMILY PRACTICE TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 1  3969 FAMILY PRACTICE TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 6  5969 FAMILY PRACTICE TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 1  3960 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 1  5960 CLINICAL NURSE SPECIALIST, FAMILY HEALTH TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 1  5961 EMERGENCY MEDICINE TRAMADOL HOL SOMG OR TABS NARCOTIC ANALGESICS Approved 1	3956	ORTHOPEDIC SURGERY	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
PODIATRIST, UNSPECIFIED   TRAMADOL 50MG TABLETS   NARCOTIC ANALGESICS   Approved   1	3962	PEDIATRICS	TRAMADOL 50MG TABLETS	NARCOTIC ANALGESICS	Approved	1
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3956 EMERGENCY MEDICINE TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 2	3963	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
	3951	EMERGENCY MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 FAMILY PRACTICE TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 16	3956	EMERGENCY MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	2
	3963	FAMILY PRACTICE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	16

8881         RAMINY PRACTICE         TRAMADICH ICI SONG OF TARS         MARCICIT CANAL GESIGS         Approved         1           3881         PAMINY PRACTICE         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         1           3886         RAMINY PRACTICE         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         1           3898         INTERNAL MEDIONE         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         2           3891         INTERNAL MEDIONE         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         2           3891         INTERNAL MEDIONE         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         2           3896         NELIFOCICISE LI SURGERY         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         1           3896         NELIFOCICISE LI SURGERY         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         2           3896         NELIFOCICISY         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         2           3896         NELIFOCICISY         TRAMADICH ICI SONG OF TARS         MARCIOTIC ANAL GESIGS         Approved         1	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
9885         PMILLY PRACTICE         TRAMADOLI HOLBOMIS OR YEARS         NACCOTIC ANAL GESICS         Approved         1           3866         HEMATOLIONY & DINCHO         TRAMADOLI HOLBOM OR TRAIS         NARCOTIC ANAL GESICS         Aproved         7           3866         INTERNAL MEDIONE         TRAMADOLI HOLBOM OR TRAIS         NARCOTIC ANAL GESICS         Aproved         7           3838         NEEDRAL MEDIONE         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC ANAL GESICS         Aproved         2           3868         NEURIOLOCICAS SURGEREY         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC CANAL GESICS         Aproved         2           3868         NEURIOLOCICAS SURGEREY         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC CANAL GESICS         Aproved         2           3868         NEURIOLOCY         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC CANAL GESICS         Aproved         2           3869         NURSE PRACTITIONER, RAMILY HEALTH         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC CANAL GESICS         Aproved         4           3892         NURSE PRACTITIONER, MENULY HEALTH         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC CANAL GESICS         Aproved         1           3893         ORTHOFEDIC SURGERY         TRAMADOLI HOLBOMIS OR TRAIS         NARCOTIC CANAL GESICS         Aproved	3969	FAMILY PRACTICE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
9986         HEMATOLOGY & ONCOLOGY         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         7           3988         INTERNAL HEDICINE         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         5           3983         INTERNAL HEDICINE         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         2           3950         NEURLOGICAL SURGERY         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         2           3960         NEURLOGO         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         2           3960         NUISE PRACTITIONER, FAMILY HEALTH         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         4           3961         NUISE PRACTITIONER, FAMILY HEALTH         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         4           3962         NUISE PRACTITIONER, INSPECIFIED         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         1           3963         NUISE PRACTITIONER, INSPECIFIED         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         1           3966         PRIN MEDICINE         TRAMADOL HELDING OR TASS         NACOTIC ANALGESICS         Approved         1	3961	FAMILY PRACTICE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	4
9986         NTERNAL MEDICINE         TRAMADOL HCL SOMIG OR TABS         NARCOTIC ANALGESICS         Approved         7           3983         NTERNAL MEDICINE         TRAMADOL HCL SOMIG OR TABS         NARCOTIC ANALGESICS         Approved         2           3851         NTERNAL MEDICINE         TRAMADOL HCL SOMIG OR TABS         NARCOTIC ANALGESICS         Approved         1           3856         NUBICIO CICCIA. SURGETRY         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved         2           3966         NUBIS CRACTITIONER, FAMILY HEALTH         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved         4           3983         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved         4           3982         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved         1           3983         ORTHOPERIC SURGETY         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved         1           3983         ORTHOPERIC SURGETY         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved         1           3981         PAIN MEDICINE         TRAMADOL HCL SOMIG OR TABS         NARCOTIC CANALGESICS         Approved </td <td>3965</td> <td>FAMILY PRACTICE</td> <td>TRAMADOL HCL 50MG OR TABS</td> <td>NARCOTIC ANALGESICS</td> <td>Approved</td> <td>1</td>	3965	FAMILY PRACTICE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
5963         INTERNAL MEDICINE         TRAMADOL HCL SOMIG OR TABS         NARCOTIC ANALGESICS         Approved         2           3856         NETERNAL MEDICINE         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3856         NEURICLOGICAL SURGEYY         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         2           3856         NUISE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         4           3856         NUISE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         4           3851         NUISE PRACTITIONER, INSPECIFIED         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3862         OFTHOPPIDE SURGERY         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3863         ORTHOPPIDE SURGERY         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3864         PAMIN MEDICINE         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3865         PAMIN MEDICINE         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1 <td>3956</td> <td>HEMATOLOGY &amp; ONCOLOGY</td> <td>TRAMADOL HCL 50MG OR TABS</td> <td>NARCOTIC ANALGESICS</td> <td>Approved</td> <td>1</td>	3956	HEMATOLOGY & ONCOLOGY	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
8851         INTERNAL MEDICINE         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         2           3986         NEUROLOGICAL SURGERY         TRAMADOL HCL BUMO OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         4           3863         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         4           3863         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         4           3862         NURSE PRACTITIONER, LWISTEGRED         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         1           3863         ORTHOPEDIC SURGERY         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         1           3863         PAIN MEDICINE         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         1           3984         PAN NECIONA SSISTANT UNSPECIFIED         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS         Approved         1           3985         PHYSICIAN ASSISTANT UNSPECIFIED         TRAMADOL HCL SOMS OR TABS         NARCOTIC ANALGESICS	3956	INTERNAL MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	7
9966         NEUROLOGICAL SURGERY         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         NEUROLOGY         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         2           3986         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         4           3981         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3982         NURSE PRACTITIONER, MAINT HEALTH         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3883         ORTHOPPEDIC SURGERY         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3883         PAIN MEDICINE         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3896         PAIN MEDICINE         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3896         PAIN MEDICINE         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3896         PHYSICIAN ASSISTANT UNSPECIFIED         TRAMADOL HCL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1 <td>3963</td> <td>INTERNAL MEDICINE</td> <td>TRAMADOL HCL 50MG OR TABS</td> <td>NARCOTIC ANALGESICS</td> <td>Approved</td> <td>5</td>	3963	INTERNAL MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	5
8986         NEUROLOGY         TRAMADOL HOL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         2           3988         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HOL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         4           3983         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HOL BOMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3961         NURSE PRACTITIONER, TAMILY HEALTH         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3962         NURSE PRACTITIONER, UNSPECIFIED         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3983         PAIN MEDICINE         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3983         PAIN MEDICINE         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3986         PAIN MEDICINE         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3988         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3989         PHYSICIAN PRISICAL MEDICINE & REHABILITA         TRAMADOL HOL BOMG OR TABS         NARCOTIC CANALGESICS	3951	INTERNAL MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	2
9566         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL EDMG OR TABS         NARCOTIC ANALGESICS         Approved         4           9363         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL EDMG OR TABS         NARCOTIC ANALGESICS         Approved         1           3981         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3982         NURSE PRACTITIONER, JUNSPECIFED         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3963         PAIN MEDICINE         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3964         PAIN MEDICINE         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3965         PAIN MEDICINE         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3966         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         2           3963         PHYSICIAN MEDICINE & BEHABILITA         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANALGESICS         Approved         1           3965         PHYSICIAN MEDICINE & BEHABILITA         TRAMADOL HCL EDMG OR TABS         NARCOTIC CANAL	3956	NEUROLOGICAL SURGERY	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
8883         NURSE PRACTITIONER, FAMILY HEALTH         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         4           3991         NURSE PRACTITIONER, LINSPECIFED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3982         NURSE PRACTITIONER, LINSPECIFED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         ORTHOPECIC SURGERY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3983         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS <td< td=""><td>3956</td><td>NEUROLOGY</td><td>TRAMADOL HCL 50MG OR TABS</td><td>NARCOTIC ANALGESICS</td><td>Approved</td><td>2</td></td<>	3956	NEUROLOGY	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	2
3951   NURSE PRACTITIONER, FAMILY HEALTH   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3682   NURSE PRACTITIONER, INSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3696   OR THOPEDIC SURGERY   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3696   PAIN MEDICINE   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3696   PAIN MEDICINE   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3696   PAIN MEDICINE   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3696   PAIN CLIAN ASSISTANT, UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   PHYSICIAN ASSISTANT, UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   PHYSICIAN, GERIATRIC MEDICINE   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   PHYSICIAN, HYSICIAL MEDICINE & REHABILITA   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   PHYSICIAN, PHYSICAL MEDICINE & REHABILITA   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   PHYSICIAN, PHYSICAL MEDICINE & REHABILITA   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   REGISTRED NURSE, UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   REGISTRED NURSE, UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   REGISTRED NURSE, UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   2   3698   UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   2   3698   UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESICS   Approved   1   3698   UNSPECIFIED   TRAMADOL HCL 50MG OR TABS   NARCOTIC ANALGESI	3956	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	4
8982         NURSE PRACTITIONER, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3956         ORTHOPEDIC SURGERY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3951         FAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3956         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3963         PHYSICIAN, ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC CANALGESICS         Approved         1           3963         PHYSICIAN, PHYSICIAL MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC CANALGESICS         Approved         1           3969         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICIAN         TRAMADOL HCL 50MG OR TABS         NARCOTIC CANALGESICS         Approved         1           3963         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATY         TRAMADOL HCL 50MG OR TABS         NARCOTIC CANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADO	3963	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	4
3956         ORTHOPEDIC SURGERY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3982         PANN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3981         PAN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         PAN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3983         PHYSICIAN, GERIATTIC MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         PHYSICIAN, GERIATTIC MEDICINE & REHABILITA         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3986         PHYSICIAN, PHYSICIAN, PHYSICIAN, PHYSICIAN, PHYSICIAN P	3951	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3983         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3961         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3966         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3968         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, PHYSICAL MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3966         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3966         URSCHERED         TRAMADOL HCL 50MG OR TABS	3962	NURSE PRACTITIONER, UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3956         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3956         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3963         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, FHYSICAL MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         URSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANA	3956	ORTHOPEDIC SURGERY	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956         PAIN MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3966         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3963         PHYSICIAN, ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3966         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         3           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         3           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3966         UNSPECIFIED         TRAMADOL HCL 50MG OR TABS	3963	PAIN MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         2           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, GERIATRIC MEDICINE         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3966         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATRY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICATRY         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         REGISTERED NURSE, UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         3           3963         UNSPECIFIED         TRAMADOL HCL 50MG OR TABS         NARCOTIC ANALGESICS         Approved         1           3963         UNSPECIFIED         TRAMA	3951	PAIN MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963     PHYSICIAN ASSISTANT, UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1       3963     PHYSICIAN, GERIATRIC MEDICINE     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1       3966     PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1       3963     PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSIATRY     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     3       3963     REGISTERED NURSE, UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1       3963     REGISTERED NURSE, UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1       3963     REGISTERED NURSE, UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1       3963     REGISTERED NURSE, UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     3       3963     UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     2       3963     UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     2       3961     UNSPECIFIED     TRAMADOL HCL 50MG OR TABS     NARCOTIC ANALGESICS     Approved     1	3956	PAIN MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
PHYSICIAN, GERIATRIC MEDICINE TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICAL MEDICINE & REHABILITA- TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NARCOTIC ANALGESICS Approved 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	2
PHYSICIAN, PHYSICAL MEDICINE & REHABILITA- TION / PHYSICAL MEDICINE & RAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  1  3963 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NARCOTIC ANALGESICS Approved 1  3961 NERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3966 NERSTERED NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3966 NARCOTIC ANALGESICS Approved 1  3967 NARCOTIC ANALGESICS Approved 1  3968 NARCOTIC ANALGESICS Approved 1  3969 NARCOTIC ANALGESICS Approved ADProved ADProved ADPROVED APPROVED APPROVE	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
TION / PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-  3963 PHYSICIAN, PHYSICAL MEDICINE & REHABILITA-  3964 REGISTERED NURSE, UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3965 REGISTERED NURSE, UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3966 REGISTERED NURSE, UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3967 NARCOTIC ANALGESICS Approved 1  3968 RHEUMATOLOGY TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 2  3960 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 2  3960 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4  3960 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 200MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 NURSE PRACTITIONER, FAMILY HEALTH RAMADOL HCL ER 200MG OR TABS NARCOTIC ANALGESICS Approved 1  3960 NURSE PRACTITIONER, FAMILY HEALTH RAMADOL HCL ER 200MG OR TABS NARCOTIC ANALGESICS Approved 1	3963	PHYSICIAN, GERIATRIC MEDICINE	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
TION / PHYSIATRY TION /	3956		TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
REGISTERED NURSE, UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 RHEUMATOLOGY TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 3  3956 UROLOGY TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3963 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 20  3956 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 21  3951 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4  3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1  3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NARCOTIC ANALGESICS Approved 1  3960 NESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NRESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NRESTHESIOLORY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NRESTHESIOLORY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NRESTHESIOLORY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1  3960 NRESTHESIOLORY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1	3963		TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	3
RHEUMATOLOGY TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 3 3956 UROLOGY TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 20 3956 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 21 3951 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4 3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3966 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3968 UNSPECIFIED TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3969 NARCOTIC ANALGESICS Approved 1 3960 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3960 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3956	REGISTERED NURSE, UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3956 UROLOGY TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3963 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 20 3956 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 21 3951 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4 3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3966 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3963	REGISTERED NURSE, UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 20 3956 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 21 3951 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4 3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3963	RHEUMATOLOGY	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	3
3956 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4 3951 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 4 3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3956	UROLOGY	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3951 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3963	UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	20
3965 UNSPECIFIED TRAMADOL HCL 50MG OR TABS NARCOTIC ANALGESICS Approved 1 3969 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3956	UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	21
3969UNSPECIFIEDTRAMADOL HCL ER 100MG OR TB24NARCOTIC ANALGESICSApproved13956UNSPECIFIEDTRAMADOL HCL ER 100MG OR TB24NARCOTIC ANALGESICSApproved13963ANESTHESIOLOGYTRAMADOL HCL ER 200MG OR TB24NARCOTIC ANALGESICSApproved13956INTERNAL MEDICINETRAMADOL HCL ER 200MG OR TB24NARCOTIC ANALGESICSApproved13956NURSE PRACTITIONER, FAMILY HEALTHTRAMADOL HCL ER 200MG OR TB24NARCOTIC ANALGESICSApproved2	3951	UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	4
3956 UNSPECIFIED TRAMADOL HCL ER 100MG OR TB24 NARCOTIC ANALGESICS Approved 1 3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3965	UNSPECIFIED	TRAMADOL HCL 50MG OR TABS	NARCOTIC ANALGESICS	Approved	1
3963 ANESTHESIOLOGY TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3969	UNSPECIFIED	TRAMADOL HCL ER 100MG ORTB24	NARCOTIC ANALGESICS	Approved	1
3956 INTERNAL MEDICINE TRAMADOL HCL ER 200MG ORTB24 NARCOTIC ANALGESICS Approved 1 3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG ORTB24 NARCOTIC ANALGESICS Approved 2	3956	UNSPECIFIED	TRAMADOL HCL ER 100MG OR TB24	NARCOTIC ANALGESICS	Approved	1
3956 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 2	3963	ANESTHESIOLOGY	TRAMADOL HCL ER 200MG ORTB24	NARCOTIC ANALGESICS	Approved	1
	3956	INTERNAL MEDICINE	TRAMADOL HCL ER 200MG ORTB24	NARCOTIC ANALGESICS	Approved	1
3963 NURSE PRACTITIONER, FAMILY HEALTH TRAMADOL HCL ER 200MG OR TB24 NARCOTIC ANALGESICS Approved 1	3956	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL HCL ER 200MG ORTB24	NARCOTIC ANALGESICS	Approved	2
	3963	NURSE PRACTITIONER, FAMILY HEALTH	TRAMADOL HCL ER 200MG ORTB24	NARCOTIC ANALGESICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY	TRAMADOL HCL ER 200MG OR TB24	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	TRAMADOL HCL ER 200MG OR TB24	NARCOTIC ANALGESICS	Approved	1
3956	UNSPECIFIED	TRAMADOL HCL ER 300MG OR TB24	NARCOTIC ANALGESICS	Approved	1
3969	FAMILY PRACTICE	TRAMADOL-APAP 37.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3951	FAMILY PRACTICE	TRAMADOL-APAP 37.5-325 MG	NARCOTIC ANALGESICS	Approved	1
3965	UNSPECIFIED	TRAMADOL-APAP 37.5-325 MG	NARCOTIC ANALGESICS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TRELEGY ELLIPTA INHALER	RESPIRATORY AGENTS	Denied	1
3956	UNSPECIFIED	TRELEGY ELLIPTA INHALER	RESPIRATORY AGENTS	Denied	1
3963	UNSPECIFIED	TRELEGY ELLIPTA INHALER	RESPIRATORY AGENTS	Denied	1
3963	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3956	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	INTERNAL MEDICINE	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	10
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3964	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	DERMATOLOGY	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	2
3965	DERMATOLOGY	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3963	DERMATOLOGY	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	6
3969	DERMATOLOGY	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3962	FAMILY PRACTICE	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3962	INTERNAL MEDICINE	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3963	INTERNAL MEDICINE	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3962	INTERNAL MEDICINE	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	2
3969	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3967	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3969	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	10
3969	UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	2
3951	UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	1
3965	UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Approved	2
3965	UNSPECIFIED	TRETINOIN	DERMATOLOGICAL AGENTS	Denied	1
3956	DERMATOLOGY	TRETINOIN 0.01% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	TRETINOIN 0.01% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.025 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	TRETINOIN 0.025 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	2
3961	UNSPECIFIED	TRETINOIN 0.025 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	TRETINOIN 0.025% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	INTERNAL MEDICINE	TRETINOIN 0.025% CREAM	DERMATOLOGICAL AGENTS	Approved	2
3956	INTERNAL MEDICINE	TRETINOIN 0.025% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.025% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TRETINOIN 0.025% CREAM	DERMATOLOGICAL AGENTS	Approved	5
3956	UNSPECIFIED	TRETINOIN 0.025% CREAM	DERMATOLOGICAL AGENTS	Approved	2
3963	DERMATOLOGY	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	10
3956	DERMATOLOGY	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	12
3956	DERMATOLOGY	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3969	DERMATOLOGY	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	EMERGENCY MEDICINE	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3963	FAMILY PRACTICE	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3963	INTERNAL MEDICINE	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3956	INTERNAL MEDICINE	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	INTERNAL MEDICINE	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3969	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	5
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	6
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	10
3956	UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	5
3951	UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3963	UNSPECIFIED	TRETINOIN 0.025% EX CREA	DERMATOLOGICAL AGENTS	Denied	1
3963	INTERNAL MEDICINE	TRETINOIN 0.025% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.025% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	TRETINOIN 0.025% EX GEL	DERMATOLOGICAL AGENTS	Approved	2
3956	NURSE PRACTITIONER, ACUTE CARE	TRETINOIN 0.05 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.05 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.05% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	DERMATOLOGY	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3951	DERMATOLOGY	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3963	DERMATOLOGY	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3956	INTERNAL MEDICINE	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	4
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	4
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	12
3956	UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	10
3965	UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3951	UNSPECIFIED	TRETINOIN 0.05% EX CREA	DERMATOLOGICAL AGENTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	FAMILY PRACTICE	TRETINOIN 0.05% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	TRETINOIN 0.1 % EXTERNAL CREAM (RETIN-A)	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.1 % TOPICAL CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	TRETINOIN 0.1 % TOPICAL CREAM (RETIN-A)	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TRETINOIN 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	DERMATOLOGY	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3956	DERMATOLOGY	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	5
3951	DERMATOLOGY	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	INTERNAL MEDICINE	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3963	INTERNAL MEDICINE	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3956	UNSPECIFIED	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	3
3963	UNSPECIFIED	TRETINOIN 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	2
3956	DERMATOLOGY	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	3
3963	DERMATOLOGY	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	DERMATOLOGY	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	EMERGENCY MEDICINE	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	FAMILY PRACTICE	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	2
3963	NURSE PRACTITIONER, ACUTE CARE	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	1
3961	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	2
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	5
3956	UNSPECIFIED	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Approved	2
3963	UNSPECIFIED	TRETINOIN CREAM	DERMATOLOGICAL AGENTS	Denied	2
3956	DERMATOLOGY	TRETINOIN GEL	DERMATOLOGICAL AGENTS	Denied	1
3956	FAMILY PRACTICE	TRETINOIN GEL	DERMATOLOGICAL AGENTS	Denied	2
3956	NURSE PRACTITIONER, UNSPECIFIED	TRETINOIN GEL	DERMATOLOGICAL AGENTS	Denied	1
3956	DERMATOLOGY	TRETINOIN GEL 0.1%	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	TRETINOIN GEL 0.1%	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	TRETINOIN MICROSPHERE 0.1% EX GEL	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	TRIAMCINOLONE 0.025% CREAM	DERMATOLOGICAL AGENTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	DERMATOLOGY	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	2
3956	DERMATOLOGY	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	3
3956	FAMILY PRACTICE	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	2
3956	DERMATOLOGY	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	INTERNAL MEDICINE	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	1
3951	NURSE PRACTITIONER, UNSPECIFIED	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	1
3956	UNSPECIFIED	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	3
3956	UNSPECIFIED	TRIAMCINOLONE 0.1% CREAM	DERMATOLOGICAL AGENTS	Denied	3
3963	DERMATOLOGY	TRIAMCINOLONE 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	TRIAMCINOLONE 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRIAMCINOLONE 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963	UNSPECIFIED	TRIAMCINOLONE 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3965	UNSPECIFIED	TRIAMCINOLONE 0.1% OINTMENT	DERMATOLOGICAL AGENTS	Denied	1
3963	FAMILY PRACTICE	TRIAMCINOLONE 0.5% CREAM	DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRIAMCINOLONE ACETONIDE 0.1% EX CREA	DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	TRIAZOLAM	SEDATIVE NON-BARBITURATE	Denied	1
3961	NURSE PRACTITIONER, PEDIATRIC CARE	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	2
3962	PEDIATRICS	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3956	PULMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	3
3969	PULMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3951	PULMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3963	PULMONOLOGY, PEDIATRIC	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3956	PULMONOLOGY, PEDIATRIC	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3956	UNSPECIFIED	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3967	FAMILY PRACTICE	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Denied	1
3963	FAMILY PRACTICE	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	2
3964	FAMILY PRACTICE	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	2
3963	GENERAL PRACTICE	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1
3964	PSYCHIATRY	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1
3963	PSYCHIATRY	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Denied	2
3963	PSYCHIATRY	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	3
3951	PSYCHIATRY	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	1
3956	UNSPECIFIED	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Approved	2
3956	UNSPECIFIED	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Denied	2
3963	UNSPECIFIED	TRINTELLIX (VORTIOXETINE)	ANTIDEPRESSANTS	Denied	1
3963	CARDIOLOGY	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	FAMILY PRACTICE	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	4
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	2
3963	OBSTETRICS & GYNECOLOGY	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	1
3956	PSYCHIATRY	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	PSYCHIATRY	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	2
3956	UNSPECIFIED	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	6
3963	UNSPECIFIED	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	3
3951	UNSPECIFIED	TRINTELLIX 10MG OR TABS	ANTIDEPRESSANTS	Approved	2
3963	UNSPECIFIED	TRINTELLIX 10MG TABLET	ANTIDEPRESSANTS	Approved	1
3963	UNSPECIFIED	TRINTELLIX 20 MG ORAL TABLET	ANTIDEPRESSANTS	Approved	1
3963	FAMILY PRACTICE	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	3
3951	FAMILY PRACTICE	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	INTERNAL MEDICINE	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	NURSE PRACTITIONER, PSYCHIATRIC	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	PEDIATRICS	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3951	PSYCHIATRY	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3956	PSYCHIATRY	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3965	PSYCHIATRY	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	2
3963	PSYCHIATRY	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	2
3963	UNSPECIFIED	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	3
3956	UNSPECIFIED	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	2
3962	UNSPECIFIED	TRINTELLIX 20MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	UNSPECIFIED	TRINTELLIX 20MG TABLET	ANTIDEPRESSANTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	TRINTELLIX 5MG OR TABS	ANTIDEPRESSANTS	Approved	2
3956	FAMILY PRACTICE	TRINTELLIX 5MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	INTERNAL MEDICINE	TRINTELLIX 5MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRINTELLIX 5MG OR TABS	ANTIDEPRESSANTS	Approved	1
3963	UNSPECIFIED	TRINTELLIX 5MG OR TABS	ANTIDEPRESSANTS	Approved	5
3956	UNSPECIFIED	TRINTELLIX 5MG OR TABS	ANTIDEPRESSANTS	Approved	1
3956	UNSPECIFIED	TRIPTODUR	ANTINEOPLASTICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULANCE 3MG TABLET	GASTROINTESTINAL AGENTS	Approved	1
3956	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	16
3956	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	7
3964	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	5
3963	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	14
3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3969	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3965	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	5
3951	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	2
3962	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	4
3961	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	FAMILY PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3956	GENERAL PRACTICE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	13
3969	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	3
3962	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3961	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3961	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	4
3956	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	4
3965	INTERNAL MEDICINE	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	7
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	3
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	6
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	9

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3956	NURSE PRACTITIONER, OBSTETRICS & GYNECOLOGY	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	2
3951	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	2
3956	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	3
3963	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3964	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3965	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, WOMEN'S HEALTH	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	OBSTETRICS & GYNECOLOGY	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	PEDIATRICS	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	3
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	REGISTERED NURSE, UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	22
3956	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	12
3969	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3963	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	14
3963	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	9
3951	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	4
3964	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3964	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	2
3965	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	7
3965	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	UNSPECIFIED	TRULICITY (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	TRULICITY 0.75 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 0.75 MG/0.5 MLMG/ML PEN INJECTOR	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	TRULICITY 0.75/0.5 PEN	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3963	EMERGENCY MEDICINE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3951	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	FAMILY PRACTICE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	24
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Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	10
3951	FAMILY PRACTICE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3963	FAMILY PRACTICE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Denied	1
3961	FAMILY PRACTICE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3963	INTERNAL MEDICINE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	9
3956	INTERNAL MEDICINE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	5
3951	INTERNAL MEDICINE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3965	INTERNAL MEDICINE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, ADULT HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	NURSE PRACTITIONER, ADULT HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	14
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	5
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	3
3956	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3961	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3951	PEDIATRICS	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3956	PHYSICIAN, ENDOCRINOLOGY	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	PHYSICIAN, GERIATRIC MEDICINE	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3963	PULMONARY DISEASES	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3956	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	26
3961	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	6
3963	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Denied	1
3965	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3951	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	2
3969	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Approved	1
3951	UNSPECIFIED	TRULICITY 0.75MG/0.5ML SC SOPN	ANTIDIABETICS	Denied	1
3951	UNSPECIFIED	TRULICITY 1.5 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR	ANTIDIABETICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 1.5/0.5 INJ	ANTIDIABETICS	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	18
3963	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	24
3951	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3961	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3962	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3965	FAMILY PRACTICE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	INTERNAL MEDICINE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	4
3956	INTERNAL MEDICINE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	11
3951	INTERNAL MEDICINE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	16
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	5
3961	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3961	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3956	PEDIATRICS	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PHYSICIAN, GERIATRIC MEDICINE	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	12
3956	UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	25
3951	UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3965	UNSPECIFIED	TRULICITY 1.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	UNSPECIFIED	TRULICITY 3 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR (DULAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	TRULICITY 3/0.5	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	TRULICITY 3MG/0.5ML PEN	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	TRULICITY 3MG/0.5ML PENS	DIABETIC AGENT	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3956	FAMILY PRACTICE	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	13
3963	FAMILY PRACTICE	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	3
3951	FAMILY PRACTICE	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	3
3963	INTERNAL MEDICINE	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	5

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3956	PEDIATRICS	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	4
3956	PHYSICIAN, ENDOCRINOLOGY	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3963	PHYSICIAN, ENDOCRINOLOGY	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3969	PHYSICIAN, ENDOCRINOLOGY	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PHYSICIAN, GERIATRIC MEDICINE	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	17
3963	UNSPECIFIED	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	4
3951	UNSPECIFIED	TRULICITY 3MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	9
3951	CLINICAL NURSE SPECIALIST, ADULT HEALTH	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, ADULT HEALTH	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3963	FAMILY PRACTICE	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3963	INTERNAL MEDICINE	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	INTERNAL MEDICINE	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	5
3956	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	PEDIATRICS	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	PHYSICIAN, GERIATRIC MEDICINE	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3956	UNSPECIFIED	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	11
3963	UNSPECIFIED	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	5
3951	UNSPECIFIED	TRULICITY 4.5MG/0.5ML SC SOPN	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	TYMLOS	OSTEOPOROSIS AGENTS	Approved	2
3963	INTERNAL MEDICINE	TYMLOS	OSTEOPOROSIS AGENTS	Denied	1
3956	INTERNAL MEDICINE	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TYMLOS	OSTEOPOROSIS AGENTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3956	ORTHOPEDIC SURGERY	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	RHEUMATOLOGY	TYMLOS	OSTEOPOROSIS AGENTS	Denied	1
3956	RHEUMATOLOGY	TYMLOS	OSTEOPOROSIS AGENTS	Denied	1
3956	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	3
3965	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3964	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3963	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	2
3963	UNSPECIFIED	TYRVAYA	DRY EYE TREATMENT	Denied	1
3956	CARDIOLOGY	TYVASO INHALATION SOLUTION	ANTIHYPERTENSIVES	Approved	1
3956	NEUROLOGY	UBRELVY 100 MG TABLET	MIGRAINE TREATMENT	Denied	1
3964	FAMILY PRACTICE	UBRELVY 100 MG TABLET (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	ANESTHESIOLOGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3969	ALLERGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	ALLERGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	2
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	FAMILY PRACTICE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	14
3963	FAMILY PRACTICE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	20
3965	FAMILY PRACTICE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	FAMILY PRACTICE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Denied	1
3961	FAMILY PRACTICE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	GENERAL PRACTICE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3961	INTERNAL MEDICINE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	INTERNAL MEDICINE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	3
3956	INTERNAL MEDICINE	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	2
3963	NEUROLOGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	11
3956	NEUROLOGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	10
3951	NEUROLOGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, ADULT HEALTH	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	10
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Denied	2
3963	NURSE PRACTITIONER, GERONTOLOGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	2
3956	NURSE PRACTITIONER, GERONTOLOGY	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	6
3962	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3965	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINETREATMENT	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	2
3963	REGISTERED NURSE, UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	33
3962	UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	3
3963	UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	32
3956	UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Denied	1
3951	UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	3
3961	UNSPECIFIED	UBRELVY 100MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	UNSPECIFIED	UBRELVY 100MG TAB	MIGRAINE TREATMENT	Approved	1
3956	FAMILY PRACTICE	UBRELVY 100MG TABLET	MIGRAINE TREATMENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG TABLET	MIGRAINE TREATMENT	Denied	1
3963	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	8
3963	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	7
3965	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3951	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3956	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	9
3956	ANESTHESIOLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3962	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3962	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3964	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3965	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	2
3961	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3964	FAMILY PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	GENERAL PRACTICE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3963	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3951	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3951	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3965	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3967	INTERNAL MEDICINE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	4
3956	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	4
3956	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	6
3963	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3964	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3969	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3962	NEUROLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	NURSE PRACTITIONER, ACUTE CARE	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	4
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	8
3965	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	3
3963	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3956	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3962	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3964	OBSTETRICS & GYNECOLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3956	OBSTETRICS & GYNECOLOGY	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	5
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3956	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	20
3963	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	14
3969	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3962	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	3
3965	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	2
3963	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	4
3962	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3956	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	7
3967	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3951	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3969	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3965	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3964	UNSPECIFIED	UBRELVY 100MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	UNSPECIFIED	UBRELVY 50 MG ORAL TABLET (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3963	FAMILY PRACTICE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	5
3956	FAMILY PRACTICE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	2
3951	FAMILY PRACTICE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3951	INTERNAL MEDICINE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	INTERNAL MEDICINE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	INTERNAL MEDICINE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NEUROLOGY	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3965	NURSE PRACTITIONER, ACUTE CARE	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Denied	1
3963	UNSPECIFIED	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	5
3956	UNSPECIFIED	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	3
3951	UNSPECIFIED	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3969	UNSPECIFIED	UBRELVY 50MG OR TABS	MIGRAINE TREATMENT	Approved	1
3956	EMERGENCY MEDICINE	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3969	FAMILY PRACTICE	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3965	FAMILY PRACTICE	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3956	INTERNAL MEDICINE	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3962	NEUROLOGY	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3962	NEUROLOGY	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3956	NURSE PRACTITIONER, ADULT HEALTH	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3956	REGISTERED NURSE, UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	2
3962	UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Approved	1
3969	UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3964	UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	3
3956	UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	8
3951	UNSPECIFIED	UBRELVY 50MG TABLETS (UBROGEPANT)	MIGRAINE TREATMENT	Denied	1
3963	UNSPECIFIED	UBRELVY TABS 100MG 10EA X 1 BOX	MIGRAINE TREATMENT	Approved	1
3956	CARDIOLOGY	UPTRAVI	ANTIHYPERTENSIVES	Approved	1
3963	FAMILY PRACTICE	VALCHLOR	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	VALGANCICLOVIR	ANTIVIRALS	Approved	3
3956	NEPHROLOGY / RENAL MEDICINE	VALGANCICLOVIR	ANTIVIRALS	Approved	1
3956	UNSPECIFIED	VALGANCICLOVIR	ANTIVIRALS	Approved	2
3956	NURSE PRACTITIONER, GERONTOLOGY	VANCOMYCIN INJECTION	ANTIBIOTICS	Approved	1
3963	CLINICAL NURSE SPECIALIST, ADULT HEALTH	VELPHORO (SUCROFERRIC OXYHYDROXIDE)	HYPERPHOSPHATEMIA	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	NURSE PRACTITIONER, UNSPECIFIED	VEMLIDY	ANTIVIRALS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3961	UNSPECIFIED	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3951	UNSPECIFIED	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	VEOZAH 45MG TABLETS	CNS AGENT	Approved	1
3963	HEMATOLOGY	VERZENIO	ANTINEOPLASTICS	Approved	1
3962	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	EMERGENCY MEDICINE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3962	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	4
3956	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	6
3951	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	5
3963	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	3
3969	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	6
3965	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	3
3964	FAMILY PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3962	GENERAL PRACTICE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	HEMATOLOGY & ONCOLOGY	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3962	INTERNAL MEDICINE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	INTERNAL MEDICINE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	2
3956	INTERNAL MEDICINE	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	7
3956	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	4
3963	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	4
3962	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	2
3962	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3951	NURSE PRACTITIONER, UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3963	OBSTETRICS & GYNECOLOGY	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1
3962	PEDIATRICS	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	PHYSICIAN, ENDOCRINOLOGY	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	<b>Decision</b> Co	Count
3962	PSYCHIATRY	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 1	
3956	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 13	13
3956	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied 17	17
3951	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 7	7
3963	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied 11	11
3963	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 5	5
3951	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied 5	5
3969	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 1	
3962	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 1	
3965	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 1	
3964	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Approved 3	}
3962	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied 1	
3961	UNSPECIFIED	VICTOZA (LIRAGLUTIDE)	DIABETIC AGENT	Denied 1	
3963	FAMILY PRACTICE	VICTOZA 18MG/3ML PEN	DIABETIC AGENT	Denied 1	
3956	UNSPECIFIED	VICTOZA 18MG/3ML PEN	DIABETIC AGENT	Denied 1	
3956	FAMILY PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 23	23
3963	FAMILY PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Denied 1	
3951	FAMILY PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 8	3
3963	FAMILY PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 8	}
3964	FAMILY PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Denied 1	ı
3956	GENERAL PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 1	
3951	GENERAL PRACTICE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 1	ı
3956	INTERNAL MEDICINE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 7	7
3963	INTERNAL MEDICINE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 2	2
3963	INTERNAL MEDICINE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Denied 1	
3951	INTERNAL MEDICINE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 3	3
3956	INTERNAL MEDICINE	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Denied 1	
3956	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 11	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 8	3
3963	NURSE PRACTITIONER, FAMILY HEALTH	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 2	<u>&gt;</u>
3956	NURSE PRACTITIONER, UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 9	)
3963	NURSE PRACTITIONER, UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 1	
3951	PEDIATRICS	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 1	
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 2	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 3	}
3963	PHYSICIAN, ENDOCRINOLOGY	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 1	
3956	REGISTERED NURSE, UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved 1	

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved	28
3951	UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved	5
3963	UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Approved	8
3963	UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Denied	2
3956	UNSPECIFIED	VICTOZA 18MG/3ML SC SOPN	ANTIDIABETICS	Denied	1
3963	UNSPECIFIED	VICTOZA 3-PAK 0.6 MG/0.1 ML (18 MG/3 ML) SUBCU- TANEOUS PEN INJECTOR	ANTIDIABETICS	Approved	1
3963	UNSPECIFIED	VICTOZA 3-PAK 0.6 MG/0.1 ML (18 MG/3 ML) SUBCU- TANEOUS PEN INJECTOR (LIRAGLUTIDE)	ANTIDIABETICS	Approved	1
3951	UNSPECIFIED	VICTOZA 8MG/3ML PEN	ANTIDIABETICS	Approved	1
3963	NEUROLOGY, PEDIATRIC	VIGABATRIN POWDER	ANTICONVULSANTS	Approved	1
3961	OBSTETRICS & GYNECOLOGY	VORICONAZOLE	ANTIFUNGALS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	VORICONAZOLE	ANTIFUNGALS	Denied	1
3962	UNSPECIFIED	VORICONAZOLE	ANTIFUNGALS	Approved	1
3963	INTERNAL MEDICINE	VORICONAZOLE 200MG OR TABS	ANTIFUNGALS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	VORICONAZOLE 200MG OR TABS	ANTIFUNGALS	Approved	1
3963	OBSTETRICS & GYNECOLOGY	VORICONAZOLE 200MG OR TABS	ANTIFUNGALS	Approved	1
3963	UNSPECIFIED	VORICONAZOLE 200MG OR TABS	ANTIFUNGALS	Approved	2
3951	UNSPECIFIED	VORICONAZOLE 200MG OR TABS	ANTIFUNGALS	Approved	1
3963	NEUROLOGY	VUMERITY	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	NURSE PRACTITIONER, GERONTOLOGY	VUMERITY	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	VUMERITY	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NURSE PRACTITIONER, PEDIATRIC CARE	VYVANSE	AMPHETAMINE PREPARATIONS	Denied	1
3963	FAMILY PRACTICE	VYVANSE 10 MG CAPSULE	CNS STIMULANTS	Denied	1
3963	FAMILY PRACTICE	VYVANSE 10MG CAPSULE	CNS STIMULANTS	Approved	1
3963	FAMILY PRACTICE	VYVANSE 20MG	CNS STIMULANTS	Denied	1
3965	UNSPECIFIED	VYVANSE 20MG CAPS (LISDEXAMFETAMINE)	CNS STIMULANTS	Denied	1
3963	INTERNAL MEDICINE	VYVANSE 20MG CAPSULES	CNS STIMULANTS	Denied	1
3963	FAMILY PRACTICE	VYVANSE 40MG CAPS (LISDEXAMFETAMINE)	AMPHETAMINE PREPARATIONS	Denied	1
3969	PSYCHIATRY	VYVANSE 50MG CAPS (LISDEXAMFETAMINE)	CNS STIMULANTS	Denied	1
3963	FAMILY PRACTICE	VYVANSE 50MG CAPSULE	CNS STIMULANTS	Approved	1
3963	NURSE PRACTITIONER, PEDIATRIC CARE	VYVANSE 50MG CAPSULE	CNS STIMULANTS	Denied	1
3963	PSYCHIATRY	VYVANSE 70MG CAPS (LISDEXAMFETAMINE)	AMPHETAMINE PREPARATIONS	Denied	2
3963	FAMILY PRACTICE	VYVANSE CAPSULE	AMPHETAMINE PREPARATIONS	Denied	1
3963	PEDIATRICS	VYVANSE CAPSULE	AMPHETAMINE PREPARATIONS	Denied	1
3963	UNSPECIFIED	VYVANSE CAPSULES	CNS STIMULANTS	Denied	1
3964	INTERNAL MEDICINE	WEGOVY (SEMAGLUTIDE INJECTION)	ANTIOBESITY	Approved	1
3964	INTERNAL MEDICINE	WEGOVY (SEMAGLUTIDE INJECTION)	ANTIOBESITY	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	NURSE PRACTITIONER, FAMILY HEALTH	WEGOVY (SEMAGLUTIDE INJECTION)	ANTIOBESITY	Approved	1
3964	NURSE PRACTITIONER, UNSPECIFIED	WEGOVY (SEMAGLUTIDE INJECTION)	ANTIOBESITY	Approved	1
3964	UNSPECIFIED	WEGOVY (SEMAGLUTIDE INJECTION)	ANTIOBESITY	Approved	2
3963	UNSPECIFIED	WEGOVY 0.25MG/0.5ML	ANTIOBESITY	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	WINLEVI 1% CREAM	ALL OTHER DERMATOLOGICALS	Denied	1
3963	FAMILY PRACTICE	XELJANZ 10 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	INTERNAL MEDICINE	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	RHEUMATOLOGY	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	GASTROENTEROLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3961	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3962	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	UNSPECIFIED	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	XELJANZ XR 22 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	XELJANZ XR 22 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	INTERNAL MEDICINE	XERMELO	TRYPTOPHAN HYDROXYLASE INHIBITOR	Approved	1
3963	HEMATOLOGY & ONCOLOGY	XGEVA	OSTEOPOROSIS AGENTS	Approved	3
3963	UNSPECIFIED	XGEVA	OSTEOPOROSIS AGENTS	Approved	1
3967	OTOLARYNGOLOGY	XHANCE (FLUTICASONE NASAL SPRAY)	NASAL CORTICOSTEROID	Approved	1
3965	UNSPECIFIED	XHANCE (FLUTICASONE NASAL SPRAY)	NASAL CORTICOSTEROID	Approved	1
3965	UNSPECIFIED	XHANCE (FLUTICASONE NASAL SPRAY)	NASAL CORTICOSTEROID	Denied	1
3963	OTOLARYNGOLOGY	XHANCE (FLUTICASONE PROPIONATE NASAL SPRAY)	NASAL CORTICOSTEROID	Denied	1
3963	ALLERGY & IMMUNOLOGY	XHANCE 93MCG/ACT NA EXHU	NASAL CORTICOSTEROID	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	XIFAXAN 200MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	2
3956	UNSPECIFIED	XIFAXAN 200MG TABLET (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3951	UNSPECIFIED	XIFAXAN 200MG TABLET (RIFAXIMIN)	ANTI-INFECTIVES	Denied	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	XIFAXAN 550 MG TABLET	ANTI-INFECTIVES	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	FAMILY PRACTICE	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	3
3965	FAMILY PRACTICE	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3956	FAMILY PRACTICE	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3964	FAMILY PRACTICE	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3963	GASTROENTEROLOGY	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3969	GASTROENTEROLOGY	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3951	GASTROENTEROLOGY	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	3
3956	GASTROENTEROLOGY	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3969	GASTROENTEROLOGY	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3956	INTERNAL MEDICINE	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3964	PHYSICIAN, SURGERY, GENERAL	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	1
3963	UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	2
3964	UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	2
3965	UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	5
3956	UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Approved	4
3956	UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	3
3951	UNSPECIFIED	XIFAXAN 550MG (RIFAXIMIN)	ANTI-INFECTIVES	Denied	1
3963	FAMILY PRACTICE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	3
3956	FAMILY PRACTICE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	5
3951	FAMILY PRACTICE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	FAMILY PRACTICE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Denied	1
3956	GASTROENTEROLOGY	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	9
3963	GASTROENTEROLOGY	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	16
3965	GASTROENTEROLOGY	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3963	HOSPITALIST	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	INTERNAL MEDICINE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	2
3963	INTERNAL MEDICINE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3951	INTERNAL MEDICINE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3962	NURSE PRACTITIONER, ACUTE CARE	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	8
3961	NURSE PRACTITIONER, FAMILY HEALTH	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	NURSE PRACTITIONER, UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	OTOLARYNGOLOGY	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	1
3956	UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	16
3951	UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	4
3963	UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	13
3961	UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Approved	4
3963	UNSPECIFIED	XIFAXAN 550MG OR TABS	ANTI-INFECTIVES	Denied	1
3963	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	8
3956	DERMATOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3962	ALLERGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	ALLERGY	XOLAIR	RESPIRATORY AGENTS	Approved	2
3956	ALLERGY	XOLAIR	RESPIRATORY AGENTS	Denied	1
3964	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	2
3961	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Denied	1
3963	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Denied	4
3951	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	FAMILY PRACTICE	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	INTERNAL MEDICINE	XOLAIR	RESPIRATORY AGENTS	Denied	1
3956	INTERNAL MEDICINE	XOLAIR	RESPIRATORY AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	PEDIATRICS	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	PEDIATRICS	XOLAIR	RESPIRATORY AGENTS	Approved	2
3961	PEDIATRICS	XOLAIR	RESPIRATORY AGENTS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	3
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	PULMONARY DISEASES	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	REGISTERED NURSE, UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3964	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Denied	1
3963	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	2
3962	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Denied	2
3956	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Denied	2
3956	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3951	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	ALLERGY & IMMUNOLOGY	XOLAIR 150MG/ML SC SOSY	RESPIRATORY AGENTS	Approved	1
3963	FAMILY PRACTICE	XTAMPZA ER 18MG OR C12A	NARCOTIC ANALGESICS	Approved	1
3963	UNSPECIFIED	XTAMPZA ER 36MG OR C12A	NARCOTIC ANALGESICS	Approved	1
3963	UROLOGY	XTANDI	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	XTANDI	ANTINEOPLASTICS	Approved	2
3965	UNSPECIFIED	XTANDI	ANTINEOPLASTICS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	XULTOPHY (INSULIN DEGLUDEC-LIRAGLUTIDE)	DIABETIC AGENT	Approved	1
3956	FAMILY PRACTICE	XULTOPHY 100-3.6UNIT-MG/ML SC SOPN	DIABETIC AGENT	Approved	3
3956	NURSE PRACTITIONER, FAMILY HEALTH	XULTOPHY 100-3.6UNIT-MG/ML SC SOPN	DIABETIC AGENT	Approved	2
3962	FAMILY PRACTICE	XYOSTED (TESTOSTERONE ENANTHATE)	ANDROGENS	Approved	2
3963	FAMILY PRACTICE	XYOSTED (TESTOSTERONE ENANTHATE)	ANDROGENS	Approved	1
3963	INTERNAL MEDICINE	XYOSTED (TESTOSTERONE ENANTHATE)	ANDROGENS	Denied	1
3963	UNSPECIFIED	XYOSTED (TESTOSTERONE ENANTHATE)	ANDROGENS	Denied	1
3963	UNSPECIFIED	XYOSTED (TESTOSTERONE ENANTHATE)	ANDROGENS	Approved	1
3964	UNSPECIFIED	XYOSTED (TESTOSTERONE ENANTHATE)	ANDROGENS	Approved	1
3963	FAMILY PRACTICE	XYOSTED 100 MG/0.5 ML INJECTION	ANDROGENS	Denied	1
3963	INTERNAL MEDICINE	XYOSTED 100MG/0.5ML SC SOAJ	ANDROGENS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	XYOSTED 100MG/0.5ML SC SOAJ	ANDROGENS	Approved	1
3963	FAMILY PRACTICE	XYOSTED 50MG/0.5ML SC SOAJ	ANDROGENS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	XYOSTED 50MG/0.5ML SC SOAJ	ANDROGENS	Approved	1
3963	FAMILY PRACTICE	XYOSTED 75MG/0.5ML SC SOAJ	ANDROGENS	Approved	2
3963	UNSPECIFIED	XYOSTED 75MG/0.5ML SC SOAJ	ANDROGENS	Approved	1
3962	NURSE PRACTITIONER, UNSPECIFIED	XYREM	CNS DEPRESSANTS	Approved	1
3969	NURSE PRACTITIONER, UNSPECIFIED	XYREM	CNS DEPRESSANTS	Denied	1
3963	UNSPECIFIED	XYREM	CNS DEPRESSANTS	Approved	1
3963	PULMONARY DISEASES	XYWAV	CNS DEPRESSANTS	Approved	2
3963	UNSPECIFIED	XYWAV	CNS DEPRESSANTS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	ZAVZPRET (ZAVEGEPANT)	ANTIMIGRAINE	Denied	1
3963	UNSPECIFIED	ZAVZPRET (ZAVEGEPANT)	ANTIMIGRAINE	Approved	3
3963	UNSPECIFIED	ZAVZPRET (ZAVEGEPANT)	ANTIMIGRAINE	Denied	3
3956	UNSPECIFIED	ZEJULA	ANTINEOPLASTICS	Approved	1
3963	NEUROLOGY	ZEMBRACE SYMTOUCH 3MG/0.5ML SC SOAJ	ANTIMIGRAINE	Approved	1

1985         PHYSICAN ASSISTANT, LASPECIPIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Aprilement         1           3982         PHYSICAN ASSISTANT, LASPECIPIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Aprilement         2           3864         PHYSICAN ASSISTANT, LASPECIPIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Approved         1           3985         PHYSICAN ASSISTANT, LASPECIPIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Approved         2           3983         UNSPECIFIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Approved         2           3984         UNSPECIFIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Approved         1           3985         UNSPECIFIED         ZEMATANE (SOTHERHON)         DERMATOLOGICAL ACENTS         Approved         1           3986         UNSPECIFIED         ZEMATANE SOME CAPSULE         DERMATOLOGICAL ACENTS         Approved         1           3983         UNSPECIFIED         ZEMATANE SOME CAPSULE         DERMATOLOGICAL ACENTS         Approved         1           3984         DERMATOLOGICAL ACENTS         Approved         ZEMATANE SOME ON CAPS         DERMATOLOGICAL ACENTS         Approved         2	Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
9966         PHYSICIAN ASSISTANT UNSPECIFIED         ZENATANE (ISCITETINON)         DERMATIOLOGICAL AGENTS         Agenteed         1           3866         PHYSICIAN ASSISTANT UNSPECIFIED         ZENATANE (ISCITETINON)         DERMATIOLOGICAL AGENTS         Agenteed         1           3865         PHYSICIAN ASSISTANT UNSPECIFIED         ZENATANE (SOTRETINON)         DERMATIOLOGICAL AGENTS         Dened         2           3868         UNSPECIFIED         ZENATANE (SOTRETINON)         DERMATIOLOGICAL AGENTS         Approved         1           3869         UNSPECIFIED         ZENATANE SOMG CAPSULE         DERMATIOLOGICAL AGENTS         Approved         1           3860         UNSPECIFIED         ZENATANE SOMG CAPSULE         DERMATIOLOGICAL AGENTS         Approved         1           3861         UNSEC PRICTITIONER, FAMILY HEALTH         ZENATANE SOMG CAPS         DERMATIOLOGICAL AGENTS         Approved         1           3863         DERMATIOLOGY         ZENATANE SOMG CAPS         DERMATIOLOGICAL AGENTS         Approved         1           3863         DERMATIOLOGY         ZENATANE SOMG CAPS         DERMATIOLOGICAL AGENTS         Approved         1           3863         DERMATIOLOGY         ZENATANE SOMG CAPS         DERMATIOLOGICAL AGENTS         Approved         1           3863	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Denied	1
8964         PHYSICIAN ASSISTANT UNSPECIFED         ZENATANE ISOTRETINONIN         DERMATOLOGICAL AGENTS         Approvided         1           3060         PHYSICIAN ASSISTANT UNSPECIFED         ZENATANE ISOTRETINONIN         DERMATOLOGICAL AGENTS         Approved         1           3083         UNSPECIFED         ZENATANE ISOTRETINONIN         DERMATOLOGICAL AGENTS         Approved         1           3080         UNSPECIFED         ZENATANE ISOTRETINONIN         DERMATOLOGICAL AGENTS         Approved         1           3081         UNSPECIFED         ZENATANE BOUNG CONSULE         DERMATOLOGICAL AGENTS         Approved         1           3083         UNSPECIFED         ZENATANE BOUNG CORSULE         DERMATOLOGICAL AGENTS         Approved         1           3083         UNSPECIFED         ZENATANE BOUNG CORSUL         DERMATOLOGICAL AGENTS         Approved         1           3083         PERMATOLOGY         ZENATANE BOUNG COR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3083         PHYSICIAN ASSISTANT UNSPECIFED         ZENATANE BOUNG COR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3083         UNSPECIFED         ZENATANE BOUNG COR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3083         UNSPEC	3962	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
9886         PHYSICIAN ASSISTANT, UNSPICIPED         ZHAZTANE SISTIRITINONI         DERMATOLOGICAL AGENTS         Approved         1           3893         UNSPECIFIED         ZHAZTANE SISTIRITINONI         DERMATOLOGICAL AGENTS         Approved         1           3989         UNSPECIFIED         ZENATANE SISTIRITINONI         DERMATOLOGICAL AGENTS         Approved         1           3965         UNSPECIFIED         ZENATANE SISTIRITINONI         DERMATOLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         ZENATANE SISTIRIC GAP         DERMATOLOGICAL AGENTS         Approved         1           3963         UNSPECIFICATIONER, FAMILY HEALTH         ZENATANE SISMIC GAP         DERMATOLOGICAL AGENTS         Approved         1           3963         DERMATOLOGY         ZENATANE SISMIC GAPS         DERMATOLOGICAL AGENTS         Approved         1           3963         DERMATOLOGY         ZENATANE SISMIC GAPS         DERMATOLOGICAL AGENTS         Approved         1           3963         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE SISMIC GRICA PS         DERMATOLOGICAL AGENTS         Approved         2           3964         UNSPECIFIED         ZENATANE SISMIC GRICA PS         DERMATOLOGICAL AGENTS         Approved         2           3965         UNS	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Denied	2
9963         UNSPECIFIED         ZENATANE (ISOTRETNOIN)         DEFMATOLOGICAL AGENTS         Denied         2           3990         UNSPECIFIED         ZENATANE (ISOTRETNOIN)         DEFMATOLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         ZENATANE SIM CACASULE         DEFMATOLOGICAL AGENTS         Approved         1           3986         UNSPECIFIED         ZENATANE SIM CACASULE         DEFMATOLOGICAL AGENTS         Approved         1           3963         NURSE PRACTITIONER, RAMILY HEALTH         ZENATANE SIM GOR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3963         DEFMATOLOGY         ZENATANE SIM GOR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3963         PHYSICAN ASSISTANT UNSPECIFIED         ZENATANE SIM GOR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         ZENATANE SIM GOR CAPS         DEFMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         ZENATANE SIM GOR CAPS         DEFMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         ZENATANE SIM GOR CAPS         DEFMATOLOGICAL AGENTS         Approved         2           3963         UNSPECIFIED         Z	3964	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
900         UNSPECIFIED         ZENATANE ISOTRETINOIN         DEFMATOLOGICAL AGENTS         Approved         1           3866         UNSPECIFIED         ZENATANE SO MG CAPSULE         DEFMATOLOGICAL AGENTS         Approved         1           3866         UNSPECIFIED         ZENATANE SO MG CAPSULE         DEFMATOLOGICAL AGENTS         Approved         1           3881         NURSE PRACTITIONER, FAMILY HEALTH         ZENATANE SOMG CAP         DEFMATOLOGICAL AGENTS         Approved         1           3886         DEFMATOLOGY         ZENATANE SOMG OR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3886         OEBMATOLOGY         ZENATANE SOMG OR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3886         OEBMATOLOGY         ZENATANE SOMG OR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3886         OEBMATOLOGY         ZENATANE SOMG OR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3886         UNSPECIFIED         ZENATANE SOMG OR CAPS         DEFMATOLOGICAL AGENTS         Approved         2           3861         UNSPECIFIED         ZENATANE SOMG OR CAPS         DEFMATOLOGICAL AGENTS         Approved         1           3861         UNSPECIFIED         ZENATANE SOMG CAPS	3965	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3856         UNSPECIFIED         ZENATANE 30 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3966         UNSPECIFIED         ZENATANE 30 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3968         NURSE RRACTITIONER, FAMILY HEALTH         ZENATANE 30MG CR         DERMATOLOGICAL AGENTS         Approved         1           3968         DERMATOLOGY         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3968         DERMATOLOGY         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3968         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3969         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3961         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3961         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3961         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3962         DERMATOLOG	3963	UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Denied	2
9566         UNSPECIFIED         ZENATANE 30MS CAP SULE         DERMATOLOGICAL AGENTS         Approved         1           3983         NURSE FRACTITIONER, FAMILY HEALTH         ZENATANE 30MS CAP         DERMATOLOGICAL AGENTS         Approved         1           3983         DERMATOLOGY         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         4           3986         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         5           3986         UNSPECIFIED         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3987         UNSPECIFIED         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3981         UNSPECIFIED         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3981         UNSPECIFIED         ZENATANE 30MS GR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3981         DERMATOLOGY         ZENATANE 40MS GR SPULE         DERMATOLOGICAL AGENTS         Approved         2           3982         DERMATOLO	3969	UNSPECIFIED	ZENATANE (ISOTRETINOIN)	DERMATOLOGICAL AGENTS	Approved	1
3983         NURSE PRACTITIONER, FAMILY HEALTH         ZENATANE 30MG CAP         DERMATOLOGICAL AGENTS         Approved         1           3966         DERMATOLOGY         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3983         DERMATOLOGY         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         4           3986         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3986         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3986         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3981         UNSPECIFIED         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3983         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3986         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3987	3965	UNSPECIFIED	ZENATANE 30 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	1
3956         DERMATOLOGY         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3863         DERMATOLOGY         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3863         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3866         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3863         UNSPECIFIED         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3861         UNSPECIFIED         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3861         UNSPECIFIED         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3861         DERMATOLOGY         ZENATANE SOMG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3863         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3863         DERMATOLOGY         ZENATANE 40 MG CAPS         DERMATOLOGICAL AGENTS         Approved         2           3863         DERMATOLOGY         Z	3956	UNSPECIFIED	ZENATANE 30 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	1
3983         DERMATOLOGY         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3983         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         4           3966         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         5           3966         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3961         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3961         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3961         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3963         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         ZENATANE 40 MG CAPS         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         ZENATANE 40 MG CAPS         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         ZE	3963	NURSE PRACTITIONER, FAMILY HEALTH	ZENATANE 30MG CAP	DERMATOLOGICAL AGENTS	Approved	1
3983         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         4           3966         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3983         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3981         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3981         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3981         UNSPECIFIED         ZENATANE 40MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3983         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3986         DERMATOLOGY         ZENATANE 40 MG CAPS         DERMATOLOGICAL AGENTS         Approved         2           3986         DERMATOLOGY         ZENATANE 40MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3986         DERMATOLOGY         ZENATANE 40MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3983         DERMATOLOGY         Z	3956	DERMATOLOGY	ZENATANE 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3966         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3963         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         5           3966         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3961         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3961         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3963         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3961         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3966         DERMATOLOGY         ZENATANE 40 MG CAPS         DERMATOLOGICAL AGENTS         Approved         2           3966         DERMATOLOGY         ZENATANE 40 MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3963         NURSE PRACTITIONER, ACUTE CARE         ZENATANE 40 MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3963         PHYSICI	3963	DERMATOLOGY	ZENATANE 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         5           3956         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3951         UNSPECIFIED         ZENATANE 30MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3951         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         1           3963         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3961         PHYSICIAN ASSISTANT, UNSPECIFIED         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         ZENATANE 40 MG CAPSULE         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         ZENATANE 40 MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3963         DERMATOLOGY         ZENATANE 40 MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         1           3963         NURSE PRACTITIONER, ACUTE CARE         ZENATANE 40 MG OR CAPS         DERMATOLOGICAL AGENTS         Approved         2           3963         PHYSICIAN ASSISTANT, UNS	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	4
3956UNSPECIFIEDZENATANE 30MG OR CAPSDERMATOLOGICAL AGENTSApproved23951UNSPECIFIEDZENATANE 30MG OR CAPSDERMATOLOGICAL AGENTSApproved13951DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved13963DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved23963DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved23966DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved23963DERMATOLOGYZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved23964NURSE PRACTITIONER, ACUTE CAREZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963NURSE PRACTITIONER, ACUTE CAREZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved23966PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved23966PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved1 <td>3956</td> <td>PHYSICIAN ASSISTANT, UNSPECIFIED</td> <td>ZENATANE 30MG OR CAPS</td> <td>DERMATOLOGICAL AGENTS</td> <td>Approved</td> <td>1</td>	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3961UNSPECIFIEDZENATANE 30MG OR CAPSDERMATOLOGICAL AGENTSApproved13951DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved13983DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved13961PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved23956DERMATOLOGYZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved23953DERMATOLOGYZENATANE 40 MG OR CAPSDERMATOLOGICAL AGENTSApproved23956NURSE PRACTITIONER, ACUTE CAREZENATANE 40 MG OR CAPSDERMATOLOGICAL AGENTSApproved13963NURSE PRACTITIONER, FAMILY HEALTHZENATANE 40 MG OR CAPSDERMATOLOGICAL AGENTSApproved13963PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40 MG OR CAPSDERMATOLOGICAL AGENTSApproved23966PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40 MG OR CAPSDERMATOLOGICAL AGENTSApproved13963UNSPECIFIEDZENATANE 40 MG OR CAPSDERMATOLOGICAL AGENTSApproved13964INTERNAL MEDICINEZENPEP 10000-22000 UNIT OR CPEPGASTROINTESTINAL AGENTSApproved13963INTERNAL MEDICINEZENPEP 10000-22000 UNIT OR CPEPGASTROINTESTINAL AGENTSApproved13963FAMILY PRACTICEZENPEP 40,000 UNIT-126,000 UNIT-126,	3963	UNSPECIFIED	ZENATANE 30MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	5
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3961PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40 MG CAPSULEDERMATOLOGICAL AGENTSApproved23966DERMATOLOGYZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved23963DERMATOLOGYZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved23966NURSE PRACTITIONER, ACUTE CAREZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963NURSE PRACTITIONER, FAMILY HEALTHZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved23966PHYSICIAN ASSISTANT, UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13963UNSPECIFIEDZENATANE 40MG OR CAPSDERMATOLOGICAL AGENTSApproved13964INTERNAL MEDICINEZENPEP 10000-32000UNIT OR CPEPGASTROINTESTINAL AGENTSApproved13961INTERNAL MEDICINEZENPEP 20000-63000UNIT OR CPEPGASTROINTESTINAL AGENTSApproved13963FAMILY PRACTICEZENPEP 25000UNITGASTROINTESTINAL AGENTSApproved13963PAMILY PRACTICEZENPEP 40000-126000UNIT OR CPEPGASTROINTESTINAL AGENTSApproved13963FAMILY PRACTICEZENPEP 40000-126000UNIT OR CPEPGASTROINTESTINAL AGENTSApproved13966GASTROINTESTINAL AGENTSApproved13966GASTROINTESTINAL AGENTSApproved23966GASTRO	3951	DERMATOLOGY	ZENATANE 40 MG CAPSULE	DERMATOLOGICAL AGENTS	Approved	1
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NURSE PRACTITIONER, ACUTE CARE  ZENATANE 40MG OR CAPS  DERMATOLOGICAL AGENTS  Approved  1 3963  NURSE PRACTITIONER, FAMILY HEALTH  ZENATANE 40MG OR CAPS  DERMATOLOGICAL AGENTS  Approved  1 3963  PHYSICIAN ASSISTANT, UNSPECIFIED  ZENATANE 40MG OR CAPS  DERMATOLOGICAL AGENTS  Approved  2 3966  PHYSICIAN ASSISTANT, UNSPECIFIED  ZENATANE 40MG OR CAPS  DERMATOLOGICAL AGENTS  Approved  1 3963  UNSPECIFIED  ZENATANE 40MG OR CAPS  DERMATOLOGICAL AGENTS  Approved  1 3963  UNSPECIFIED  ZENATANE 40MG OR CAPS  DERMATOLOGICAL AGENTS  Approved  1 3964  INTERNAL MEDICINE  ZENPEP 10000-32000UNIT OR CPEP  GASTROINTESTINAL AGENTS  Approved  1 3961  SURGERY, VASCULAR  ZENPEP 20000-63000UNIT OR CPEP  GASTROINTESTINAL AGENTS  Denied  1 3963  FAMILY PRACTICE  ZENPEP 3000-10000UNIT OR CPEP  GASTROINTESTINAL AGENTS  Approved  1 3963  FAMILY PRACTICE  ZENPEP 40,000 UNIT-126,000 UNIT-168,000 UNIT CAPSULE, DELAYED RELEASE  3966  GASTROINTESTINAL AGENTS  Approved  1 3967  Approved  1 3968  GASTROINTESTINAL AGENTS  Approved  1 3969  2ENPEP 40,000-126000UNIT OR CPEP  GASTROINTESTINAL AGENTS  Approved  1 3969  GASTROINTESTINAL AGENTS  Approved  1 3969  Approved  1 3960  GASTROINTESTINAL AGENTS  Approved  1 3960  Approved  1 3960  GASTROINTESTINAL AGENTS  Approved  1 3960  Approved	3956	DERMATOLOGY	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	2
NURSE PRACTITIONER, FAMILY HEALTH ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 1  3963 PHYSICIAN ASSISTANT, UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 2  3956 PHYSICIAN ASSISTANT, UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 1  3963 UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 3  3966 INTERNAL MEDICINE ZENPEP 10000-32000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3961 INTERNAL MEDICINE ZENPEP 20000-63000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Denied 1  3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000	3963	DERMATOLOGY	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	2
PHYSICIAN ASSISTANT, UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 2  3956 PHYSICIAN ASSISTANT, UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 1  3963 UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 3  3956 INTERNAL MEDICINE ZENPEP 10000-32000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3961 INTERNAL MEDICINE ZENPEP 20000-63000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3951 SURGERY, VASCULAR ZENPEP 25000UNIT GROPEP GASTROINTESTINAL AGENTS Denied 1  3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-126,00	3956	NURSE PRACTITIONER, ACUTE CARE	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
PHYSICIAN ASSISTANT, UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 1  3963 UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 3  3956 INTERNAL MEDICINE ZENPEP 10000-32000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3961 INTERNAL MEDICINE ZENPEP 20000-63000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3951 SURGERY, VASCULAR ZENPEP 25000UNIT GASTROINTESTINAL AGENTS Denied 1  3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-168,000 UNIT-168	3963	NURSE PRACTITIONER, FAMILY HEALTH	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3963 UNSPECIFIED ZENATANE 40MG OR CAPS DERMATOLOGICAL AGENTS Approved 3 3956 INTERNAL MEDICINE ZENPEP 10000-32000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3961 INTERNAL MEDICINE ZENPEP 20000-63000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3951 SURGERY, VASCULAR ZENPEP 25000UNIT GASTROINTESTINAL AGENTS Denied 1 3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-168,000 UNIT GASTROINTESTINAL AGENTS Approved 1 3963 FAMILY PRACTICE ZENPEP 40,000 UNIT-126,000 U	3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	2
3956 INTERNAL MEDICINE ZENPEP 10000-32000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3961 INTERNAL MEDICINE ZENPEP 20000-63000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3951 SURGERY, VASCULAR ZENPEP 25000UNIT GASTROINTESTINAL AGENTS Denied 1 3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-168,000 UNIT CAPSULE, DELAYED RELEASE GASTROINTESTINAL AGENTS Approved 1 3963 FAMILY PRACTICE ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3966 GASTROENTEROLOGY ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 2 3966 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3956	PHYSICIAN ASSISTANT, UNSPECIFIED	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	1
3961 INTERNAL MEDICINE ZENPEP 20000-63000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3951 SURGERY, VASCULAR ZENPEP 25000UNIT GASTROINTESTINAL AGENTS Denied 1 3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-168,000 UNIT CAPSULE, DELAYED RELEASE GASTROINTESTINAL AGENTS Approved 1 3963 FAMILY PRACTICE ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3956 GASTROENTEROLOGY ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 2 3956 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3963	UNSPECIFIED	ZENATANE 40MG OR CAPS	DERMATOLOGICAL AGENTS	Approved	3
3951 SURGERY, VASCULAR ZENPEP 25000UNIT GASTROINTESTINAL AGENTS Denied 1 3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-126,000 UNIT CAPSULE, DELAYED RELEASE GASTROINTESTINAL AGENTS Approved 1 3963 FAMILY PRACTICE ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3956 GASTROENTEROLOGY ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 2 3956 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3956	INTERNAL MEDICINE	ZENPEP 10000-32000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3963 FAMILY PRACTICE ZENPEP 3000-10000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3963 NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-126,000 UNIT- CAPSULE, DELAYED RELEASE GASTROINTESTINAL AGENTS Approved 1 3963 FAMILY PRACTICE ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1 3956 GASTROENTEROLOGY ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 2 3956 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3961	INTERNAL MEDICINE	ZENPEP 20000-63000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
NURSE PRACTITIONER, FAMILY HEALTH ZENPEP 40,000 UNIT-126,000 UNIT-168,000 UNIT CAPSULE, DELAYED RELEASE  GASTROINTESTINAL AGENTS Approved 1  SPACE SPA	3951	SURGERY, VASCULAR	ZENPEP 25000UNIT	GASTROINTESTINAL AGENTS	Denied	1
Approved 1  CAPSULE, DELAYED RELEASE GASTROINTESTINAL AGENTS Approved 1  3963 FAMILY PRACTICE ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1  3966 GASTROENTEROLOGY ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 2  3956 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3963	FAMILY PRACTICE	ZENPEP 3000-10000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3956 GASTROENTEROLOGY ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 2 3956 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3963	NURSE PRACTITIONER, FAMILY HEALTH		GASTROINTESTINAL AGENTS	Approved	1
3956 PULMONARY DISEASES ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 1	3963	FAMILY PRACTICE	ZENPEP 40000-126000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
	3956	GASTROENTEROLOGY	ZENPEP 40000-126000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	2
3956 UNSPECIFIED ZENPEP 40000-126000UNIT OR CPEP GASTROINTESTINAL AGENTS Approved 3	3956	PULMONARY DISEASES	ZENPEP 40000-126000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
	3956	UNSPECIFIED	ZENPEP 40000-126000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	ZENPEP 40000-126000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	ZENPEP 40000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3963	UNSPECIFIED	ZENPEP 40000UNIT	GASTROINTESTINAL AGENTS	Approved	1
3956	FAMILY PRACTICE	ZENPEP 5000-24000UNIT OR CPEP	GASTROINTESTINAL AGENTS	Approved	1
3956	EMERGENCY MEDICINE	ZENZEDI 30MG OR TABS	GASTROINTESTINAL AGENTS	Approved	1
3963	FAMILY PRACTICE	ZENZEDI 30MG OR TABS	GASTROINTESTINAL AGENTS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	ZIEXTENZO	HEMATINICS & BLOOD CELL STIMULATORS	Approved	1
3956	INTERNAL MEDICINE	ZIEXTENZO	HEMATINICS & BLOOD CELL STIMULATORS	Approved	1
3963	UNSPECIFIED	ZIEXTENZO	HEMATINICS & BLOOD CELL STIMULATORS	Approved	1
3963	UNSPECIFIED	ZIEXTENZO	HEMATINICS & BLOOD CELL STIMULATORS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	ZOLEDRONIC ACID 4MG	OSTEOPOROSIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	ZOLEDRONIC ACID 5MG	OSTEOPOROSIS AGENTS	Approved	1
3956	NEUROLOGY	ZOLMITRIPTAN TABLET	MIGRAINE TREATMENT	Denied	1
3963	FAMILY PRACTICE	ZOVIRAX CREAM (ACYCLOVIR)	ANTIVIRALS	Approved	1