



Medicare Part D Drugs with Quantity Limit Restrictions

For certain drugs, MVP Health Care limits the amount of the drug that is covered. For example, MVP provides coverage for 1 tablet per day of JANUVIA. This means that you will need to get approval from MVP if you or your doctor believes that you require more than the quantity limit. If you don't get approval first, MVP may not cover more than the covered quantity. You can ask MVP to make an exception to our coverage rules. For more information, refer to the MVP Health Care Medicare Part D Formulary ("How do I request an exception to MVP's Medicare Part D Formulary").

Drugs with quantity limit restrictions have the abbreviation "QL" in the Formulary under the Notes column next to the drug name.

Product Name	Quantity Limit Description
ABILIFY ASIM INJ 720MG	1 syringe every 56 days
ABILIFY ASIM INJ 960MG	1 syringe every 56 days
ABILIFY MAIN INJ 300MG	1 syringe every 28 days
ABILIFY MAIN INJ 300MG	1 injection every 28 days
ABILIFY MAIN INJ 400MG	1 syringe every 28 days
ABILIFY MAIN INJ 400MG	1 injection every 28 days
ABIRATERONE TAB 250MG	120 tabs every 30 days
ABIRATERONE TAB 500MG	60 tabs every 30 days
ABIRTEGA TAB 250MG	120 tabs every 30 days
ADALIMU-AACF INJ 40/0.8ML	56 pens every 365 days
ADALIMU-AACF INJ 40/0.8ML	2 packs every year
ADALIMU-AACF INJ 40/0.8ML	2 packs every year
ADALIMU-AACF KIT 40/0.8ML	56 syringes every 365 days
ADEMPAS TAB 0.5MG	90 tabs every 30 days
ADEMPAS TAB 1.5MG	90 tabs every 30 days
ADEMPAS TAB 1MG	90 tabs every 30 days
ADEMPAS TAB 2.5MG	90 tabs every 30 days
ADEMPAS TAB 2MG	90 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

ADVAIR HFA AER 115/21	1 inhaler every 30 days
ADVAIR HFA AER 230/21	1 inhaler every 30 days
ADVAIR HFA AER 45/21	1 inhaler every 30 days
AIMOVIG INJ 140MG/ML	1 pen every 30 days
AIMOVIG INJ 70MG/ML	1 pen every 30 days
AIRSUPRA AER 90-80MCG	3 inhalers every 30 days
AKEEGA TAB 100/500	60 tabs every 30 days
AKEEGA TAB 50/500MG	60 tabs every 30 days
ALBENDAZOLE TAB 200MG	672 tabs every year
ALBUTEROL AER HFA	2 inhalers every 30 days
ALBUTEROL AER HFA	2 inhalers every 30 days
ALBUTEROL AER HFA	2 inhalers every 30 days
ALCLOMETASON CRE 0.05%	60 gm every 30 days
ALCLOMETASON OIN 0.05%	60 gm every 30 days
ALECENSA CAP 150MG	240 caps every 30 days
ALFUZOSIN TAB 10MG ER	30 tabs every 30 days
ALOSETRON TAB 0.5MG	60 tabs every 30 days
ALOSETRON TAB 1MG	60 tabs every 30 days
ALPRAZOLAM TAB 0.25MG	150 tabs every 30 days
ALPRAZOLAM TAB 0.5MG	150 tabs every 30 days
ALPRAZOLAM TAB 1MG	150 tabs every 30 days
ALPRAZOLAM TAB 2MG	150 tabs every 30 days
ALUNBRIG PAK	30 tabs every 30 days
ALUNBRIG TAB 180MG	30 tabs every 30 days
ALUNBRIG TAB 30MG	120 tabs every 30 days
ALUNBRIG TAB 90MG	30 tabs every 30 days
ALVAIZ TAB 18MG	90 tabs every 30 days
ALVAIZ TAB 36MG	90 tabs every 30 days
ALVAIZ TAB 54MG	60 tabs every 30 days
ALVAIZ TAB 9MG	60 tabs every 30 days
ALVESCO AER 160MCG	2 inhalers every 30 days
ALVESCO AER 80MCG	3 inhalers every 30 days
ALYFTREK TAB	56 tabs every 28 days
ALYFTREK TAB 4-20-50	84 tabs every 28 days
ALYQ TAB 20MG	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

AMANTADINE CAP 100MG	120 caps every 30 days
AMBRISANTAN TAB 10MG	30 tabs every 30 days
AMBRISANTAN TAB 5MG	30 tabs every 30 days
AMLOD/BENAZP CAP 10-20MG	30 caps every 30 days
AMLOD/BENAZP CAP 10-40MG	30 caps every 30 days
AMLOD/BENAZP CAP 2.5-10MG	30 caps every 30 days
AMLOD/BENAZP CAP 5-10MG	30 caps every 30 days
AMLOD/BENAZP CAP 5-20MG	30 caps every 30 days
AMLOD/BENAZP CAP 5-40MG	30 caps every 30 days
AMLOD/OLMESA TAB 10-20MG	30 tabs every 30 days
AMLOD/OLMESA TAB 10-40MG	30 tabs every 30 days
AMLOD/OLMESA TAB 5-20MG	30 tabs every 30 days
AMLOD/OLMESA TAB 5-40MG	30 tabs every 30 days
AMLOD/VALSAR TAB 10-160MG	30 tabs every 30 days
AMLOD/VALSAR TAB 10-320MG	30 tabs every 30 days
AMLOD/VALSAR TAB 5-160MG	30 tabs every 30 days
AMLOD/VALSAR TAB 5-320MG	30 tabs every 30 days
AMPHET/DEXTR CAP 10MG ER	30 caps every 30 days
AMPHET/DEXTR CAP 15MG ER	30 caps every 30 days
AMPHET/DEXTR CAP 20MG ER	30 caps every 30 days
AMPHET/DEXTR CAP 25MG ER	30 caps every 30 days
AMPHET/DEXTR CAP 30MG ER	30 caps every 30 days
AMPHET/DEXTR CAP 5MG ER	30 caps every 30 days
AMPHET/DEXTR TAB 10MG	60 tabs every 30 days
AMPHET/DEXTR TAB 12.5MG	60 tabs every 30 days
AMPHET/DEXTR TAB 15MG	60 tabs every 30 days
AMPHET/DEXTR TAB 20MG	90 tabs every 30 days
AMPHET/DEXTR TAB 30MG	60 tabs every 30 days
AMPHET/DEXTR TAB 5MG	60 tabs every 30 days
AMPHET/DEXTR TAB 7.5MG	60 tabs every 30 days
ANORO ELLIPT AER 62.5-25	60 blisters every 30 days
APAP/CODEINE SOL 120-12/5	2700 mL every 30 days
APAP/CODEINE TAB 300-15MG	400 tabs every 30 days
APAP/CODEINE TAB 300-30MG	360 tabs every 30 days
APAP/CODEINE TAB 300-60MG	180 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

APTIOM TAB 200MG	30 tabs every 30 days
APTIOM TAB 400MG	30 tabs every 30 days
APTIOM TAB 600MG	60 tabs every 30 days
APTIOM TAB 800MG	60 tabs every 30 days
ARIPIRAZOLE SOL 1MG/ML	900 mL every 30 days
ARIPIRAZOLE TAB 10MG	30 tabs every 30 days
ARIPIRAZOLE TAB 10MG ODT	60 tabs every 30 days
ARIPIRAZOLE TAB 15MG	30 tabs every 30 days
ARIPIRAZOLE TAB 15MG ODT	60 tabs every 30 days
ARIPIRAZOLE TAB 20MG	30 tabs every 30 days
ARIPIRAZOLE TAB 2MG	30 tabs every 30 days
ARIPIRAZOLE TAB 30MG	30 tabs every 30 days
ARIPIRAZOLE TAB 5MG	30 tabs every 30 days
ARISTADA INJ 1064MG	1 syringe every 56 days
ARISTADA INJ 441MG/1.	1 syringe every 28 days
ARISTADA INJ 662MG/2	1 syringe every 28 days
ARISTADA INJ 882MG/3	1 syringe every 28 days
ARMODAFINIL TAB 150MG	30 tabs every 30 days
ARMODAFINIL TAB 200MG	30 tabs every 30 days
ARMODAFINIL TAB 250MG	30 tabs every 30 days
ARMODAFINIL TAB 50MG	60 tabs every 30 days
ARNUIITY ELPT INH 100MCG	30 inhalations every 30 days
ARNUIITY ELPT INH 200MCG	30 inhalations every 30 days
ARNUIITY ELPT INH 50MCG	30 inhalations every 30 days
ASENAPINE SUB 10MG	60 tabs every 30 days
ASENAPINE SUB 2.5MG	60 tabs every 30 days
ASENAPINE SUB 5MG	60 tabs every 30 days
ATOMOXETINE CAP 100MG	30 caps every 30 days
ATOMOXETINE CAP 10MG	120 caps every 30 days
ATOMOXETINE CAP 18MG	120 caps every 30 days
ATOMOXETINE CAP 25MG	120 caps every 30 days
ATOMOXETINE CAP 40MG	60 caps every 30 days
ATOMOXETINE CAP 60MG	30 caps every 30 days
ATOMOXETINE CAP 80MG	30 caps every 30 days
ATORVASTATIN TAB 10MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

ATORVASTATIN TAB 20MG	30 tabs every 30 days
ATORVASTATIN TAB 40MG	30 tabs every 30 days
ATORVASTATIN TAB 80MG	30 tabs every 30 days
ATOVAQUONE SUS 750/5ML	300 mL every 30 days
ATROVENT HFA AER 17MCG	2 inhalers every 30 days
AUGTYRO CAP 160MG	60 caps every 30 days
AUGTYRO CAP 40MG	240 caps every 30 days
AUSTEDO TAB 12MG	120 tabs every 30 days
AUSTEDO TAB 6MG	60 tabs every 30 days
AUSTEDO TAB 9MG	120 tabs every 30 days
AUSTEDO XR TAB 12MG	120 tabs every 30 days
AUSTEDO XR TAB 18MG	60 tabs every 30 days
AUSTEDO XR TAB 24MG	60 tabs every 30 days
AUSTEDO XR TAB 30MG ER	30 tabs every 30 days
AUSTEDO XR TAB 36MG ER	30 tabs every 30 days
AUSTEDO XR TAB 42MG ER	30 tabs every 30 days
AUSTEDO XR TAB 48MG ER	30 tabs every 30 days
AUSTEDO XR TAB 6MG	90 tabs every 30 days
AUSTEDO XR TAB TITR KIT	2 packs every year
AUVELITY TAB 45-105MG	60 tabs every 30 days
AVMAPKI PAK FAKZYNJA	1 pack every 28 days
AYVAKIT TAB 100MG	30 tabs every 30 days
AYVAKIT TAB 200MG	30 tabs every 30 days
AYVAKIT TAB 25MG	30 tabs every 30 days
AYVAKIT TAB 300MG	30 tabs every 30 days
AYVAKIT TAB 50MG	30 tabs every 30 days
AZELAIC ACID GEL 15%	50 gm every 30 days
BACLOFEN TAB 5MG	90 tabs every 30 days
BAFIERTAM CAP 95MG	120 caps every 30 days
BALVERSA TAB 3MG	84 tabs every 28 days
BALVERSA TAB 4MG	56 tabs every 28 days
BALVERSA TAB 5MG	28 tabs every 28 days
BENLYSTA INJ 200MG/ML	8 syringes every 28 days
BENLYSTA INJ 200MG/ML	8 syringes every 28 days
BERINERT INJ 500UNIT	24 boxes every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

BESREMI SOL 500MCG	2 syringes every 28 days
BETA DIPROP CRE 0.05%	120 gm every 30 days
BETA DIPROP GEL 0.05%	120 gm every 30 days
BETA DIPROP LOT 0.05%	120 mL every 30 days
BETA DIPROP OIN 0.05%	120 gm every 30 days
BETAMETH DIP CRE 0.05%	120 gm every 30 days
BETAMETH DIP LOT 0.05%	120 mL every 30 days
BETAMETH DIP OIN 0.05%	120 gm every 30 days
BETAMETH VAL CRE 0.1%	120 gm every 30 days
BETAMETH VAL LOT 0.1%	120 mL every 30 days
BETAMETH VAL OIN 0.1%	120 gm every 30 days
BETASERON INJ 0.3MG	14 syringes every 28 days
BEVESPI AER 9-4.8MCG	1 inhaler every 30 days
BEXAROTENE CAP 75MG	300 caps every 30 days
BEXAROTENE GEL 1%	60 gm every 30 days
BOSENTAN TAB 125MG	60 tabs every 30 days
BOSENTAN TAB 32MG	120 tabs every 30 days
BOSENTAN TAB 62.5MG	60 tabs every 30 days
BOSULIF CAP 100MG	150 caps every 25 days
BOSULIF CAP 50MG	360 caps every 30 days
BOSULIF TAB 100MG	180 tabs every 30 days
BOSULIF TAB 400MG	30 tabs every 30 days
BOSULIF TAB 500MG	30 tabs every 30 days
BRAFTOVI CAP 75MG	180 caps every 30 days
BREO ELLIPTA INH 100-25	60 blisters every 30 days
BREO ELLIPTA INH 200-25	60 blisters every 30 days
BREO ELLIPTA INH 50-25MCG	60 blisters every 30 days
BREYNA AER 160/4.5	3 inhalers every 30 days
BREYNA AER 80/4.5	3 inhalers every 30 days
BREZTRI AERO AER SPHERE	1 inhaler every 30 days
BREZTRI AERO AER SPHERE	4 inhalers every 28 days
BRIVIACT SOL 10MG/ML	600 mL every 30 days
BRIVIACT TAB 100MG	60 tabs every 30 days
BRIVIACT TAB 10MG	60 tabs every 30 days
BRIVIACT TAB 25MG	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

BRIVIACT TAB 50MG	60 tabs every 30 days
BRIVIACT TAB 75MG	60 tabs every 30 days
BRUKINSA CAP 80MG	120 caps every 30 days
BRUKINSA TAB 160MG	60 tabs every 30 days
BUDES/FORMOT AER 160-4.5	3 inhalers every 30 days
BUDES/FORMOT AER 80-4.5	3 inhalers every 30 days
BUDESONIDE CAP 3MG DR	90 caps every 30 days
BUDESONIDE TAB ER 9MG	30 tabs every 30 days
BUPREN/NALOX MIS 12-3MG	60 films every 30 days
BUPREN/NALOX MIS 2-0.5MG	90 films every 30 days
BUPREN/NALOX MIS 4-1MG	90 films every 30 days
BUPREN/NALOX MIS 8-2MG	90 films every 30 days
BUPREN/NALOX SUB 2-0.5MG	90 tabs every 30 days
BUPREN/NALOX SUB 8-2MG	90 tabs every 30 days
BUPRENORPHIN SUB 2MG	90 tabs every 30 days
BUPRENORPHIN SUB 8MG	90 tabs every 30 days
BUPROPION TAB 100MG SR	60 tabs every 30 days
BUPROPION TAB 150MG SR	60 tabs every 30 days
BUPROPION TAB 150MG SR	60 tabs every 30 days
BUPROPION TAB 150MG XL	60 tabs every 30 days
BUPROPION TAB 200MG SR	60 tabs every 30 days
BUPROPION TAB 300MG XL	30 tabs every 30 days
BUTORPHANOL SOL 10MG/ML	10 mL every 30 days
CABOMETYX TAB 20MG	30 tabs every 30 days
CABOMETYX TAB 40MG	30 tabs every 30 days
CABOMETYX TAB 60MG	30 tabs every 30 days
CALCIPOTRIEN CRE 0.005%	120 gm every 30 days
CALCIPOTRIEN OIN 0.005%	120 gm every 30 days
CALCIPOTRIEN SOL 0.005%	120 mL every 30 days
CALCITRENE OIN 0.005%	120 gm every 30 days
CALQUENCE TAB 100MG	60 tabs every 30 days
CANDESA/HCTZ TAB 16-12.5	60 tabs every 30 days
CANDESA/HCTZ TAB 32-12.5	30 tabs every 30 days
CANDESA/HCTZ TAB 32-25MG	30 tabs every 30 days
CANDESARTAN TAB 16MG	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

CANDESARTAN TAB 32MG	30 tabs every 30 days
CANDESARTAN TAB 4MG	60 tabs every 30 days
CANDESARTAN TAB 8MG	60 tabs every 30 days
CAPLYTA CAP 10.5MG	30 caps every 30 days
CAPLYTA CAP 21MG	30 caps every 30 days
CAPLYTA CAP 42MG	30 caps every 30 days
CAPRELSA TAB 100MG	60 tabs every 30 days
CAPRELSA TAB 300MG	30 tabs every 30 days
CELECOXIB CAP 100MG	60 caps every 30 days
CELECOXIB CAP 200MG	60 caps every 30 days
CELECOXIB CAP 400MG	30 caps every 30 days
CELECOXIB CAP 50MG	60 caps every 30 days
CEQR SIMPL KIT PATCH 2U	10 patches every 30 days
CEQR SIMPL KIT PATCH 2U	8 patches every 24 days
CEQR SIMPL MIS INSERTER	2 inserters every year
CETIRIZINE SOL 1MG/ML	300 mL every 30 days
CICLOPIROX CRE 0.77%	90 gm every 30 days
CICLOPIROX GEL 0.77%	100 gm every 30 days
CICLOPIROX SHA 1%	120 mL every 30 days
CICLOPIROX SUS 0.77%	60 mL every 30 days
CINACALCET TAB 30MG	60 tabs every 30 days
CINACALCET TAB 60MG	60 tabs every 30 days
CINACALCET TAB 90MG	120 tabs every 30 days
CLINDAMYCIN GEL 1%	75 mL every 30 days
CLINDAMYCIN GEL 1%	75 gm every 30 days
CLINDAMYCIN LOT 1%	60 mL every 30 days
CLINDAMYCIN SOL 1%	60 mL every 30 days
CLOBAZAM SUS 2.5MG/ML	480 mL every 30 days
CLOBAZAM TAB 10MG	60 tabs every 30 days
CLOBAZAM TAB 20MG	60 tabs every 30 days
CLOBETASOL CRE 0.05%	60 gm every 30 days
CLOBETASOL E CRE 0.05%	60 gm every 30 days
CLOBETASOL GEL 0.05%	60 gm every 30 days
CLOBETASOL OIN 0.05%	60 gm every 30 days
CLOBETASOL SOL 0.05%	50 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

CLONAZEP ODT TAB 0.125MG	90 tabs every 30 days
CLONAZEP ODT TAB 0.25MG	90 tabs every 30 days
CLONAZEP ODT TAB 0.5MG	90 tabs every 30 days
CLONAZEP ODT TAB 1MG	90 tabs every 30 days
CLONAZEP ODT TAB 2MG	300 tabs every 30 days
CLONAZEPAM TAB 0.5MG	90 tabs every 30 days
CLONAZEPAM TAB 1MG	90 tabs every 30 days
CLONAZEPAM TAB 2MG	300 tabs every 30 days
CLORAZ DIPOT TAB 15MG	180 tabs every 30 days
CLORAZ DIPOT TAB 3.75MG	180 tabs every 30 days
CLORAZ DIPOT TAB 7.5MG	180 tabs every 30 days
CLOTRIM/BETA CRE 1-0.05%	45 gm every 30 days
CLOTRIMAZOLE CRE 1%	45 gm every 30 days
CLOTRIMAZOLE SOL 1%	60 mL every 30 days
CLOTRIMAZOLE TRO 10MG	150 lozenges every 30 days
CLOZAPINE TAB 100/ODT	270 tabs every 30 days
CLOZAPINE TAB 100MG	270 tabs every 30 days
CLOZAPINE TAB 150/ODT	180 tabs every 30 days
CLOZAPINE TAB 200/ODT	120 tabs every 30 days
CLOZAPINE TAB 200MG	120 tabs every 30 days
COBENFY CAP 100-20MG	60 caps every 30 days
COBENFY CAP 125-30MG	60 caps every 30 days
COBENFY CAP 50-20MG	60 caps every 30 days
COBENFY STRT CAP PACK	2 packs every year
COLCHICINE CAP 0.6MG	60 caps every 30 days
COLCHICINE TAB 0.6MG	120 tabs every 30 days
COMBIVENT AER 20-100	2 inhalers every 30 days
COMETRIQ KIT 100MG	56 caps every 28 days
COMETRIQ KIT 140MG	112 caps every 28 days
COMETRIQ KIT 60MG	84 caps every 28 days
COPAXONE INJ 20MG/ML	30 syringes every 30 days
COPAXONE INJ 40MG/ML	12 syringes every 28 days
COPIKTRA CAP 15MG	56 caps every 28 days
COPIKTRA CAP 25MG	56 caps every 28 days
CORLANOR SOL 5MG/5ML	450 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

COSENTYX INJ 150MG/ML	32 syringes every 365 days
COSENTYX INJ 300DOSE	32 syringes every 365 days
COSENTYX INJ 75MG/0.5	16 syringes every 365 days
COSENTYX PEN INJ 150MG/ML	32 pens every 365 days
COSENTYX PEN INJ 300DOSE	32 pens every 365 days
COSENTYX UNO INJ 300/2ML	16 pens every 365 days
COTELLIC TAB 20MG	63 tabs every 28 days
CYCLOBENZAPR TAB 10MG	90 tabs every 30 days
CYCLOBENZAPR TAB 5MG	90 tabs every 30 days
DABIGATRAN CAP 110MG	120 caps every 30 days
DABIGATRAN CAP 150MG	60 caps every 30 days
DABIGATRAN CAP 75MG	60 caps every 30 days
DALFAMPRIDIN TAB 10MG ER	60 tabs every 30 days
DANZITEN TAB 71MG	112 tabs every 28 days
DANZITEN TAB 95MG	112 tabs every 28 days
DARIFENACIN TAB 15MG ER	30 tabs every 30 days
DARIFENACIN TAB 7.5MG ER	30 tabs every 30 days
DARUNAVIR TAB 600MG	60 tabs every 30 days
DARUNAVIR TAB 800MG	30 tabs every 30 days
DASATINIB TAB 100MG	30 tabs every 30 days
DASATINIB TAB 140MG	30 tabs every 30 days
DASATINIB TAB 20MG	90 tabs every 30 days
DASATINIB TAB 50MG	30 tabs every 30 days
DASATINIB TAB 70MG	30 tabs every 30 days
DASATINIB TAB 80MG	30 tabs every 30 days
DAURISMO TAB 100MG	30 tabs every 30 days
DAURISMO TAB 25MG	60 tabs every 30 days
DAYVIGO TAB 10MG	30 tabs every 30 days
DAYVIGO TAB 5MG	30 tabs every 30 days
DESLORATADIN TAB 5MG	30 tabs every 30 days
DESVENLAFAX TAB 100MG ER	30 tabs every 30 days
DESVENLAFAX TAB 25MG ER	30 tabs every 30 days
DESVENLAFAX TAB 50MG ER	30 tabs every 30 days
DEXMETHYLPH TAB 10MG	60 tabs every 30 days
DEXMETHYLPH TAB 2.5MG	120 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

DEXMETHYLPH TAB 5MG	120 tabs every 30 days
DIACOMIT CAP 250MG	360 caps every 30 days
DIACOMIT CAP 500MG	180 caps every 30 days
DIACOMIT PAK 250MG	360 packets every 30 days
DIACOMIT PAK 500MG	180 packets every 30 days
DIAZEPAM CON 5MG/ML	240 mL every 30 days
DIAZEPAM SOL 5MG/5ML	1200 mL every 30 days
DIAZEPAM TAB 10MG	120 tabs every 30 days
DIAZEPAM TAB 2MG	120 tabs every 30 days
DIAZEPAM TAB 5MG	120 tabs every 30 days
DICLOFEN POT TAB 50MG	120 tabs every 30 days
DICLOFENAC SOL 1.5%	300 mL every 28 days
DIGOXIN TAB 0.125MG	30 tabs every 30 days
DIGOXIN TAB 0.25MG	30 tabs every 30 days
DIHYDROERGOT SPR 4MG/ML	8 mL every 30 days
DONEPEZIL TAB 5MG	30 tabs every 30 days
DONEPEZIL TAB 5MG ODT	30 tabs every 30 days
DOXEPIN TAB 3MG	30 tabs every 30 days
DOXEPIN TAB 6MG	30 tabs every 30 days
DRIZALMA CAP 20MG DR	60 caps every 30 days
DRIZALMA CAP 30MG DR	60 caps every 30 days
DRIZALMA CAP 40MG DR	60 caps every 30 days
DRIZALMA CAP 60MG DR	60 caps every 30 days
DRONABINOL CAP 10MG	60 caps every 30 days
DRONABINOL CAP 2.5MG	60 caps every 30 days
DRONABINOL CAP 5MG	60 caps every 30 days
DROXIDOPA CAP 100MG	90 caps every 30 days
DROXIDOPA CAP 200MG	180 caps every 30 days
DROXIDOPA CAP 300MG	180 caps every 30 days
DULERA AER 100-5MCG	3 inhalers every 30 days
DULERA AER 200-5MCG	3 inhalers every 30 days
DULERA AER 50-5MCG	3 inhalers every 30 days
DULOXETINE CAP 20MG DR	60 caps every 30 days
DULOXETINE CAP 30MG DR	60 caps every 30 days
DULOXETINE CAP 60MG DR	60 caps every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

DUPIXENT INJ 200/1.14	4 syringes every 28 days
DUPIXENT INJ 200MG	4 pens every 28 days
DUPIXENT INJ 300/2ML	4 pens every 28 days
DUPIXENT INJ 300/2ML	4 syringes every 28 days
DUTAST/TAMSU CAP 0.5-0.4	30 caps every 30 days
DUTASTERIDE CAP 0.5MG	30 caps every 30 days
ECONAZOLE CRE 1%	85 gm every 30 days
EDARBI TAB 40MG	30 tabs every 30 days
EDARBI TAB 80MG	30 tabs every 30 days
EDARBYCLOR TAB 40-12.5	30 tabs every 30 days
EDARBYCLOR TAB 40-25MG	30 tabs every 30 days
ELIQUIS ST P TAB 5MG	74 tabs every 30 days
ELIQUIS TAB 2.5MG	60 tabs every 30 days
ELIQUIS TAB 5MG	74 tabs every 30 days
EMGALITY INJ 100MG/ML	3 syringes every 30 days
EMGALITY INJ 120MG/ML	2 syringes every 30 days
EMGALITY INJ 120MG/ML	2 pens every 30 days
EMSAM DIS 12MG/24H	30 patches every 30 days
EMSAM DIS 6MG/24HR	30 patches every 30 days
EMSAM DIS 9MG/24HR	30 patches every 30 days
EMVERM CHW 100MG	12 tabs every year
ENBREL INJ 25/0.5ML	16 syringes every 28 days
ENBREL INJ 25MG	16 vials every 28 days
ENBREL INJ 50MG/ML	8 syringes every 28 days
ENBREL MINI INJ 50MG/ML	8 cartridges every 28 days
ENBREL SRCLK INJ 50MG/ML	8 pens every 28 days
ENDOCET TAB 10-325MG	180 tabs every 30 days
ENDOCET TAB 2.5-325	360 tabs every 30 days
ENDOCET TAB 5-325MG	360 tabs every 30 days
ENDOCET TAB 7.5-325	240 tabs every 30 days
ENSTILAR AER	120 gm every 30 days
ENTRESTO CAP 15-16MG	240 caps every 30 days
ENTRESTO CAP 6-6MG	240 caps every 30 days
EPIDIOLEX SOL 100MG/ML	600 mL every 30 days
EPRONTIA SOL 25MG/ML	480 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

ERGOT/CAFFEN TAB 1-100MG	40 tabs every 28 days
ERIVEDGE CAP 150MG	30 caps every 30 days
ERLEADA TAB 240MG	30 tabs every 30 days
ERLEADA TAB 60MG	120 tabs every 30 days
ERLOTINIB TAB 100MG	30 tabs every 30 days
ERLOTINIB TAB 150MG	30 tabs every 30 days
ERLOTINIB TAB 25MG	90 tabs every 30 days
ERY PAD 2%	60 pledgets every 30 days
ERY/BENZOYL GEL 3-5%	46.6 gm every 30 days
ERYTHROMYCIN GEL 2%	60 gm every 30 days
ERYTHROMYCIN SOL 2%	60 mL every 30 days
ERZOFRI INJ 117/0.75	1 syringe every 28 days
ERZOFRI INJ 156MG/ML	1 syringe every 28 days
ERZOFRI INJ 234/1.5	1 syringe every 28 days
ERZOFRI INJ 351/2.25	2 syringes every year
ERZOFRI INJ 39/0.25	1 syringe every 28 days
ERZOFRI INJ 78/0.5ML	1 syringe every 28 days
ESLICARBAZEP TAB 200MG	30 tabs every 30 days
ESLICARBAZEP TAB 400MG	30 tabs every 30 days
ESLICARBAZEP TAB 600MG	60 tabs every 30 days
ESLICARBAZEP TAB 800MG	60 tabs every 30 days
ESOMEPRA MAG CAP 20MG DR	30 caps every 30 days
ESOMEPRA MAG CAP 40MG DR	30 caps every 30 days
EVEROLIMUS TAB 10MG	30 tabs every 30 days
EVEROLIMUS TAB 2.5MG	30 tabs every 30 days
EVEROLIMUS TAB 2MG	150 tabs every 30 days
EVEROLIMUS TAB 3MG	90 tabs every 30 days
EVEROLIMUS TAB 5MG	30 tabs every 30 days
EVEROLIMUS TAB 5MG	60 tabs every 30 days
EVEROLIMUS TAB 7.5MG	30 tabs every 30 days
EZALLOR SPR CAP 10MG	30 caps every 30 days
EZALLOR SPR CAP 20MG	30 caps every 30 days
EZALLOR SPR CAP 40MG	30 caps every 30 days
EZALLOR SPR CAP 5MG	30 caps every 30 days
EZETIM/SIMVA TAB 10-10MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

EZETIM/SIMVA TAB 10-20MG	30 tabs every 30 days
EZETIM/SIMVA TAB 10-40MG	30 tabs every 30 days
EZETIM/SIMVA TAB 10-80MG	30 tabs every 30 days
FANAPT PAK PACK A	2 packs every year
FANAPT PAK PACK B	2 packs every year
FANAPT PAK PACK C	2 packs every year
FANAPT TAB 10MG	60 tabs every 30 days
FANAPT TAB 12MG	60 tabs every 30 days
FANAPT TAB 1MG	60 tabs every 30 days
FANAPT TAB 2MG	60 tabs every 30 days
FANAPT TAB 4MG	60 tabs every 30 days
FANAPT TAB 6MG	60 tabs every 30 days
FANAPT TAB 8MG	60 tabs every 30 days
FARXIGA TAB 10MG	30 tabs every 30 days
FARXIGA TAB 5MG	30 tabs every 30 days
FASENRA INJ 10MG/0.5	1 syringe every 28 days
FASENRA INJ 30MG/ML	1 syringe every 28 days
FASENRA PEN INJ 30MG/ML	1 pen every 28 days
FENTANYL DIS 100MCG/H	10 patches every 30 days
FENTANYL DIS 12MCG/HR	10 patches every 30 days
FENTANYL DIS 25MCG/HR	10 patches every 30 days
FENTANYL DIS 37.5MCG	10 patches every 30 days
FENTANYL DIS 50MCG/HR	10 patches every 30 days
FENTANYL DIS 62.5MCG	10 patches every 30 days
FENTANYL DIS 75MCG/HR	10 patches every 30 days
FENTANYL DIS 87.5MCG	10 patches every 30 days
FESOTERODINE TAB 4MG ER	30 tabs every 30 days
FESOTERODINE TAB 8MG ER	30 tabs every 30 days
FETZIMA CAP 120MG	30 caps every 30 days
FETZIMA CAP 20MG	60 caps every 30 days
FETZIMA CAP 40MG	60 caps every 30 days
FETZIMA CAP 80MG	30 caps every 30 days
FETZIMA CAP TITRATIO	2 packs every year
FINASTERIDE TAB 5MG	30 tabs every 30 days
FINGOLIMOD CAP 0.5MG	30 caps every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

FINTEPLA SOL 2.2MG/ML	360 mL every 30 days
FLUNISOLIDE SPR 0.025%	3 bottles every 30 days
FLUOCIN ACET CRE 0.01%	60 gm every 30 days
FLUOCIN ACET CRE 0.025%	120 gm every 30 days
FLUOCIN ACET OIL 0.01% SC	118.28 mL every 30 days
FLUOCIN ACET OIL BODY	118.28 mL every 30 days
FLUOCIN ACET OIN 0.025%	120 gm every 30 days
FLUOCIN ACET SOL 0.01%	60 mL every 30 days
FLUOCINONIDE CRE 0.05%	120 gm every 30 days
FLUOCINONIDE CRE E 0.05%	120 gm every 30 days
FLUOCINONIDE GEL 0.05%	60 gm every 30 days
FLUOCINONIDE OIN 0.05%	60 gm every 30 days
FLUOCINONIDE SOL 0.05%	60 mL every 30 days
FLUOROURACIL CRE 5%	40 gm every 30 days
FLUOROURACIL SOL 2%	10 mL every 30 days
FLUOROURACIL SOL 5%	10 mL every 30 days
FLUTIC/SALME AER 100/50	60 inhalations every 30 days
FLUTIC/SALME AER 250/50	60 inhalations every 30 days
FLUTIC/SALME AER 500/50	60 inhalations every 30 days
FLUTICASONE SPR 50MCG	1 bottle every 30 days
FLUVASTATIN CAP 20MG	60 caps every 30 days
FLUVASTATIN CAP 40MG	60 caps every 30 days
FLUVASTATIN TAB 80MG ER	30 tabs every 30 days
FOTIVDA CAP 0.89MG	21 caps every 28 days
FOTIVDA CAP 1.34MG	21 caps every 28 days
FRUZAQLA CAP 1MG	84 caps every 28 days
FRUZAQLA CAP 5MG	21 caps every 28 days
FULPHILA INJ 6/0.6ML	2 syringes every 28 days
FYCOMPA SUS 0.5MG/ML	720 mL every 30 days
FYCOMPA TAB 10MG	30 tabs every 30 days
FYCOMPA TAB 12MG	30 tabs every 30 days
FYCOMPA TAB 2MG	60 tabs every 30 days
FYCOMPA TAB 4MG	30 tabs every 30 days
FYCOMPA TAB 6MG	30 tabs every 30 days
FYCOMPA TAB 8MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

GABAPENT DLY TAB 300MG	180 tabs every 30 days
GABAPENT DLY TAB 600MG	90 tabs every 30 days
GABAPENTIN CAP 100MG	360 caps every 30 days
GABAPENTIN CAP 300MG	360 caps every 30 days
GABAPENTIN CAP 400MG	270 caps every 30 days
GABAPENTIN SOL 250/5ML	2160 mL every 30 days
GABAPENTIN SOL 300/6ML	2160 mL every 30 days
GABAPENTIN TAB 600MG	180 tabs every 30 days
GABAPENTIN TAB 800MG	120 tabs every 30 days
GALANTAMINE CAP 16MG ER	30 caps every 30 days
GALANTAMINE CAP 24MG ER	30 caps every 30 days
GALANTAMINE CAP 8MG ER	30 caps every 30 days
GALANTAMINE SOL 4MG/ML	200 mL every 30 days
GALANTAMINE TAB 12MG	60 tabs every 30 days
GALANTAMINE TAB 4MG	60 tabs every 30 days
GALANTAMINE TAB 8MG	60 tabs every 30 days
GAVRETO CAP 100MG	120 caps every 30 days
GEFITINIB TAB 250MG	60 tabs every 30 days
GEMTESA TAB 75MG	30 tabs every 30 days
GENTAMICIN CRE 0.1%	30 gm every 30 days
GENTAMICIN OIN 0.1%	30 gm every 30 days
GILOTRIF TAB 20MG	30 tabs every 30 days
GILOTRIF TAB 30MG	30 tabs every 30 days
GILOTRIF TAB 40MG	30 tabs every 30 days
GLATIRAMER INJ 20MG/ML	30 syringes every 30 days
GLATIRAMER INJ 40MG/ML	12 syringes every 28 days
GLATOPA INJ 20MG/ML	30 syringes every 30 days
GLATOPA INJ 40MG/ML	12 syringes every 28 days
GLIMEPIRIDE TAB 1MG	90 tabs every 30 days
GLIMEPIRIDE TAB 2MG	90 tabs every 30 days
GLIMEPIRIDE TAB 4MG	60 tabs every 30 days
GLIP/METFORM TAB 2.5-250M	240 tabs every 30 days
GLIP/METFORM TAB 2.5-500M	120 tabs every 30 days
GLIP/METFORM TAB 5-500MG	120 tabs every 30 days
GLIPIZIDE ER TAB 10MG	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

GLIPIZIDE ER TAB 2.5MG	90 tabs every 30 days
GLIPIZIDE ER TAB 5MG	90 tabs every 30 days
GLIPIZIDE TAB 10MG	120 tabs every 30 days
GLIPIZIDE TAB 5MG	240 tabs every 30 days
GLIPIZIDE XL TAB 10MG	60 tabs every 30 days
GLIPIZIDE XL TAB 2.5MG	90 tabs every 30 days
GLIPIZIDE XL TAB 5MG	90 tabs every 30 days
GLYCOPYRROL TAB 1MG	90 tabs every 30 days
GLYCOPYRROL TAB 2MG	120 tabs every 30 days
GLYDO GEL 2%	60 mL every 30 days
GLYXAMBI TAB 10-5 MG	30 tabs every 30 days
GLYXAMBI TAB 25-5 MG	30 tabs every 30 days
GOMEKLI CAP 1MG	168 caps every 28 days
GOMEKLI CAP 2MG	84 caps every 28 days
GOMEKLI TAB 1MG	168 tabs every 28 days
GUANFACINE TAB 1MG ER	30 tabs every 30 days
GUANFACINE TAB 2MG ER	30 tabs every 30 days
GUANFACINE TAB 3MG ER	60 tabs every 30 days
GUANFACINE TAB 4MG ER	30 tabs every 30 days
HAEGARDA INJ 2000UNIT	30 vials every 30 days
HAEGARDA INJ 3000UNIT	20 vials every 30 days
HALOBETASOL CRE 0.05%	50 gm every 30 days
HALOBETASOL OIN 0.05%	50 gm every 30 days
HC VALERATE CRE 0.2%	60 gm every 30 days
HERNEXEOS TAB 60MG	120 tabs every 30 days
HUMIRA INJ 10/0.1ML	2 syringes every 28 days
HUMIRA INJ 20/0.2ML	4 syringes every 28 days
HUMIRA INJ 40/0.4ML	6 syringes every 28 days
HUMIRA KIT 40MG/0.8	6 syringes every 28 days
HUMIRA PEN INJ 40/0.4ML	6 pens every 28 days
HUMIRA PEN INJ 40MG/0.8	6 pens every 28 days
HUMIRA PEN INJ 80/0.8ML	4 pens every 28 days
HUMIRA PEN KIT CD/UC/HS	3 pens every 28 days
HUMIRA PEN KIT PED UC	4 pens every 28 days
HUMIRA PEN KIT PS/UV	3 pens every 28 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

HYDROCO/APAP SOL 7.5-325	2700 mL every 30 days
HYDROCO/APAP TAB 10-325MG	180 tabs every 30 days
HYDROCO/APAP TAB 5-325MG	240 tabs every 30 days
HYDROCO/APAP TAB 7.5-325	180 tabs every 30 days
HYDROCOD/IBU TAB 7.5-200	150 tabs every 30 days
HYDROCODONE TAB 100MG ER	30 tabs every 30 days
HYDROCODONE TAB 120MG ER	30 tabs every 30 days
HYDROCODONE TAB 20MG ER	30 tabs every 30 days
HYDROCODONE TAB 30MG ER	30 tabs every 30 days
HYDROCODONE TAB 40MG ER	30 tabs every 30 days
HYDROCODONE TAB 60MG ER	30 tabs every 30 days
HYDROCODONE TAB 80MG ER	30 tabs every 30 days
HYDROCORT OIN 1%	30 gm every 30 days
HYDROMORPHON LIQ 1MG/ML	600 mL every 30 days
HYDROMORPHON TAB 2MG	180 tabs every 30 days
HYDROMORPHON TAB 4MG	180 tabs every 30 days
HYDROMORPHON TAB 8MG	180 tabs every 30 days
IBANDRONATE INJ 3MG/3ML	1 injection every 90 days
IBRANCE CAP 100MG	21 caps every 28 days
IBRANCE CAP 125MG	21 caps every 28 days
IBRANCE CAP 75MG	21 caps every 28 days
IBRANCE TAB 100MG	21 tabs every 28 days
IBRANCE TAB 125MG	21 tabs every 28 days
IBRANCE TAB 75MG	21 tabs every 28 days
IBTROZI CAP 200MG	90 caps every 30 days
ICATIBANT INJ 30MG/3ML	9 syringes every 30 days
ICLUSIG TAB 10MG	30 tabs every 30 days
ICLUSIG TAB 15MG	30 tabs every 30 days
ICLUSIG TAB 30MG	30 tabs every 30 days
ICLUSIG TAB 45MG	30 tabs every 30 days
IDACIO 2-PEN INJ 40/0.8ML	56 pens every 365 days
IDACIO CROHN INJ DISEASE	2 packs every year
IDACIO PLAQU INJ PSORIASI	2 packs every year
IDHIFA TAB 100MG	30 tabs every 30 days
IDHIFA TAB 50MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

IMATINIB MES TAB 100MG	90 tabs every 30 days
IMATINIB MES TAB 400MG	60 tabs every 30 days
IMBRUVICA CAP 140MG	120 caps every 30 days
IMBRUVICA CAP 70MG	30 caps every 30 days
IMBRUVICA SUS 70MG/ML	216 mL every 27 days
IMBRUVICA TAB 140MG	30 tabs every 30 days
IMBRUVICA TAB 280MG	30 tabs every 30 days
IMBRUVICA TAB 420MG	30 tabs every 30 days
IMIQUIMOD CRE 5%	24 packets every 30 days
IMKELDI SOL 80MG/ML	280 mL every 28 days
INBRIJA CAP 42MG	300 caps every 30 days
INCRUSE ELPT INH 62.5MCG	30 blisters every 30 days
INLYTA TAB 1MG	180 tabs every 30 days
INLYTA TAB 5MG	120 tabs every 30 days
INQOVI TAB 35-100MG	5 tabs every 28 days
INREBIC CAP 100MG	120 caps every 30 days
INVEGA HAFYE INJ 1092MG	1 injection every 180 days
INVEGA HAFYE INJ 1560MG	1 injection every 180 days
INVEGA SUST INJ 117/0.75	1 syringe every 28 days
INVEGA SUST INJ 156MG/ML	1 syringe every 28 days
INVEGA SUST INJ 234/1.5	1 syringe every 28 days
INVEGA SUST INJ 39/0.25	1 syringe every 28 days
INVEGA SUST INJ 78/0.5ML	1 syringe every 28 days
INVEGA TRINZ INJ 273MG	1 syringe every 90 days
INVEGA TRINZ INJ 410MG	1 syringe every 90 days
INVEGA TRINZ INJ 546MG	1 syringe every 90 days
INVEGA TRINZ INJ 819MG	1 syringe every 90 days
IRBESAR/HCTZ TAB 150-12.5	60 tabs every 30 days
IRBESAR/HCTZ TAB 300-12.5	30 tabs every 30 days
IRBESARTAN TAB 150MG	30 tabs every 30 days
IRBESARTAN TAB 300MG	30 tabs every 30 days
IRBESARTAN TAB 75MG	30 tabs every 30 days
ITOVEBI TAB 3MG	56 tabs every 28 days
ITOVEBI TAB 9MG	28 tabs every 28 days
IVABRADINE TAB 5MG	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

IVABRADINE TAB 7.5MG	60 tabs every 30 days
IVERMECTIN TAB 3MG	12 tabs every 90 days
IVERMECTIN TAB 6MG	10 tabs every 90 days
IWILFIN TAB 192MG	240 tabs every 30 days
JAKAFI TAB 10MG	60 tabs every 30 days
JAKAFI TAB 15MG	60 tabs every 30 days
JAKAFI TAB 20MG	60 tabs every 30 days
JAKAFI TAB 25MG	60 tabs every 30 days
JAKAFI TAB 5MG	60 tabs every 30 days
JANUMET TAB 50-1000	60 tabs every 30 days
JANUMET TAB 50-500MG	60 tabs every 30 days
JANUMET XR TAB 100-1000	30 tabs every 30 days
JANUMET XR TAB 50-1000	60 tabs every 30 days
JANUMET XR TAB 50-500MG	60 tabs every 30 days
JANUVIA TAB 100MG	30 tabs every 30 days
JANUVIA TAB 25MG	30 tabs every 30 days
JANUVIA TAB 50MG	30 tabs every 30 days
JARDIANCE TAB 10MG	30 tabs every 30 days
JARDIANCE TAB 25MG	30 tabs every 30 days
JAYPIRCA TAB 100MG	60 tabs every 30 days
JAYPIRCA TAB 50MG	30 tabs every 30 days
JENTADUETO TAB 2.5-1000	60 tabs every 30 days
JENTADUETO TAB 2.5-500	60 tabs every 30 days
JENTADUETO TAB 2.5-850	60 tabs every 30 days
JENTADUETO TAB XR	30 tabs every 30 days
JENTADUETO TAB XR	60 tabs every 30 days
KALYDECO GRA 13.4MG	56 packets every 28 days
KALYDECO GRA 5.8MG	56 packets every 28 days
KALYDECO PAK 25MG	56 packets every 28 days
KALYDECO PAK 50MG	56 packets every 28 days
KALYDECO PAK 75MG	56 packets every 28 days
KALYDECO TAB 150MG	60 tabs every 30 days
KERENDIA TAB 10MG	30 tabs every 30 days
KERENDIA TAB 20MG	30 tabs every 30 days
KERENDIA TAB 40MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

KESIMPTA INJ 20/.4ML	16 pens every 365 days
KETOCONAZOLE CRE 2%	60 gm every 30 days
KETOCONAZOLE SHA 2%	120 mL every 30 days
KISQALI 200 PAK FEMARA	49 tabs every 28 days
KISQALI 400 PAK FEMARA	70 tabs every 28 days
KISQALI 600 PAK FEMARA	91 tabs every 28 days
KISQALI TAB 200DOSE	21 tabs every 28 days
KISQALI TAB 400DOSE	42 tabs every 28 days
KISQALI TAB 600DOSE	63 tabs every 28 days
KLAYESTA POW 100000	60 gm every 30 days
KOSELUGO CAP 10MG	240 caps every 30 days
KOSELUGO CAP 25MG	120 caps every 30 days
KRAZATI TAB 200MG	180 tabs every 30 days
LACOSAMIDE SOL 10MG/ML	1200 mL every 30 days
LACOSAMIDE TAB 100MG	60 tabs every 30 days
LACOSAMIDE TAB 150MG	60 tabs every 30 days
LACOSAMIDE TAB 200MG	60 tabs every 30 days
LACOSAMIDE TAB 50MG	120 tabs every 30 days
LANSOPRAZOLE CAP 15MG DR	60 caps every 30 days
LANSOPRAZOLE CAP 30MG DR	60 caps every 30 days
LANSOPRAZOLE TAB 15MG ODT	60 tabs every 30 days
LANSOPRAZOLE TAB 30MG ODT	60 tabs every 30 days
LAPATINIB TAB 250MG	180 tabs every 30 days
LAZCLUZE TAB 240MG	30 tabs every 30 days
LAZCLUZE TAB 80MG	60 tabs every 30 days
LEFLUNOMIDE TAB 10MG	30 tabs every 30 days
LEFLUNOMIDE TAB 20MG	30 tabs every 30 days
LENALIDOMIDE CAP 10MG	28 caps every 28 days
LENALIDOMIDE CAP 15MG	28 caps every 28 days
LENALIDOMIDE CAP 2.5MG	28 caps every 28 days
LENALIDOMIDE CAP 20MG	21 caps every 28 days
LENALIDOMIDE CAP 25MG	21 caps every 28 days
LENALIDOMIDE CAP 5MG	28 caps every 28 days
LENVIMA CAP 10 MG	30 caps every 30 days
LENVIMA CAP 12MG	90 caps every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

LENVIMA CAP 14 MG	60 caps every 30 days
LENVIMA CAP 18 MG	90 caps every 30 days
LENVIMA CAP 20 MG	60 caps every 30 days
LENVIMA CAP 24 MG	90 caps every 30 days
LENVIMA CAP 4MG	30 caps every 30 days
LENVIMA CAP 8 MG	60 caps every 30 days
LEVALBUTEROL AER 45/ACT	2 inhalers every 30 days
LEVETIRACETA TAB 250MG	360 tabs every 30 days
LEVOCETIRIZI SOL 2.5/5ML	300 mL every 30 days
LEVOCETIRIZI TAB 5MG	30 tabs every 30 days
LIDO/PRILOCN CRE 2.5-2.5%	30 gm every 30 days
LIDOCAINE DIS 5% PATCH	3 patches every 1 day
LIDOCAINE OIN 5%	50 gm every 30 days
LIDOCAINE SOL 4%	50 mL every 30 days
LIDOCAN DIS 5% PATCH	3 patches every 1 day
LINEZOLID SUS 100/5ML	1800 mL every 30 days
LINEZOLID TAB 600MG	60 tabs every 30 days
LINZESS CAP 145MCG	30 caps every 30 days
LINZESS CAP 290MCG	30 caps every 30 days
LINZESS CAP 72MCG	30 caps every 30 days
LISDEXAMFETA CAP 10MG	60 caps every 30 days
LISDEXAMFETA CAP 20MG	60 caps every 30 days
LISDEXAMFETA CAP 30MG	60 caps every 30 days
LISDEXAMFETA CAP 40MG	30 caps every 30 days
LISDEXAMFETA CAP 50MG	30 caps every 30 days
LISDEXAMFETA CAP 60MG	30 caps every 30 days
LISDEXAMFETA CAP 70MG	30 caps every 30 days
LISDEXAMFETA CHW 10MG	60 tabs every 30 days
LISDEXAMFETA CHW 20MG	60 tabs every 30 days
LISDEXAMFETA CHW 30MG	60 tabs every 30 days
LISDEXAMFETA CHW 40MG	30 tabs every 30 days
LISDEXAMFETA CHW 50MG	30 tabs every 30 days
LISDEXAMFETA CHW 60MG	30 tabs every 30 days
LIVTENCITY TAB 200MG	336 tabs every 28 days
LONSURF TAB 15-6.14	100 tabs every 28 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

LONSURF TAB 20-8.19	80 tabs every 28 days
LORAZEPAM CON 2MG/ML	150 mL every 30 days
LORAZEPAM CON 2MG/ML	150 mL every 30 days
LORAZEPAM TAB 0.5MG	150 tabs every 30 days
LORAZEPAM TAB 1MG	150 tabs every 30 days
LORAZEPAM TAB 2MG	150 tabs every 30 days
LORBRENA TAB 100MG	30 tabs every 30 days
LORBRENA TAB 25MG	90 tabs every 30 days
LOVASTATIN TAB 10MG	60 tabs every 30 days
LOVASTATIN TAB 20MG	60 tabs every 30 days
LOVASTATIN TAB 40MG	60 tabs every 30 days
LUMAKRAS TAB 120MG	240 tabs every 30 days
LUMAKRAS TAB 240MG	120 tabs every 30 days
LUMAKRAS TAB 320MG	90 tabs every 30 days
LURASIDONE TAB 120MG	30 tabs every 30 days
LURASIDONE TAB 20MG	30 tabs every 30 days
LURASIDONE TAB 40MG	30 tabs every 30 days
LURASIDONE TAB 60MG	30 tabs every 30 days
LURASIDONE TAB 80MG	60 tabs every 30 days
LYBALVI TAB 10-10MG	30 tabs every 30 days
LYBALVI TAB 15-10MG	30 tabs every 30 days
LYBALVI TAB 20-10MG	30 tabs every 30 days
LYBALVI TAB 5-10MG	30 tabs every 30 days
LYNPARZA TAB 100MG	120 tabs every 30 days
LYNPARZA TAB 150MG	120 tabs every 30 days
LYTGOBI TAB 4MG	140 tabs every 28 days
LYTGOBI TAB 4MG	84 tabs every 28 days
LYTGOBI TAB 4MG	112 tabs every 28 days
MALATHION LOT 0.5%	59 mL every 30 days
MARPLAN TAB 10MG	180 tabs every 30 days
MEKINIST SOL 0.05/ML	1260 mL every 30 days
MEKINIST TAB 0.5MG	90 tabs every 30 days
MEKINIST TAB 2MG	30 tabs every 30 days
MEKTOVI TAB 15MG	180 tabs every 30 days
MESALAMINE CAP 0.375GM	120 caps every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

MESALAMINE CAP 400MG DR	180 caps every 30 days
MESALAMINE ENE 4GM	1680 mL every 28 days
MESALAMINE KIT 4GM	28 bottles every 28 days
MESALAMINE SUP 1000MG	30 suppositories every 30 days
MESALAMINE TAB 1.2GM	120 tabs every 30 days
METFORMIN TAB 1000MG	75 tabs every 30 days
METFORMIN TAB 500MG	150 tabs every 30 days
METFORMIN TAB 500MG ER	120 tabs every 30 days
METFORMIN TAB 750MG ER	60 tabs every 30 days
METFORMIN TAB 850MG	90 tabs every 30 days
METHADONE CON 10MG/ML	90 mL every 30 days
METHADONE SOL 10MG/5ML	450 mL every 30 days
METHADONE SOL 5MG/5ML	450 mL every 30 days
METHADONE TAB 10MG	90 tabs every 30 days
METHADONE TAB 5MG	90 tabs every 30 days
METHYLPHENID CHW 10MG	180 tabs every 30 days
METHYLPHENID CHW 2.5MG	180 tabs every 30 days
METHYLPHENID CHW 5MG	180 tabs every 30 days
METHYLPHENID SOL 10MG/5ML	900 mL every 30 days
METHYLPHENID SOL 5MG/5ML	1800 mL every 30 days
METHYLPHENID TAB 10MG	180 tabs every 30 days
METHYLPHENID TAB 10MG ER	90 tabs every 30 days
METHYLPHENID TAB 20MG	90 tabs every 30 days
METHYLPHENID TAB 20MG ER	90 tabs every 30 days
METHYLPHENID TAB 5MG	180 tabs every 30 days
METHYLTESTOS CAP 10MG	600 caps every 30 days
METRONIDAZOL CRE 0.75%	45 gm every 30 days
METRONIDAZOL GEL 0.75%	45 gm every 30 days
METRONIDAZOL LOT 0.75%	59 mL every 30 days
MITIGARE CAP 0.6MG	60 caps every 30 days
MODAFINIL TAB 100MG	30 tabs every 30 days
MODAFINIL TAB 200MG	60 tabs every 30 days
MODEYSO CAP 125MG	20 caps every 28 days
MOMETASONE SPR 50MCG	2 inhalers every 30 days
MORPHINE SUL SOL 100/5ML	180 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

MORPHINE SUL SOL 10MG/5ML	900 mL every 30 days
MORPHINE SUL SOL 20MG/5ML	900 mL every 30 days
MORPHINE SUL TAB 100MG ER	90 tabs every 30 days
MORPHINE SUL TAB 15MG	180 tabs every 30 days
MORPHINE SUL TAB 15MG ER	90 tabs every 30 days
MORPHINE SUL TAB 200MG ER	90 tabs every 30 days
MORPHINE SUL TAB 30MG	180 tabs every 30 days
MORPHINE SUL TAB 30MG ER	90 tabs every 30 days
MORPHINE SUL TAB 60MG ER	90 tabs every 30 days
MOUNJARO INJ 10MG/0.5	4 pens every 28 days
MOUNJARO INJ 12.5/0.5	4 pens every 28 days
MOUNJARO INJ 15MG/0.5	4 pens every 28 days
MOUNJARO INJ 2.5/0.5	4 pens every 28 days
MOUNJARO INJ 5MG/0.5	4 pens every 28 days
MOUNJARO INJ 7.5/0.5	4 pens every 28 days
MOVANTIK TAB 12.5MG	30 tabs every 30 days
MOVANTIK TAB 25MG	30 tabs every 30 days
MOXIFLOXACIN SOL HCL 0.5%	12 mL every 30 days
MULTAQ TAB 400MG	60 tabs every 30 days
MUPIROCIN OIN 2%	220 gm every 30 days
MYRBETRIQ SUS 8MG/ML	300 mL every 28 days
MYRBETRIQ TAB 25MG	30 tabs every 30 days
MYRBETRIQ TAB 50MG	30 tabs every 30 days
NAPROXEN DR TAB 375MG	120 tabs every 30 days
NAPROXEN DR TAB 500MG	90 tabs every 30 days
NARATRIPTAN TAB 1MG	12 tabs every 30 days
NARATRIPTAN TAB 2.5MG	12 tabs every 30 days
NATEGLINIDE TAB 120MG	90 tabs every 30 days
NATEGLINIDE TAB 60MG	90 tabs every 30 days
NAYZILAM SPR 5MG	10 nasal units every 30 days
NEBIVOLOL TAB 10MG	30 tabs every 30 days
NEBIVOLOL TAB 2.5MG	30 tabs every 30 days
NEBIVOLOL TAB 20MG	60 tabs every 30 days
NEBIVOLOL TAB 5MG	30 tabs every 30 days
NERLYNX TAB 40MG	180 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

NEXLETOL TAB 180MG	30 tabs every 30 days
NEXLIZET TAB 180/10MG	30 tabs every 30 days
NIACIN ER TAB 1000MG	60 tabs every 30 days
NIACIN ER TAB 750MG	60 tabs every 30 days
NIACIN TAB 500MG ER	60 tabs every 30 days
NILOTINB HCL CAP 150MG	112 caps every 28 days
NILOTINB HCL CAP 200MG	112 caps every 28 days
NILOTINB HCL CAP 50MG	120 caps every 30 days
NINLARO CAP 2.3MG	3 caps every 28 days
NINLARO CAP 3MG	3 caps every 28 days
NINLARO CAP 4MG	3 caps every 28 days
NITAZOXANIDE TAB 500MG	6 tabs every 30 days
NITROGLYCERI OIN 0.4%	30 gm every 30 days
NUBEQA TAB 300MG	120 tabs every 30 days
NUDEXTA CAP 20-10MG	60 caps every 30 days
NUPLAZID CAP 34MG	30 caps every 30 days
NUPLAZID TAB 10MG	30 tabs every 30 days
NURTEC TAB 75MG ODT	16 tabs every 30 days
NUZYRA TAB 150MG	30 tabs every 14 days
NYAMYC POW 100000	60 gm every 30 days
NYSTATIN CRE 100000	30 gm every 30 days
NYSTATIN OIN 100000	30 gm every 30 days
NYSTATIN POW 100000	60 gm every 30 days
NYSTOP POW 100000	60 gm every 30 days
ODOMZO CAP 200MG	30 caps every 30 days
OFEV CAP 100MG	60 caps every 30 days
OFEV CAP 150MG	60 caps every 30 days
OGSIVEO TAB 100MG	56 tabs every 28 days
OGSIVEO TAB 150MG	56 tabs every 28 days
OGSIVEO TAB 50MG	180 tabs every 30 days
OJEMDA SUS 25MG/ML	96 mL every 28 days
OJEMDA TAB 100MG	24 tabs every 28 days
OJEMDA TAB 100MG	24 tabs every 28 days
OJEMDA TAB 100MG	24 tabs every 28 days
OJJAARA TAB 100MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

OJJAARA TAB 150MG	30 tabs every 30 days
OJJAARA TAB 200MG	30 tabs every 30 days
OLANZAPINE INJ 10MG	3 vials every 1 day
OLANZAPINE TAB 10MG	60 tabs every 30 days
OLANZAPINE TAB 10MG ODT	60 tabs every 30 days
OLANZAPINE TAB 15MG	30 tabs every 30 days
OLANZAPINE TAB 15MG ODT	30 tabs every 30 days
OLANZAPINE TAB 2.5MG	60 tabs every 30 days
OLANZAPINE TAB 20MG	30 tabs every 30 days
OLANZAPINE TAB 20MG ODT	30 tabs every 30 days
OLANZAPINE TAB 5MG	60 tabs every 30 days
OLANZAPINE TAB 5MG ODT	30 tabs every 30 days
OLANZAPINE TAB 7.5MG	30 tabs every 30 days
OLM MED/AMLO TAB /HCTZ	30 tabs every 30 days
OLM MED/AMLO TAB /HCTZ	30 tabs every 30 days
OLM MED/AMLO TAB /HCTZ	30 tabs every 30 days
OLM MED/AMLO TAB /HCTZ	30 tabs every 30 days
OLM MED/AMLO TAB /HCTZ	30 tabs every 30 days
OLM MED/HCTZ TAB 20-12.5	30 tabs every 30 days
OLM MED/HCTZ TAB 40-12.5	30 tabs every 30 days
OLM MED/HCTZ TAB 40-25MG	30 tabs every 30 days
OLMESA MEDOX TAB 20MG	30 tabs every 30 days
OLMESA MEDOX TAB 40MG	30 tabs every 30 days
OLMESA MEDOX TAB 5MG	60 tabs every 30 days
OMNIPOD 5 DX KIT INT G7G6	1 kit every year
OMNIPOD 5 DX MIS POD G7G6	15 pods every 30 days
OMNIPOD 5 DX MIS POD G7G6	15 pods every 30 days
OMNIPOD 5 G7 KIT INTRO	1 kit every year
OMNIPOD 5 G7 MIS PODS	15 pods every 30 days
OMNIPOD 5 L2 KIT INTRO G6	1 kit every year
OMNIPOD 5 L2 MIS PODS G6	15 pods every 30 days
OMNIPOD DASH KIT INTRO	1 kit every year
OMNIPOD DASH MIS PODS	15 pods every 30 days
OMNIPOD GO KIT 10UNT/DY	15 pods every 30 days
OMNIPOD GO KIT 15UNT/DY	15 pods every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

OMNIPOD GO KIT 20UNT/DY	15 pods every 30 days
OMNIPOD GO KIT 25UNT/DY	15 pods every 30 days
OMNIPOD GO KIT 30UNT/DY	15 pods every 30 days
OMNIPOD GO KIT 35UNT/DY	15 pods every 30 days
OMNIPOD GO KIT 40UNT/DY	15 pods every 30 days
OMNIPOD MIS CLASSIC	15 pods every 30 days
ONUREG TAB 200MG	14 tabs every 28 days
ONUREG TAB 300MG	14 tabs every 28 days
OPIPZA MIS 10MG	90 films every 30 days
OPIPZA MIS 2MG	30 films every 30 days
OPIPZA MIS 5MG	30 films every 30 days
OPSUMIT TAB 10MG	30 tabs every 30 days
ORKAMBI GRA 100-125	56 packets every 28 days
ORKAMBI GRA 150-188	56 packets every 28 days
ORKAMBI GRA 75-94MG	56 packets every 28 days
ORKAMBI TAB 100-125	112 tabs every 28 days
ORKAMBI TAB 200-125	112 tabs every 28 days
ORSERDU TAB 345MG	30 tabs every 30 days
ORSERDU TAB 86MG	90 tabs every 30 days
OSELTAMIVIR CAP 30MG	168 caps every year
OSELTAMIVIR CAP 45MG	84 caps every year
OSELTAMIVIR CAP 75MG	84 caps every year
OSELTAMIVIR SUS 6MG/ML	1080 mL every year
OXYBUTYNIN SOL 5MG/5ML	600 mL every 30 days
OXYBUTYNIN TAB 10MG ER	60 tabs every 30 days
OXYBUTYNIN TAB 15MG ER	60 tabs every 30 days
OXYBUTYNIN TAB 5MG	120 tabs every 30 days
OXYBUTYNIN TAB 5MG ER	30 tabs every 30 days
OXYCOD/APAP TAB 10-325MG	180 tabs every 30 days
OXYCOD/APAP TAB 2.5-325	360 tabs every 30 days
OXYCOD/APAP TAB 5-325MG	360 tabs every 30 days
OXYCOD/APAP TAB 7.5-325	240 tabs every 30 days
OXYCODONE CON 100/5ML	180 mL every 30 days
OXYCODONE SOL 5MG/5ML	900 mL every 30 days
OXYCODONE TAB 10MG	180 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

OXYCODONE TAB 15MG	180 tabs every 30 days
OXYCODONE TAB 20MG	180 tabs every 30 days
OXYCODONE TAB 30MG	180 tabs every 30 days
OXYCODONE TAB 5MG	180 tabs every 30 days
OZEMPIC INJ 2MG/3ML	1 pen every 28 days
OZEMPIC INJ 4MG/3ML	1 pen every 28 days
OZEMPIC INJ 8MG/3ML	1 pen every 28 days
PALIPERIDONE TAB ER 1.5MG	30 tabs every 30 days
PALIPERIDONE TAB ER 3MG	30 tabs every 30 days
PALIPERIDONE TAB ER 6MG	60 tabs every 30 days
PALIPERIDONE TAB ER 9MG	30 tabs every 30 days
PANRETIN GEL 0.1%	60 gm every 30 days
PAROXETIN ER TAB 12.5MG	60 tabs every 30 days
PAROXETIN ER TAB 37.5MG	60 tabs every 30 days
PAROXETINE SUS 10MG/5ML	900 mL every 30 days
PAROXETINE TAB 25MG ER	60 tabs every 30 days
PAXLOVID PAK	22 tabs every 90 days
PAXLOVID TAB 150-100	40 tabs every 90 days
PAXLOVID TAB 300-100	60 tabs every 90 days
PAZOPANIB TAB 200MG	120 tabs every 30 days
PEMAZYRE TAB 13.5MG	28 tabs every 28 days
PEMAZYRE TAB 4.5MG	28 tabs every 28 days
PEMAZYRE TAB 9MG	28 tabs every 28 days
PERAMPANEL TAB 10MG	30 tabs every 30 days
PERAMPANEL TAB 12MG	30 tabs every 30 days
PERAMPANEL TAB 2MG	60 tabs every 30 days
PERAMPANEL TAB 4MG	30 tabs every 30 days
PERAMPANEL TAB 6MG	30 tabs every 30 days
PERAMPANEL TAB 8MG	30 tabs every 30 days
PERMETHRIN CRE 5%	60 gm every 30 days
PHENOBARB SOL 20MG/5ML	1500 mL every 30 days
PHENOBARB TAB 100MG	120 tabs every 30 days
PHENOBARB TAB 15MG	120 tabs every 30 days
PHENOBARB TAB 16.2MG	120 tabs every 30 days
PHENOBARB TAB 30MG	120 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

PHENOBARB TAB 32.4MG	120 tabs every 30 days
PHENOBARB TAB 60MG	120 tabs every 30 days
PHENOBARB TAB 64.8MG	120 tabs every 30 days
PHENOBARB TAB 97.2MG	120 tabs every 30 days
PIMECROLIMUS CRE 1%	100 gm every 30 days
PIOGLITA/MET TAB 15-500MG	90 tabs every 30 days
PIOGLITA/MET TAB 15-850MG	90 tabs every 30 days
PIOGLITAZONE TAB 15MG	30 tabs every 30 days
PIOGLITAZONE TAB 30MG	30 tabs every 30 days
PIOGLITAZONE TAB 45MG	30 tabs every 30 days
PIQRAY 200MG TAB DOSE	28 tabs every 28 days
PIQRAY 250MG TAB DOSE	56 tabs every 28 days
PIQRAY 300MG TAB DOSE	56 tabs every 28 days
PIRFENIDONE CAP 267MG	270 caps every 30 days
PIRFENIDONE TAB 267MG	270 tabs every 30 days
PIRFENIDONE TAB 534MG	90 tabs every 30 days
PIRFENIDONE TAB 801MG	90 tabs every 30 days
PITAVASTATIN TAB 1MG	30 tabs every 30 days
PITAVASTATIN TAB 2MG	30 tabs every 30 days
PITAVASTATIN TAB 4MG	30 tabs every 30 days
PODOFILOX SOL 0.5%	7 mL every 28 days
POMALYST CAP 1MG	21 caps every 28 days
POMALYST CAP 2MG	21 caps every 28 days
POMALYST CAP 3MG	21 caps every 28 days
POMALYST CAP 4MG	21 caps every 28 days
POSACONAZOLE SUS 40MG/ML	630 mL every 30 days
POSACONAZOLE TAB 100MG DR	93 tabs every 30 days
PRAVASTATIN TAB 10MG	30 tabs every 30 days
PRAVASTATIN TAB 20MG	30 tabs every 30 days
PRAVASTATIN TAB 40MG	30 tabs every 30 days
PRAVASTATIN TAB 80MG	30 tabs every 30 days
PREGABALIN CAP 100MG	120 caps every 30 days
PREGABALIN CAP 150MG	120 caps every 30 days
PREGABALIN CAP 200MG	90 caps every 30 days
PREGABALIN CAP 225MG	60 caps every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

PREGABALIN CAP 25MG	120 caps every 30 days
PREGABALIN CAP 300MG	60 caps every 30 days
PREGABALIN CAP 50MG	120 caps every 30 days
PREGABALIN CAP 75MG	120 caps every 30 days
PREGABALIN SOL 20MG/ML	900 mL every 30 days
PREVYMIS TAB 240MG	28 tabs every 28 days
PREVYMIS TAB 480MG	28 tabs every 28 days
PREZISTA SUS 100MG/ML	400 mL every 30 days
PREZISTA TAB 150MG	240 tabs every 30 days
PREZISTA TAB 75MG	480 tabs every 30 days
PROLIA INJ 60MG/ML	1 syringe every 180 days
PYRIMETHAMIN TAB 25MG	90 tabs every 30 days
PYZCHIVA INJ 45/0.5ML	1 vial every 28 days
PYZCHIVA INJ 45/0.5ML	1 syringe every 28 days
PYZCHIVA INJ 45/0.5ML	1 pen every 28 days
PYZCHIVA INJ 90MG/ML	1 syringe every 28 days
PYZCHIVA INJ 90MG/ML	1 pen every 28 days
QINLOCK TAB 50MG	90 tabs every 30 days
QUETIAPINE TAB 100MG	90 tabs every 30 days
QUETIAPINE TAB 150MG	90 tabs every 30 days
QUETIAPINE TAB 150MG ER	30 tabs every 30 days
QUETIAPINE TAB 200MG	90 tabs every 30 days
QUETIAPINE TAB 200MG ER	30 tabs every 30 days
QUETIAPINE TAB 25MG	180 tabs every 30 days
QUETIAPINE TAB 300MG	60 tabs every 30 days
QUETIAPINE TAB 300MG ER	60 tabs every 30 days
QUETIAPINE TAB 400MG	60 tabs every 30 days
QUETIAPINE TAB 400MG ER	60 tabs every 30 days
QUETIAPINE TAB 50MG	90 tabs every 30 days
QUETIAPINE TAB 50MG ER	60 tabs every 30 days
QULIPTA TAB 10MG	30 tabs every 30 days
QULIPTA TAB 30MG	30 tabs every 30 days
QULIPTA TAB 60MG	30 tabs every 30 days
RABEPRAZOLE TAB 20MG	30 tabs every 30 days
RALDESY SOL 10MG/ML	1800 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

RASAGILINE TAB 0.5MG	30 tabs every 30 days
RASAGILINE TAB 1MG	30 tabs every 30 days
RELENZA MIS DISKHALE	6 inhalers every year
RELISTOR INJ 12/0.6ML	28 syringes every 28 days
RELISTOR INJ 12/0.6ML	28 syringes every 28 days
RELISTOR INJ 8/0.4ML	28 syringes every 28 days
REPAGLINIDE TAB 0.5MG	120 tabs every 30 days
REPAGLINIDE TAB 1MG	120 tabs every 30 days
REPAGLINIDE TAB 2MG	240 tabs every 30 days
RETEVMO CAP 40MG	240 caps every 30 days
RETEVMO CAP 80MG	120 caps every 30 days
RETEVMO TAB 120MG	60 tabs every 30 days
RETEVMO TAB 160MG	60 tabs every 30 days
RETEVMO TAB 40MG	90 tabs every 30 days
RETEVMO TAB 80MG	60 tabs every 30 days
REVUFORJ TAB 110MG	120 tabs every 30 days
REVUFORJ TAB 160MG	60 tabs every 30 days
REVUFORJ TAB 25MG	240 tabs every 30 days
REXULTI TAB 0.25MG	60 tabs every 30 days
REXULTI TAB 0.5MG	60 tabs every 30 days
REXULTI TAB 1MG	60 tabs every 30 days
REXULTI TAB 2MG	60 tabs every 30 days
REXULTI TAB 3MG	30 tabs every 30 days
REXULTI TAB 4MG	30 tabs every 30 days
REZLIDHIA CAP 150MG	60 caps every 30 days
REZUROCK TAB 200MG	30 tabs every 30 days
RINVOQ LQ SOL 1MG/ML	360 mL every 30 days
RINVOQ TAB 15MG ER	30 tabs every 30 days
RINVOQ TAB 30MG ER	30 tabs every 30 days
RINVOQ TAB 45MG ER	168 tabs every year
RISPERIDONE INJ 12.5MG	2 injections every 28 days
RISPERIDONE INJ 25MG ER	2 injections every 28 days
RISPERIDONE INJ 37.5MG	2 injections every 28 days
RISPERIDONE INJ 50MG ER	2 injections every 28 days
RISPERIDONE SOL 1MG/ML	240 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

RISPERIDONE TAB 0.25 ODT	90 tabs every 30 days
RISPERIDONE TAB 0.5MG OD	90 tabs every 30 days
RISPERIDONE TAB 1MG ODT	60 tabs every 30 days
RISPERIDONE TAB 2MG ODT	60 tabs every 30 days
RISPERIDONE TAB 3MG ODT	60 tabs every 30 days
RISPERIDONE TAB 4MG ODT	120 tabs every 30 days
RIVAROXABAN SUS 1MG/ML	620 mL every 30 days
RIVAROXABAN TAB 2.5MG	60 tabs every 30 days
RIVASTIGMINE CAP 1.5MG	60 caps every 30 days
RIVASTIGMINE CAP 3MG	60 caps every 30 days
RIVASTIGMINE CAP 4.5MG	60 caps every 30 days
RIVASTIGMINE CAP 6MG	60 caps every 30 days
RIVASTIGMINE DIS 13.3/24	30 patches every 30 days
RIVASTIGMINE DIS 4.6MG/24	30 patches every 30 days
RIVASTIGMINE DIS 9.5MG/24	30 patches every 30 days
RIZATRIPTAN TAB 10MG	18 tabs every 30 days
RIZATRIPTAN TAB 10MG ODT	18 tabs every 30 days
RIZATRIPTAN TAB 5MG	18 tabs every 30 days
RIZATRIPTAN TAB 5MG ODT	18 tabs every 30 days
ROFLUMILAST TAB 250MCG	56 tabs every year
ROFLUMILAST TAB 500MCG	30 tabs every 30 days
ROMVIMZA CAP 14MG	8 caps every 28 days
ROMVIMZA CAP 20MG	8 caps every 28 days
ROMVIMZA CAP 30MG	8 caps every 28 days
ROSUVASTATIN TAB 10MG	30 tabs every 30 days
ROSUVASTATIN TAB 20MG	30 tabs every 30 days
ROSUVASTATIN TAB 40MG	30 tabs every 30 days
ROSUVASTATIN TAB 5MG	30 tabs every 30 days
ROZLYTREK CAP 100MG	180 caps every 30 days
ROZLYTREK CAP 200MG	90 caps every 30 days
ROZLYTREK PAK 50MG	336 packets every 28 days
RUBRACA TAB 200MG	120 tabs every 30 days
RUBRACA TAB 250MG	120 tabs every 30 days
RUBRACA TAB 300MG	120 tabs every 30 days
RUFINAMIDE SUS 40MG/ML	2400 mL every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

RUFINAMIDE TAB 200MG	480 tabs every 30 days
RUFINAMIDE TAB 400MG	240 tabs every 30 days
RYBELSUS TAB 14MG	30 tabs every 30 days
RYBELSUS TAB 3MG	30 tabs every 30 days
RYBELSUS TAB 7MG	30 tabs every 30 days
RYDAPT CAP 25MG	224 caps every 28 days
SACUB/VALSAR TAB 24-26MG	60 tabs every 30 days
SACUB/VALSAR TAB 49-51MG	60 tabs every 30 days
SACUB/VALSAR TAB 97-103MG	60 tabs every 30 days
SAJAZIR INJ 30MG/3ML	9 syringes every 30 days
SANTYL OIN 250/GM	180 gm every 30 days
SCSEMBLIX TAB 100MG	120 tabs every 30 days
SCSEMBLIX TAB 20MG	60 tabs every 30 days
SCSEMBLIX TAB 40MG	300 tabs every 30 days
SCOPOLAMINE DIS 1MG/3DAY	10 patches every 30 days
SECUADO DIS 3.8MG	30 patches every 30 days
SECUADO DIS 5.7MG	30 patches every 30 days
SECUADO DIS 7.6MG	30 patches every 30 days
SEREVENT DIS AER 50MCG	60 inhalations every 30 days
SHINGRIX INJ 50/0.5ML	2 vials per lifetime
SILDENAFIL TAB 20MG	360 tabs every 30 days
SILODOSIN CAP 4MG	30 caps every 30 days
SILODOSIN CAP 8MG	30 caps every 30 days
SIMVASTATIN TAB 10MG	30 tabs every 30 days
SIMVASTATIN TAB 20MG	30 tabs every 30 days
SIMVASTATIN TAB 40MG	30 tabs every 30 days
SIMVASTATIN TAB 5MG	30 tabs every 30 days
SIMVASTATIN TAB 80MG	30 tabs every 30 days
SKYRIZI INJ 150MG/ML	6 syringes every 365 days
SKYRIZI INJ 180/1.2	1 cartridge every 56 days
SKYRIZI INJ 360/2.4	1 cartridge every 56 days
SKYRIZI PEN INJ 150MG/ML	6 pens every 365 days
SOD OXYBATE SOL 500MG/ML	540 mL every 30 days
SOLIFENACIN TAB 10MG	30 tabs every 30 days
SOLIFENACIN TAB 5MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

SOLIQUA INJ 100/33	5 pens every 25 days
SORAFENIB TAB 200MG	120 tabs every 30 days
SOTYKTU TAB 6MG	30 tabs every 30 days
SPRITAM TAB 1000MG	90 tabs every 30 days
SPRITAM TAB 250MG	360 tabs every 30 days
SPRITAM TAB 500MG	180 tabs every 30 days
SPRITAM TAB 750MG	120 tabs every 30 days
STELARA INJ 45/0.5ML	1 syringe every 28 days
STELARA INJ 45/0.5ML	1 vial every 28 days
STELARA INJ 90MG/ML	1 syringe every 28 days
STIVARGA TAB 40MG	84 tabs every 28 days
SULFACETAMID LOT 10%	118 mL every 30 days
SULFAMYLON CRE 85MG/GM	453.6 gm every 30 days
SUMATRIPTAN INJ 4MG/0.5	18 injections every 30 days
SUMATRIPTAN INJ 4MG/0.5	18 injections every 30 days
SUMATRIPTAN INJ 6MG/0.5	12 injections every 30 days
SUMATRIPTAN INJ 6MG/0.5	12 injections every 30 days
SUMATRIPTAN INJ 6MG/0.5	12 injections every 30 days
SUMATRIPTAN INJ 6MG/0.5	12 injections every 30 days
SUMATRIPTAN SPR 20MG/ACT	12 units every 30 days
SUMATRIPTAN SPR 5MG/ACT	24 units every 30 days
SUMATRIPTAN TAB 100MG	12 tabs every 30 days
SUMATRIPTAN TAB 25MG	12 tabs every 30 days
SUMATRIPTAN TAB 50MG	12 tabs every 30 days
SUNITINIB CAP 12.5MG	30 caps every 30 days
SUNITINIB CAP 25MG	30 caps every 30 days
SUNITINIB CAP 37.5MG	30 caps every 30 days
SUNITINIB CAP 50MG	30 caps every 30 days
SYMDEKO TAB 100-150	56 tabs every 28 days
SYMDEKO TAB 50-75MG	56 tabs every 28 days
SYMPAZAN MIS 10MG	60 films every 30 days
SYMPAZAN MIS 20MG	60 films every 30 days
SYMPAZAN MIS 5MG	60 films every 30 days
SYNJARDY TAB	60 tabs every 30 days
SYNJARDY TAB 12.5-500	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

SYNJARDY TAB 5-1000MG	60 tabs every 30 days
SYNJARDY TAB 5-500MG	120 tabs every 30 days
SYNJARDY XR TAB	60 tabs every 30 days
SYNJARDY XR TAB 10-1000	60 tabs every 30 days
SYNJARDY XR TAB 25-1000	30 tabs every 30 days
SYNJARDY XR TAB 5-1000MG	60 tabs every 30 days
TABRECTA TAB 150MG	112 tabs every 28 days
TABRECTA TAB 200MG	112 tabs every 28 days
TACROLIMUS OIN 0.03%	100 gm every 30 days
TACROLIMUS OIN 0.1%	100 gm every 30 days
TADALAFIL TAB 20MG	60 tabs every 30 days
TADALAFIL TAB 5MG	30 tabs every 30 days
TAFINLAR CAP 50MG	120 caps every 30 days
TAFINLAR CAP 75MG	120 caps every 30 days
TAFINLAR TAB 10MG	900 tabs every 30 days
TAGRISSO TAB 40MG	30 tabs every 30 days
TAGRISSO TAB 80MG	30 tabs every 30 days
TALZENNA CAP 0.1MG	30 caps every 30 days
TALZENNA CAP 0.25MG	90 caps every 30 days
TALZENNA CAP 0.35MG	30 caps every 30 days
TALZENNA CAP 0.5MG	30 caps every 30 days
TALZENNA CAP 0.75MG	30 caps every 30 days
TALZENNA CAP 1MG	30 caps every 30 days
TAMSULOSIN CAP 0.4MG	60 caps every 30 days
TASIGNA CAP 150MG	112 caps every 28 days
TASIGNA CAP 200MG	112 caps every 28 days
TASIGNA CAP 50MG	120 caps every 30 days
TASIMELTEON CAP 20MG	30 caps every 30 days
TAVNEOS CAP 10MG	180 caps every 30 days
TAZAROTENE CRE 0.05%	60 gm every 30 days
TAZAROTENE CRE 0.1%	60 gm every 30 days
TAZORAC CRE 0.05%	60 gm every 30 days
TAZVERIK TAB 200MG	240 tabs every 30 days
TECENTRIQ INJ HYBREZA	1 vial every 21 days
TELMIS/AML0D TAB 40-10MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

TELMIS/AMLOD TAB 40-5MG	30 tabs every 30 days
TELMIS/AMLOD TAB 80-10MG	30 tabs every 30 days
TELMIS/AMLOD TAB 80-5MG	30 tabs every 30 days
TELMISA/HCTZ TAB 40-12.5	30 tabs every 30 days
TELMISA/HCTZ TAB 80-12.5	60 tabs every 30 days
TELMISA/HCTZ TAB 80-25MG	30 tabs every 30 days
TELMISARTAN TAB 20MG	30 tabs every 30 days
TELMISARTAN TAB 40MG	30 tabs every 30 days
TELMISARTAN TAB 80MG	30 tabs every 30 days
TEMAZEPAM CAP 15MG	60 caps every 30 days
TEMAZEPAM CAP 30MG	30 caps every 30 days
TEMAZEPAM CAP 7.5MG	30 caps every 30 days
TEPMETKO TAB 225MG	60 tabs every 30 days
TERBINAFINE TAB 250MG	30 tabs every 30 days
TESTOSTERONE GEL 1%(25MG)	300 gm every 30 days
TESTOSTERONE GEL 1%(50MG)	300 gm every 30 days
TESTOSTERONE GEL 1.62%	150 gm every 30 days
TESTOSTERONE GEL PUMP 1%	300 gm every 30 days
TETRABENAZIN TAB 12.5MG	90 tabs every 30 days
TETRABENAZIN TAB 25MG	120 tabs every 30 days
THALOMID CAP 100MG	112 caps every 28 days
THALOMID CAP 150MG	56 caps every 28 days
THALOMID CAP 200MG	56 caps every 28 days
THALOMID CAP 50MG	84 caps every 28 days
TIBSOVO TAB 250MG	60 tabs every 30 days
TOLTERODINE CAP 2MG ER	30 caps every 30 days
TOLTERODINE CAP 4MG ER	30 caps every 30 days
TOLTERODINE TAB 1MG	60 tabs every 30 days
TOLTERODINE TAB 2MG	60 tabs every 30 days
TOPIRAMATE SOL 25MG/ML	480 mL every 30 days
TORPENZ TAB 10MG	30 tabs every 30 days
TORPENZ TAB 2.5MG	30 tabs every 30 days
TORPENZ TAB 5MG	30 tabs every 30 days
TORPENZ TAB 7.5MG	30 tabs every 30 days
TRADJENTA TAB 5MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

TRAMADL/APAP TAB 37.5-325	240 tabs every 30 days
TRAMADOL HCL TAB 50MG	240 tabs every 30 days
TRELEGY AER 100MCG	60 blisters every 30 days
TRELEGY AER 200MCG	60 blisters every 30 days
TREMFYA INJ 100MG/ML	1 syringe every 28 days
TREMFYA INJ 100MG/ML	1 pen every 28 days
TREMFYA INJ 100MG/ML	1 pen every 28 days
TREMFYA INJ 200/2ML	2 pens every 28 days
TREMFYA INJ 200/2ML	2 syringes every 28 days
TREMFYA INJ 200/2ML	2 pens every 28 days
TRETINOIN CRE 0.025%	45 gm every 30 days
TRETINOIN CRE 0.05%	45 gm every 30 days
TRETINOIN CRE 0.1%	45 gm every 30 days
TRETINOIN GEL 0.01%	45 gm every 30 days
TRETINOIN GEL 0.025%	45 gm every 30 days
TRIAMCINOLON CRE 0.025%	454 gm every 30 days
TRIAMCINOLON CRE 0.1%	454 gm every 30 days
TRIAMCINOLON CRE 0.5%	454 gm every 30 days
TRIDACAINE DIS 5% PATCH	3 patches every 1 day
TRIDERM CRE 0.5%	454 gm every 30 days
TRIJARDY XR TAB	30 tabs every 30 days
TRIJARDY XR TAB	60 tabs every 30 days
TRIJARDY XR TAB	60 tabs every 30 days
TRIJARDY XR TAB	30 tabs every 30 days
TRIKAFTA PAK 59.5MG	56 packs every 28 days
TRIKAFTA PAK 75MG	56 packs every 28 days
TRIKAFTA TAB	84 tabs every 28 days
TRIKAFTA TAB	84 tabs every 28 days
TRIMIPRAMINE CAP 100MG	60 caps every 30 days
TRIMIPRAMINE CAP 25MG	120 caps every 30 days
TRIMIPRAMINE CAP 50MG	120 caps every 30 days
TRINTELLIX TAB 10MG	30 tabs every 30 days
TRINTELLIX TAB 20MG	30 tabs every 30 days
TRINTELLIX TAB 5MG	30 tabs every 30 days
TROSPIUM CHL CAP 60MG ER	30 caps every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

TROSPIMUM CL TAB 20MG	60 tabs every 30 days
TRULICITY INJ 0.75/0.5	4 pens every 28 days
TRULICITY INJ 1.5/0.5	4 pens every 28 days
TRULICITY INJ 3/0.5	4 pens every 28 days
TRULICITY INJ 4.5/0.5	4 pens every 28 days
TRUQAP PAK 160MG	4 packs every 28 days
TRUQAP PAK 200MG	4 packs every 28 days
TRUQAP TAB 160MG	64 tabs every 28 days
TRUQAP TAB 200MG	64 tabs every 28 days
TUKYSA TAB 150MG	120 tabs every 30 days
TUKYSA TAB 50MG	120 tabs every 30 days
TURALIO CAP 125MG	120 caps every 30 days
TYENNE INJ 162/0.9	4 pens every 28 days
TYENNE INJ 162MG	4 syringes every 28 days
UBRELVY TAB 100MG	16 tabs every 30 days
UBRELVY TAB 50MG	16 tabs every 30 days
UPTRAVI PACK TAB 200/800	1 pack every 28 days
UPTRAVI TAB 1000MCG	60 tabs every 30 days
UPTRAVI TAB 1200MCG	60 tabs every 30 days
UPTRAVI TAB 1400MCG	60 tabs every 30 days
UPTRAVI TAB 1600MCG	60 tabs every 30 days
UPTRAVI TAB 200MCG	140 tabs every 28 days
UPTRAVI TAB 400MCG	60 tabs every 30 days
UPTRAVI TAB 600MCG	60 tabs every 30 days
UPTRAVI TAB 800MCG	60 tabs every 30 days
VALCHLOR GEL 0.016%	60 gm every 30 days
VALSART/HCTZ TAB 160-12.5	30 tabs every 30 days
VALSART/HCTZ TAB 160-25MG	30 tabs every 30 days
VALSART/HCTZ TAB 320-12.5	30 tabs every 30 days
VALSART/HCTZ TAB 320-25MG	30 tabs every 30 days
VALSART/HCTZ TAB 80-12.5	30 tabs every 30 days
VALSARTAN TAB 160MG	60 tabs every 30 days
VALSARTAN TAB 320MG	30 tabs every 30 days
VALSARTAN TAB 40MG	60 tabs every 30 days
VALSARTAN TAB 80MG	60 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

VALTOCO SPR 10MG	10 blister packs every 30 days
VALTOCO SPR 15MG	10 blister packs every 30 days
VALTOCO SPR 20MG	10 blister packs every 30 days
VALTOCO SPR 5MG	10 blister packs every 30 days
VANCOMYCIN CAP 125MG	80 caps every 180 days
VANCOMYCIN CAP 250MG	160 caps every 180 days
VANFLYTA TAB 17.7MG	56 tabs every 28 days
VANFLYTA TAB 26.5MG	56 tabs every 28 days
VARENICLINE TAB 0.5& 1MG	2 packs every year
VARENICLINE TAB 0.5MG	56 tabs every 28 days
VARENICLINE TAB 1MG	56 tabs every 28 days
VARENICLINE TAB 1MG	56 tabs every 28 days
VELSIPITY TAB 2MG	30 tabs every 30 days
VENCLEXTA TAB 100MG	180 tabs every 30 days
VENCLEXTA TAB 10MG	112 tabs every 28 days
VENCLEXTA TAB 50MG	112 tabs every 28 days
VENCLEXTA TAB START PK	42 tabs every 28 days
VENTOLIN HFA AER	2 inhalers every 30 days
VENTOLIN HFA AER	6 inhalers every 30 days
VERQUVO TAB 10MG	30 tabs every 30 days
VERQUVO TAB 2.5MG	30 tabs every 30 days
VERQUVO TAB 5MG	30 tabs every 30 days
VERSACLOZ SUS 50MG/ML	600 mL every 30 days
VERZENIO TAB 100MG	56 tabs every 28 days
VERZENIO TAB 150MG	56 tabs every 28 days
VERZENIO TAB 200MG	56 tabs every 28 days
VERZENIO TAB 50MG	56 tabs every 28 days
VIGABATRIN PAK 500MG	180 packets every 30 days
VIGABATRIN TAB 500MG	180 tabs every 30 days
VIGADRONE POW 500MG	180 packets every 30 days
VIGADRONE TAB 500MG	180 tabs every 30 days
VIGAFYDE SOL 100MG/ML	900 mL every 30 days
VIGPODER POW 500MG	180 packets every 30 days
VILAZODONE TAB 10MG	30 tabs every 30 days
VILAZODONE TAB 20MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

VILAZODONE TAB 40MG	30 tabs every 30 days
VITRAKVI CAP 100MG	60 caps every 30 days
VITRAKVI CAP 25MG	180 caps every 30 days
VITRAKVI SOL 20MG/ML	300 mL every 30 days
VIZIMPRO TAB 15MG	30 tabs every 30 days
VIZIMPRO TAB 30MG	30 tabs every 30 days
VIZIMPRO TAB 45MG	30 tabs every 30 days
VONJO CAP 100MG	120 caps every 30 days
VORANIGO TAB 10MG	60 tabs every 30 days
VORANIGO TAB 40MG	30 tabs every 30 days
VORICONAZOLE SUS 40MG/ML	600 mL every 28 days
VORICONAZOLE TAB 200MG	120 tabs every 30 days
VORICONAZOLE TAB 50MG	480 tabs every 30 days
VOWST CAP	12 caps every 30 days
VRAYLAR CAP 1.5MG	60 caps every 30 days
VRAYLAR CAP 3MG	30 caps every 30 days
VRAYLAR CAP 4.5MG	30 caps every 30 days
VRAYLAR CAP 6MG	30 caps every 30 days
WELIREG TAB 40MG	90 tabs every 30 days
WIXELA INHUB AER 100/50	60 inhalations every 30 days
WIXELA INHUB AER 250/50	60 inhalations every 30 days
WIXELA INHUB AER 500/50	60 inhalations every 30 days
XALKORI CAP 150MG	180 caps every 30 days
XALKORI CAP 200MG	120 caps every 30 days
XALKORI CAP 20MG	240 caps every 30 days
XALKORI CAP 250MG	120 caps every 30 days
XALKORI CAP 50MG	120 caps every 30 days
XARELTO STAR TAB 15/20MG	51 tabs every 30 days
XARELTO SUS 1MG/ML	620 mL every 30 days
XARELTO TAB 10MG	30 tabs every 30 days
XARELTO TAB 15MG	30 tabs every 30 days
XARELTO TAB 2.5MG	60 tabs every 30 days
XARELTO TAB 20MG	30 tabs every 30 days
XCOPRI PAK 100-150	56 tabs every 28 days
XCOPRI PAK 12.5-25	28 tabs every 28 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

XCOPRI PAK 150-200	28 tabs every 28 days
XCOPRI PAK 150-200	56 tabs every 28 days
XCOPRI PAK 50-100MG	28 tabs every 28 days
XCOPRI TAB 100MG	30 tabs every 30 days
XCOPRI TAB 150MG	60 tabs every 30 days
XCOPRI TAB 200MG	60 tabs every 30 days
XCOPRI TAB 25MG	30 tabs every 30 days
XCOPRI TAB 50MG	30 tabs every 30 days
XELJANZ SOL 1MG/ML	480 mL every 24 days
XELJANZ TAB 10MG	60 tabs every 30 days
XELJANZ TAB 5MG	60 tabs every 30 days
XELJANZ XR TAB 11MG	30 tabs every 30 days
XELJANZ XR TAB 22MG	30 tabs every 30 days
XERMELO TAB 250MG	84 tabs every 28 days
XHANCE MIS 93MCG	32 mL every 30 days
XIGDUO XR TAB 10-1000	30 tabs every 30 days
XIGDUO XR TAB 10-500MG	30 tabs every 30 days
XIGDUO XR TAB 2.5-1000	60 tabs every 30 days
XIGDUO XR TAB 5-1000MG	60 tabs every 30 days
XIGDUO XR TAB 5-500MG	60 tabs every 30 days
XOLAIR INJ 150MG/ML	8 pens every 28 days
XOLAIR INJ 150MG/ML	8 syringes every 28 days
XOLAIR INJ 300/2ML	4 syringes every 28 days
XOLAIR INJ 300/2ML	4 pens every 28 days
XOLAIR INJ 75/0.5	4 pens every 28 days
XOLAIR INJ 75/0.5	4 syringes every 28 days
XOLAIR SOL 150MG	8 vials every 28 days
XOSPATA TAB 40MG	90 tabs every 30 days
XPOVIO PAK 40MG	4 tabs every 28 days
XPOVIO PAK 40MG	8 tabs every 28 days
XPOVIO PAK 40MG	8 tabs every 28 days
XPOVIO PAK 40MG	16 tabs every 28 days
XPOVIO PAK 50MG	8 tabs every 28 days
XPOVIO PAK 60MG	4 tabs every 28 days
XPOVIO PAK 60MG	24 tabs every 28 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

XPOVIO PAK 80MG	32 tabs every 28 days
XTANDI CAP 40MG	120 caps every 30 days
XTANDI TAB 40MG	120 tabs every 30 days
XTANDI TAB 80MG	60 tabs every 30 days
XULTOPHY INJ 100/3.6	5 pens every 30 days
YESINTEK INJ 45/0.5ML	1 vial every 28 days
YESINTEK INJ 45/0.5ML	1 syringe every 28 days
YESINTEK INJ 90MG/ML	1 syringe every 28 days
YONSA TAB 125MG	120 tabs every 30 days
YUTREPIA CAP 106MCG	224 caps every 28 days
YUTREPIA CAP 26.5MCG	140 caps every 28 days
YUTREPIA CAP 53MCG	140 caps every 28 days
YUTREPIA CAP 79.5MCG	140 caps every 28 days
ZEJULA TAB 100MG	30 tabs every 30 days
ZEJULA TAB 200MG	30 tabs every 30 days
ZEJULA TAB 300MG	30 tabs every 30 days
ZELBORAF TAB 240MG	240 tabs every 30 days
ZIPRASIDONE CAP 20MG	60 caps every 30 days
ZIPRASIDONE CAP 40MG	60 caps every 30 days
ZIPRASIDONE CAP 60MG	60 caps every 30 days
ZIPRASIDONE CAP 80MG	60 caps every 30 days
ZIPRASIDONE INJ 20MG	6 injections every 3 days
ZOLINZA CAP 100MG	120 caps every 30 days
ZOLPIDEM TAB 10MG	30 tabs every 30 days
ZOLPIDEM TAB 5MG	30 tabs every 30 days
ZONISADE SUS 100MG/5	900 mL every 30 days
ZTALMY SUS 50MG/ML	1100 mL every 30 days
ZURZUVAE CAP 20MG	28 caps every 14 days
ZURZUVAE CAP 25MG	28 caps every 14 days
ZURZUVAE CAP 30MG	14 caps every 14 days
ZYDELIG TAB 100MG	60 tabs every 30 days
ZYDELIG TAB 150MG	60 tabs every 30 days
ZYKADIA TAB 150MG	84 tabs every 28 days
ZYPITAMAG TAB 2MG	30 tabs every 30 days
ZYPITAMAG TAB 4MG	30 tabs every 30 days

Formulary ID 25352, Version 9

Last Updated 12/01/2025

Y0051_1642 Accepted 09/20/2012

ZYPREXA RELP INJ 210MG	2 vials every 28 days
ZYPREXA RELP INJ 300MG	2 vials every 28 days
ZYPREXA RELP INJ 405MG	1 vial every 28 days

If your Part D coverage is through your former employer and includes enhanced drug coverage, please check the Employer Group Formulary.

^{PA} Drugs that require prior authorization have the abbreviation "PA" in the Formulary under the Notes column next to the drug name.

ST Drugs with step therapy requirements have the abbreviation "ST" in the Formulary under the Notes column next to the drug name.

*A formulary exception request may be required for a brand name drug if the drug is not listed on the Formulary and there is a generic equivalent available.