



# Humana Healthy Horizons® in Oklahoma

## Cambios en la Lista de Medicamentos Preferidos

Este documento se actualizó el [3/20/2026].

Para ver su lista completa de medicamentos, [haga clic aquí](#). To view in English, [click here](#).

La Lista de Medicamentos Preferidos de Humana Healthy Horizons® in Oklahoma puede cambiar durante el año. Estos cambios podrían significar que un medicamento ya no sea preferido o que tenga nuevas reglas para que podamos cubrirlo. A continuación, encontrará una lista de los medicamentos que han cambiado.

### Cómo leer los cambios de su lista de medicamentos

- **Retiro de medicamentos de la lista:** Estos medicamentos eran preferidos, pero ahora se retirarán de la lista de medicamentos. Si su medicamento se retira de esta lista, es posible que tenga que pagar su precio completo.
- **Autorización previa:** Estos medicamentos deben tener la aprobación de Humana Healthy Horizons® antes de que los cubramos. A esto se le conoce como autorización previa.
- **Terapia por fases:** En el caso de estos medicamentos, se exige probar primero al menos otro medicamento.

### Sus próximos pasos

- **Hable con su proveedor de cuidado de la salud pronto.** Debería compartir esta lista con su proveedor. Puede ayudarle a decidir qué tiene que hacer a continuación.
- **Solicite la aprobación.** Si los medicamentos alternativos no le funcionan, su proveedor debe informar a Humana Healthy Horizons® por qué necesita su medicamento actual. Su proveedor puede encontrar los pasos para solicitar la aprobación en [es-www.humana.com/PA](http://es-www.humana.com/PA).

### Retiro de medicamentos de la lista

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
ZEPBOUND 10 MG/0.5 ML VIAL	Consulte a su médico	2/24/2026
ZEPBOUND 12.5 MG/0.5 ML VIAL	Consulte a su médico	2/24/2026



Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
ZEPBOUND 15 MG/0.5 ML VIAL	Consulte a su médico	2/24/2026
ZEPBOUND 2.5 MG/0.5 ML VIAL	Consulte a su médico	2/24/2026
ZEPBOUND 5 MG/0.5 ML VIAL	Consulte a su médico	2/24/2026
ZEPBOUND 7.5 MG/0.5 ML VIAL	Consulte a su médico	2/24/2026
ADLARITY 10MG/DAY WEEKLY PATCH	donepezil tablet	2/17/2026
ADLARITY 5 MG/DAY WEEKLY PATCH	donepezil tablet	2/17/2026
BREXAFEMME 150 MG TABLET	fluconazole tablet; fluconazole oral suspension	2/17/2026
BYDUREON BCISE 2 MG AUTOINJECT	Consulte a su médico	2/17/2026
CHENODAL 250 MG TABLET	ursodiol tablet	2/17/2026
CHLORAMPHEN NA SUCC 1 GM VL	Consulte a su médico	2/17/2026
CHLORAMPHEN SOD SUCC 1 GM VL	Consulte a su médico	2/17/2026
CHLORAMPHENICOL 1 GM VIAL	Consulte a su médico	2/17/2026
CHLORAMPHENICOL SS 1 GM VIAL	Consulte a su médico	2/17/2026
CHLORAMPHENICOL VIAL	Consulte a su médico	2/17/2026
CYMBALTA 60 MG CAPSULE	duloxetine capsule, delayed release	2/17/2026
DESMOPRESSIN 0.01% SOLUTION	desmopressin nasal spray (non-refrigerated)	2/17/2026
DESMOPRESSIN 0.01% SPRAY	desmopressin nasal spray (non-refrigerated)	2/17/2026
DESMOPRESSIN 0.1 MG/ML SPRAY	desmopressin nasal spray (non-refrigerated)	2/17/2026
DILTIAZEM 24HR ER 120 MG CAP	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM 24HR ER 180 MG CAP	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM 24HR ER 240 MG CAP	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM 24HR ER 300 MG CAP	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM 24HR ER 360 MG CAP	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM ER 120 MG CAPSULE	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM ER 180 MG CAPSULE	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM HCL 120 MG CAP SA	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM HCL 180 MG CAP SA	Tiadyt ER capsule, extended release	2/17/2026
DILTIAZEM HCL 240 MG CAP SA	Tiadyt ER capsule, extended release	2/17/2026

<b>Medicamento afectado</b>	<b>Medicamento alternativo</b>	<b>Fecha de entrada en vigencia</b>
DILTIAZEM HCL 300 MG CAP ER	Tiadylt ER capsule,extended release	2/17/2026
DILTIAZEM HCL 300 MG CAP SA	Tiadylt ER capsule,extended release	2/17/2026
DILTIAZEM HCL 360 MG CAP ER	Tiadylt ER capsule,extended release	2/17/2026
DILTIAZEM HCL 360 MG CAP SA	Tiadylt ER capsule,extended release	2/17/2026
DILTIAZEM HCL ER 240 MG CAP	Tiadylt ER capsule,extended release	2/17/2026
DILTIAZEM HCL ER 300 MG CAP	Tiadylt ER capsule,extended release	2/17/2026
DILTIAZEM HCL ER 360 MG CAP	Tiadylt ER capsule,extended release	2/17/2026
ERGOLOID MESYLATES 1 MG TAB	donepezil tablet; memantine tablet	2/17/2026
FLOLAN 0.5 MG VIAL	epoprostenol intravenous solution	2/17/2026
FUZEON 90 MG VIAL	Consulte a su médico	2/17/2026
GONITRO 0.4 MG SUBLINGUAL PWD	nitroglycerin sublingual tablet	2/17/2026
HALOPERIDOL LAC 5 MG/ML SYRING	haloperidol lactate injection solution	2/17/2026
HALOPERIDOL LAC 5 MG/ML SYRN	haloperidol lactate injection solution	2/17/2026
NEO-POLYCIN EYE OINTMENT	neomycin-bacitracin-polymyxin eye ointment	2/17/2026
NEO-POLYCIN HC EYE OINTMENT	neomycin-bacitracin-poly-HC eye ointment	2/17/2026
ORALONE 0.1% DENTAL PASTE	triamcinolone acetonide dental paste	2/17/2026
ORALONE 0.1% PASTE	triamcinolone acetonide dental paste	2/17/2026
PARAPLATIN 1,000 MG/100 ML VL	carboplatin intravenous solution; Kyxata intravenous solution	2/17/2026
PARAPLATIN 150 MG/15 ML VIAL	carboplatin intravenous solution; Kyxata intravenous solution	2/17/2026
PARAPLATIN 450 MG/45 ML VIAL	carboplatin intravenous solution; Kyxata intravenous solution	2/17/2026
PARAPLATIN 50 MG/5 ML VIAL	carboplatin intravenous solution; Kyxata intravenous solution	2/17/2026
PARAPLATIN 600 MG/60 ML VIAL	carboplatin intravenous solution; Kyxata intravenous solution	2/17/2026
PERCOCET 2.5/325 MG TABLET	oxycodone-acetaminophen 2.5 mg-325 mg tablet	2/17/2026
PERCOCET 2.5-325 MG TABLET	oxycodone-acetaminophen 2.5 mg-325 mg tablet	2/17/2026
PHENYTOIN SOD EXT 200 MG CAP	Phenytek capsule	2/17/2026
PHENYTOIN SOD EXT 300 MG CAP	Phenytek capsule	2/17/2026
PHYSIOSOL IRRIGATION SOL	Physiolyte 140 mEq-5 mEq-3 mEq-98 mEq/L irrigation solution	2/17/2026
PHYSIOSOL IRRIGATION SOLN	Physiolyte 140 mEq-5 mEq-3 mEq-98 mEq/L irrigation solution	2/17/2026

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
POLYCIN EYE OINTMENT	bacitracin-polymyxin B eye ointment	2/17/2026
QTERN 10 MG-5 MG TABLET	Glyxambi tablet	2/17/2026
SULFACETAMIDE 10% EYE OINT	Consulte a su médico	2/17/2026
SULFACETAMIDE 10% EYE OINTMENT	Consulte a su médico	2/17/2026
TAKHZYRO 300 MG/2 ML VIAL	Consulte a su médico	2/17/2026
TAMIFLU 30 MG CAPSULE	oseltamivir capsule	2/17/2026
TOPICORT 0.05% GEL	desoximetasone topical cream; clobetasol topical cream	2/17/2026
TOPICORT 0.25% CREAM	desoximetasone topical cream; clobetasol topical cream	2/17/2026
TRICOR 48 MG TABLET	fenofibrate nanocrystallized tablet	2/17/2026
UNDECATREX 200 MG CAPSULE	Consulte a su médico	2/17/2026
XEPI 1% CREAM	mupirocin topical ointment	2/17/2026
ZOLEDRONIC ACID 4 MG VIAL	Consulte a su médico	2/17/2026
ARMONAIR DIGIHALER 113 MCG	fluticasone furoate blister powder for inhalation; Arnuity Ellipta powder for inhalation	2/10/2026
FENTANYL CIT 400 MCG BUCCAL TB	Consulte a su médico	2/10/2026
FENTANYL CIT 600 MCG BUCCAL TB	Consulte a su médico	2/10/2026
FENTANYL CIT 800 MCG BUCCAL TB	Consulte a su médico	2/10/2026
GLUCOTROL XL 10 MG TABLET	glipizide ER tablet, extended release 24 hr	2/10/2026
GLUCOTROL XL 10 MG TABLET SA	glipizide ER tablet, extended release 24 hr	2/10/2026
REVATIO 10 MG/ML ORAL SUSP	Consulte a su médico	2/10/2026
SRONYX 0.10-0.02 MG TABLET	Aubra EQ tablet; levonorgestrel-ethinyl estradiol tablet	2/10/2026
VISTARIL 25 MG CAPSULE	hydroxyzine pamoate capsule	2/10/2026
WINRHO SDF 15,000 UNIT VIAL	WinRho SDF 1,500 unit injection solution; HyperRHO intramuscular syringe	2/10/2026
SYMFI LO 400-300-300 MG TABLET	efavirenz-lamivudine-tenofovir disoproxil fumarate tablet	1/27/2026
ABILIFY MYCITE 5 MG START KIT	aripiprazole tablet	1/6/2026
FRAICHE 5000 1.1 % DENTAL GEL	sodium fluoride dental gel; DentaGel	1/6/2026
MS CONTIN 100 MG TABLET	morphine immediate release tablet	1/6/2026
MS CONTIN 100 MG TABLET SA	morphine immediate release tablet	1/6/2026
MS CONTIN ER 100 MG TABLET	morphine immediate release tablet	1/6/2026
OXYCODONE HCL ER 80 MG TABLET	OxyContin 20 mg tablet, crush resistant, extended release	1/6/2026
QUDEXY XR 100 MG CAPSULE	topiramate sprinkle capsule; topiramate tablet	1/6/2026
QUDEXY XR 25 MG CAPSULE	topiramate sprinkle capsule; topiramate tablet	1/6/2026
QUDEXY XR 50 MG CAPSULE	topiramate sprinkle capsule; topiramate tablet	1/6/2026
RAPAMUNE 1 MG TABLET	sirolimus tablet	1/6/2026
SANDIMMUNE 100 MG/ML SOLN	cyclosporine capsule; Sandimmune capsule	1/6/2026
SOD SULFACE-SULF 8-4% CLEANSER	sulfacetamide sodium-sulfur 8 %-4 %	1/6/2026

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
	topical suspension	
STALEVO 100 TABLET	carbidopa-levodopa-entacapone tablet	1/6/2026
VYNDAQEL 20 MG CAPSULE	Consulte a su médico	1/6/2026
ZYVOX 200 MG/100 ML-D5W	Consulte a su médico	1/6/2026
KETONE TEST STRIP	Ketostix strips; TRUEplus Ketone strips	12/30/2025
LIBERVANT 10 MG FILM	Valtoco nasal spray	12/30/2025
LIBERVANT 12.5 MG FILM	Valtoco nasal spray	12/30/2025
LIBERVANT 15 MG FILM	Valtoco nasal spray	12/30/2025
LIBERVANT 5 MG FILM	Valtoco nasal spray	12/30/2025
LIBERVANT 7.5 MG FILM	Valtoco nasal spray	12/30/2025
RELION KETONE TEST STRIP	Ketostix strips; TRUEplus Ketone strips	12/30/2025
CHILD ASPIRIN 81 MG CHEW TAB	aspirin chewable tablet	12/23/2025
CHILD ASPIRIN 81 MG TAB CHEW	aspirin chewable tablet	12/23/2025
CHILDRENS ASPIRIN 81 MG TAB	aspirin chewable tablet	12/23/2025
CHILDREN'S ASPIRIN 81 MG TAB	aspirin chewable tablet	12/23/2025
CHILDREN'S ASPIRIN TABLET	aspirin chewable tablet	12/23/2025
CHILDREN'S ASPRIN 81 MG TAB	aspirin chewable tablet	12/23/2025
CVS CHILD ASPIRIN 81 MG CHW TB	aspirin chewable tablet	12/23/2025
DIASTAT ACUDIAL 10MG GEL (2PK)	diazepam rectal kit	12/23/2025
ECK CHILDS ASPIRIN 81 MG TAB	aspirin chewable tablet	12/23/2025
GLEOSTINE 10 MG CAPSULE	lomustine capsule	12/23/2025
GLEOSTINE 100 MG CAPSULE	lomustine capsule	12/23/2025
GLEOSTINE 40 MG CAPSULE	lomustine capsule	12/23/2025
IDACIO(CF) PEN 40 MG/0.8 ML	adalimumab-fkjp subcutaneous pen kit; Hadlima PushTouch subcutaneous auto-injector	12/23/2025
MIRAPEX ER 2.25 MG TABLET	pramipexole tablet	12/23/2025
MIRAPEX ER 3 MG TABLET	pramipexole tablet	12/23/2025
MIRAPEX ER 3.75 MG TABLET	pramipexole tablet	12/23/2025
PAXIL 10 MG/5 ML SUSPENSION	paroxetine oral suspension	12/23/2025
PV CHILD ASPIRIN 81 MG CHW TAB	aspirin chewable tablet	12/23/2025
QC CHILD ASPIRIN 81 MG CHW TAB	aspirin chewable tablet	12/23/2025
RA CHILD ASPIRIN 81 MG CHW TAB	aspirin chewable tablet	12/23/2025
REVCO CHILDREN'S ASPIRIN TB	aspirin chewable tablet	12/23/2025
SB CHILD ASPIRIN 81 MG CHW TAB	aspirin chewable tablet	12/23/2025
SM CHILD ASPIRIN 81 MG CHW TAB	aspirin chewable tablet	12/23/2025
TREXIMET 85-500 MG TABLET	sumatriptan tablet; sumatriptan-naproxen tablet	12/23/2025
GRANISETRON HCL 0.1 MG/ML VIAL	ondansetron HCl intravenous solution; palonosetron intravenous solution	12/16/2025
HYDROCORT BUTY 0.1% LIPID CRM	betamethasone valerate topical cream; triamcinolone acetonide topical ointment	12/16/2025
HYDROCORT BUTY 0.1% LIPO CREAM	betamethasone valerate topical cream; triamcinolone acetonide topical ointment	12/16/2025
KETOPROFEN 25 MG CAPSULE	naproxen tablet	12/16/2025
LEVOFLOXACIN 500 MG/20 ML VIAL	Consulte a su médico	12/16/2025

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
LEVOFLOXACIN 750 MG/30 ML VIAL	Consulte a su médico	12/16/2025
PHENYTOIN 100 MG/4 ML SUSP	phenytoin chewable tablet; phenytoin 125 mg/5 mL oral suspension	12/16/2025
PHENYTOIN 100 MG/4 ML SUSP CUP	phenytoin chewable tablet; phenytoin 125 mg/5 mL oral suspension	12/16/2025
PHENYTOIN 100 MG/4 ML SUSPENS	phenytoin chewable tablet; phenytoin 125 mg/5 mL oral suspension	12/16/2025
SODIUM SULFACETAMIDE POWDER	Consulte a su médico	12/16/2025
STAVUDINE 15 MG CAPSULE	stavudine 20 mg capsule	12/16/2025
SUDAFED 12HR 120 MG CAPLET	Consulte a su médico	12/16/2025
SUDAFED 12HR 120 MG CAPLT SA	Consulte a su médico	12/16/2025
SUDAFED 12HR 120 MG TABLET	Consulte a su médico	12/16/2025
SULFACETAMIDE SOD CRYST PWD	Consulte a su médico	12/16/2025
SULFACETAMIDE SODIUM POWDER	Consulte a su médico	12/16/2025

### Medicamentos que requieren autorización previa

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
FOCALIN XR 10 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 15 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 20 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 25 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 30 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 35 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 40 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
FOCALIN XR 5 MG CAPSULE	dexmethylphenidate ER capsule,extended release biphasic50-50	4/1/2026
POKONZA 5% (10 MEQ/15 ML) SOLN	potassium chloride ER capsule,extended release; potassium chloride oral liquid	2/24/2026
ABRAXANE 100 MG VIAL	paclitaxel protein-bound intravenous suspension	2/17/2026
ESTRACE 0.01% CREAM	estradiol vaginal cream	2/17/2026
GEODON 20 MG/ML VIAL	ziprasidone intramuscular solution	2/17/2026
LATUDA 120 MG TABLET	lurasidone tablet	2/17/2026
LATUDA 20 MG TABLET	lurasidone tablet	2/17/2026
LATUDA 40 MG TABLET	lurasidone tablet	2/17/2026
LATUDA 60 MG TABLET	lurasidone tablet	2/17/2026
LATUDA 80 MG TABLET	lurasidone tablet	2/17/2026
SAMSCA 15 MG TABLET	tolvaptan tablet	2/17/2026

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
SAMSCA 30 MG TABLET	tolvaptan tablet	2/17/2026
SUTENT 37.5 MG CAPSULE	sunitinib malate capsule	2/17/2026
NEBUPENT 300 MG INHAL POWDER	pentamidine solution for inhalation	2/10/2026
NEBUPENT 300 MG INHAL PWD	pentamidine solution for inhalation	2/10/2026
ORUDIS 75 MG CAPSULE	naproxen tablet	2/3/2026
COMPLERA TABLET	emtricitabine- rilpivirine-tenofovir disoprox fumarate tablet	1/27/2026
PHENERGAN 25 MG/ML AMPUL	promethazine injection solution	1/27/2026
PHENERGAN 25 MG/ML VIAL	promethazine injection solution	1/27/2026
PHENERGAN 50 MG/ML AMPUL	promethazine injection solution	1/27/2026
PHENERGAN 50 MG/ML VIAL	promethazine injection solution	1/27/2026
SENSIPAR 30 MG TABLET	cinacalcet tablet	1/27/2026
SENSIPAR 90 MG TABLET	cinacalcet tablet	1/27/2026
TOVIAZ ER 4 MG TABLET	fesoterodine ER tablet,extended release 24 hr	1/27/2026
TOVIAZ ER 8 MG TABLET	fesoterodine ER tablet,extended release 24 hr	1/27/2026
NITISINONE 10 MG CAPSULE	Consulte a su médico	1/26/2026
NITISINONE 2 MG CAPSULE	Consulte a su médico	1/26/2026
NITISINONE 20 MG CAPSULE	Consulte a su médico	1/26/2026
NITISINONE 5 MG CAPSULE	Consulte a su médico	1/26/2026
NITYR 10 MG TABLET	Consulte a su médico	1/26/2026
NITYR 2 MG TABLET	Consulte a su médico	1/26/2026
NITYR 5 MG TABLET	Consulte a su médico	1/26/2026
ORFADIN 10 MG CAPSULE	Consulte a su médico	1/26/2026
ORFADIN 2 MG CAPSULE	Consulte a su médico	1/26/2026
ORFADIN 20 MG CAPSULE	Consulte a su médico	1/26/2026
ORFADIN 4 MG/ML SUSPENSION	Consulte a su médico	1/26/2026
ORFADIN 5 MG CAPSULE	Consulte a su médico	1/26/2026
TUDORZA PRESSAIR 400 MCG INH	Spiriva with HandiHaler and inhalation capsules; Spiriva Respimat solution for inhalation	1/19/2026
TUDORZA PRESSAIR 400 MCG INHAL	Spiriva with HandiHaler and inhalation capsules; Spiriva Respimat solution for inhalation	1/19/2026
BRILINTA 90 MG TABLET	ticagrelor tablet	1/10/2026
EXFORGE HCT 10-160-12.5 MG TAB	amlodipine-valsartan-hydrochlorothiazide tablet	1/10/2026
EXFORGE HCT 10-160-25 MG TAB	amlodipine-valsartan-hydrochlorothiazide tablet	1/10/2026
EXFORGE HCT 10-320-25 MG TAB	amlodipine-valsartan-hydrochlorothiazide tablet	1/10/2026
EXFORGE HCT 5-160-12.5 MG TAB	amlodipine-valsartan-hydrochlorothiazide tablet	1/10/2026
LETAIRIS 10 MG TABLET	ambrisentan tablet; bosentan tablet	1/10/2026
LETAIRIS 5 MG TABLET	ambrisentan tablet; bosentan tablet	1/10/2026

Medicamento afectado	Medicamento alternativo	Fecha de entrada en vigencia
NEXIUM 20 MG CAPSULE	esomeprazole magnesium capsule,delayed release	1/10/2026
NEXIUM 40 MG CAPSULE	esomeprazole magnesium capsule,delayed release	1/10/2026
NEXIUM DR 20 MG CAPSULE	esomeprazole magnesium capsule,delayed release	1/10/2026
NEXIUM DR 40 MG CAPSULE	esomeprazole magnesium capsule,delayed release	1/10/2026
ONFI 2.5 MG/ML SUSPENSION	clobazam oral suspension	1/10/2026
RELION VENTOLIN HFA 90 MCG INH	albuterol sulfate HFA aerosol inhaler; Xopenex HFA aerosol inhaler	1/10/2026
RELPAK 20 MG TABLET	eletriptan tablet	1/10/2026
RELPAK 40 MG TABLET	eletriptan tablet	1/10/2026
RENVELA 800 MG TABLET	sevelamer carbonate tablet	1/10/2026
ROZEREM 8 MG TABLET	ramelteon tablet	1/10/2026
VENTOLIN HFA 90 MCG INHALER	albuterol sulfate HFA aerosol inhaler; Xopenex HFA aerosol inhaler	1/10/2026
ZYPREXA 2.5 MG TABLET	olanzapine tablet; olanzapine disintegrating tablet	1/10/2026
COLCHICINE 0.6 MG CAPSULE	colchicine tablet	1/1/2026
INSULIN GLARGINE-YFGN U100 PEN	Semglee (insulin glargine-yfgn) Pen subcutaneous; Lantus Solostar U-100 Insulin subcutaneous pen	1/1/2026
INSULIN GLARGINE-YFGN U100 VL	Semglee (insulin glargine-yfgn) Pen subcutaneous; Lantus U-100 Insulin subcutaneous solution	1/1/2026
MITIGARE 0.6 MG CAPSULE	colchicine tablet	1/1/2026
XARELTO 1 MG/ML SUSPENSION	rivaroxaban oral suspension	1/1/2026
XARELTO 2.5 MG TABLET	rivaroxaban tablet	1/1/2026

