

Update to your Prescription Drug List for North Carolina 2027 Individual & Family plans

We are here to help you get ready for changes to your Prescription Drug List (PDL), renewing on 1/1/27.

We re-evaluate the PDL to help manage costs for both you and UnitedHealthcare. When making changes, we consider a medication's overall value, which is based on factors such as a medication's effectiveness, safety, cost, and the availability of alternative medications to treat the same or similar medical condition.

To view the complete list of all medications, visit the **2027 Prescription Drug List**

This guide will help you understand which medications are changing and if you need to talk to your health care provider before you refill your medication. You may experience a medication changing tiers or a medication no longer being covered. We also add medications to the PDL to give you more options.

You can access your coverage information by going to the following link or through your member portal: **member.uhc.com/myuhc.**

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Your plan

This is an overview of each tier on your plan.

Tier	Cost-share	Includes
1	$0	**$0 cost-share** Medications available at no cost to you, which includes **preventive medications**
2	$	**Lower cost-share** Medications that offer the **highest overall value,** which includes **preferred generic** medications
3	$$	**Mid-range cost-share** Medications that provide **good overall value,** which includes **preferred brand-name** and **non-preferred generic** medications
4	$$$	**Higher cost-share** Medications that provide **lower overall value,** which includes **non-preferred brand-name** and **non-preferred generic** medications
5	$$$$	**Highest cost-share** Medications that provide the **lowest overall value,** which includes most **specialty** medications.

Which medications are changing coverage that require me to take action before my first refill in 2027?

Find your medication in this list to learn about upcoming changes. If you find your medication in this list, review the next section called “What should I do if coverage of my medication is changing?” Depending on the type of change, we provide a list of other medication options when available. These are suggestions only. Only you and your health care provider can make decisions about how to manage your health.

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Medications moving to a higher tier

Medications moving to a higher tier are still covered by your plan, but may result in a higher cost share. Your plan covers other medications to treat your condition that may be a lower cost to you.

What you can do: To save money, ask your health care provider about other medication options.

Medication	Lower-cost option(s)
Ubrelvy tablet 50mg	Please ask your health care provider
Ubrelvy tablet 100mg	Please ask your health care provider

Prior authorization requirements

These medications now require a prior authorization (PA) to be sure this medication is most appropriate for your condition. You need approval before you refill your prescription.

Medication
Slynd tablet 4mg

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Non-formulary

These medications are no longer covered by your plan. Your plan covers other medications to treat your condition.

Medication	Lower-cost option(s)
Asmanex 14 AER 220mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex 30 AER 110mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex 30 AER 220mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex 60 AER 220mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex 120 AER 220mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex HFA AER 50mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex HFA AER 100mcg	Arnuity Ellipta, QVAR Redihaler
Asmanex HFA AER 200mcg	Arnuity Ellipta, QVAR Redihaler
Averi tablet	Apri, Enskyce, Isibloom
Bosulif tablet 100mg	Bosutinib
Bosulif tablet 400mg	Bosutinib
Bosulif tablet 500mg	Bosutinib
Cimzia Kit 200mg	Please ask your health care provider
Drospirenone/eth Estradiol/ levo	Drospirenone/ethinyl Estradiol, Tydemy tablet
Edurant tablet 25mg	Rilpivirine
Ella tablet 30mg	Please ask your health care provider
Farxiga tablet 5mg	Dapagliflozin
Farxiga tablet 10mg	Dapagliflozin
Femlyv tablet 1mg/0.02mg	Aurovela 1/20, Galbriela, Junel 1/20, Larin 1/20
Fycompa suspension 0.5mg/mL	Perampanel
Gemmily capsule 1/20	Aurovela Fe 1/20, Blisovi 24 fe, Junel Fe 24, Larin 24 fe
Gleostine capsule 10mg	Lomustine

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Non-formulary (cont.)

Medication	Lower-cost option(s)
Gleostine capsule 40mg	Lomustine
Gleostine capsule 100mg	Lomustine
Incruse Elpt Inhaler 62.5mcg	Spiriva Respimat, Tiotropium Bromide
Isentress tablet 400mg	Please ask your health care provider
Jentadueto tablet 2.5-500	Saxagliptin/metformin ER
Jentadueto tablet 2.5-850	Saxagliptin/metformin ER
Jentadueto tablet 2.5-1000	Saxagliptin/metformin ER
Jentadueto tablet XR	Saxagliptin/metformin ER
Matronex tablet	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus
Natazia tablet	Nortrel 7/7/7, Tri-lo-mili, Tri-sprintec
Neo-synalar cream	Fluocinolone cream
Neonatal Plus tablet 27-1mg	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus
Neonatal tablet Complete	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus
Nextstellis tablet 3-14.2mg	Drospir/ethi tablet 3-0.02mg, Drospir/ethi tablet 3-0.03mg
Nore/eth/fer capsule 1/20	Aurovela Fe 1/20, Blisovi 24 fe, Junel Fe 24
Ofev capsule 100mg	Nintedanib Esylate
Ofev capsule 150mg	Nintedanib Esylate
Opsumit tablet 10mg	Macitentan
PNV-DHA capsule docusate	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus
Pomalyst capsule 1mg	Pomalidomide
Pomalyst capsule 2mg	Pomalidomide
Pomalyst capsule 3mg	Pomalidomide
Pomalyst capsule 4mg	Pomalidomide
Prenatrix tablet	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Non-formulary (cont.)

Medication	Lower-cost option(s)
Prenatryl tablet	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus
Savella Mis titration pak	Milnacipran Titration pak
Savella tablet 12.5mg	Milnacipran tablet
Savella tablet 25mg	Milnacipran tablet
Savella tablet 50mg	Milnacipran tablet
Savella tablet 100mg	Milnacipran tablet
Simbrinza suspension 1-0.2%	Dorzolamide Hcl/timolol, Brimonidine/timolol
Taysofy capsule 1/20	Aurovela Fe 1/20, Blisovi 24 fe, Junel Fe 24
Thrombin-JMI solution 5000unit	Please ask your health care provider
Thrombin-JMI solution 20000unit	Please ask your health care provider
Tolmetin capsule 400mg	Diclofenac Sodium DR, Flurbiprofen, Ibuprofen, Naproxen IR
Tolmetin tablet 600mg	Diclofenac Sodium DR, Flurbiprofen, Ibuprofen, Naproxen IR
Tradjenta tablet 5mg	Saxagliptin
Twirla Dis 120-30	Norelgestromin/ethinyl Estradiol, Xulane, Zafemy
Tyenne injection 162mg/0.9mL	Actemra, Avtozma
Tyvaso solution 0.6mg/mL	Please ask your health care provider
Vitathely tablet	M-natal Plus, Niva-plus, One Vite women's prenatal vitamin plus
Xeljanz solution 1mg/mL	Tofacitinib Soln
Xeljanz tablet 5mg	Tofacitinib IR
Xeljanz tablet 10mg	Tofacitinib IR
Xeljanz XR tablet 11mg	Tofacitinib ER
Xeljanz XR tablet 22mg	Tofacitinib ER
Xigduo XR tablet 2.5-1000	Dapagliflozin/metformin ER
Xigduo XR tablet 5-500mg	Dapagliflozin/metformin ER



© 2026 United HealthCare Services, Inc. All Rights Reserved.

Non-formulary (cont.)

Medication	Lower-cost option(s)
Xigduo XR tablet 5-1000mg	Dapagliflozin/metformin ER
Xigduo XR tablet 10-500mg	Dapagliflozin/metformin ER
Xigduo XR tablet 10-1000	Dapagliflozin/metformin ER
Zegalogue injection 0.6/0.6	Baqsimi, Glucagon Emergency kit, Gvoke
Zylet suspension 0.5-0.3%	Loteprednol/tobramycin

Exclusions

We'll no longer cover these medications.

Medication
Cervidil Vaginal 10mg Insert
Eligard injection 7.5mg
Eligard injection 22.5mg
Eligard injection 30mg
Eligard injection 45mg
Methadone Con 10mg/mL
Methadose Con 10mg/mL
Neulasta injection 6/0.6mL
Prepidil gel 0.5mg/3g
Thrombin Kit 5000unit
Thrombin-JMI Kit 5000unit
Thrombin-JMI Kit 20000unit
Udenyca Onbo injection 6mg/0.6mL

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit

A drug has a new quantity limit or the limit has changed.

Medication	
Accu-Chek kit Softclix	Aprepitant pak 80 & 125
Actimmune injection 2mu/0.5	Aripiprazole tab 10mg odt
Actos tab 15mg	Aripiprazole tab 15mg odt
Acyclovir cream 5%	Arixtra solution 2.5/0.5
Acyclovir ointment 5%	Arixtra solution 5.0/0.4
Adalimu-BWWD injection 40mg/0.4ml	Arixtra solution 7.5/0.6
Adalimumab-AATY kit 80/0.8ml	Arixtra solution 10/0.8
Adalimumab-AATY kit 80mg/0.8ml	Austedo tab 6mg
Adalimumab-ADBM kit 40/0.4ml	Austedo xr tab 24mg
Adalimumab-FKJP kit 40/0.8ml	Benzamycin gel
Adapalene pad 0.1%swab	Besremi solution 500mcg
Aemcolo tab 194mg	Bethkis neb 300/4ml
Agamree suspension 40mg/ml	Bimatoprost solution 0.01%
Aimovig injection 70mg/ml	Bimatoprost solution 0.01% op
Akynzeo capsule 300-0.5 mg	Bimatoprost solution 0.03%
Albendazole tab 200mg	Bimzelx injection 160mg/ml
Alhemo injection 300/3ml	Blujepa tab 750mg
Alinia suspension 100mg/5ml	Bosentan tab 32mg
Alinia tab 500mg	Bosulif capsule 50mg
Almotriptan tab 6.25mg	Bosulif capsule 100mg
Almotriptan tab 12.5mg	Brekiya injection 1mg/ml
Alphagan p solution 0.15%	Brexafemme tab 150mg
Amjevita injection 40/0.8ml (amgen usa)	Brimonidine solution 0.15% op
Amjevita injection 40/0.8ml (amgen)	Brimonidine solution 0.2% op
Amphet/dextro (mydayis)12.5mg er	Brukinsa capsule 80mg
Amphet/dextro (mydayis)25mg er	Bylvay capsule 200mcg
Apexicon e cream 0.05%	Bylvay capsule 400mcg
Aprepitant capsule 80mg	Bylvay capsule 600mcg
Aprepitant capsule 125mg	Bylvay capsule 1200mcg

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Byqlovi suspension 0.05%op	Cosentyx pen injection 150mg/ml
Calcipotriene cream 0.005%	Cotempla tab 8.6mg
Calcipotriene/betamethasone oint	Cotempla tab 17.3mg
Calcipotriene/betamethasone suspension	Cotempla tab 25.9mg
Caverject injection 20mcg	Ctexli tab 250mg
Caverject kit 20mcg	Daliresp tab 250mcg
Cayston inh 75mg	Dapagliflozin/met er tab 5-1000
Cetrorelix injection 0.25mg	Dasatinib tab 50mg
Cetrorelix kit 0.25mg	Dasatinib tab 80mg
Cetrotide kit 0.25mg	Deflazacort suspension 22.75mg/ml
Chenodal tab 250mg	Deflazacort tab 6mg
Chlorpromazine tab 10mg	Deflazacort tab 18mg
Chlorpromazine tab 25mg	Deflazacort tab 30mg
Chlorpromazine tab 50mg	Deflazacort tab 36mg
Chlorpromazine tab 100mg	Depo-Provera injection 150mg/ml
Chlorpromazine tab 200mg	Dexedrine capsule 10mg cr
Clenpiq solution	Dextroamphetamine capsule 10mg er
Clobetasol suspension 0.05%	Diazepam gel 2.5mg
Comfort Touch mis 31gx4mm	Diazepam gel 10mg
Comfort Touch mis 32gx8mm	Diazepam gel 20mg
Comfort Touch mis 33gx1/4"	Diclofenac capsule 25mg
Comfort Touch mis 33gx3/16	Diclofenac tab 25mg
Comfort Touch mis 33gx5/32	Diflorasone cream 0.05%
Concerta tab 18mg	Diflorasone ointment 0.05%
Condoms mis	Dihydroergotamine spray 4mg/ml
Condoms mis lubricat	Dimethyl fum capsule 120mg dr
Contrave tab 8-90mg	Drizalma capsule 30mg dr
Cortrophin injection 40unt/0.5ml	Drizalma capsule 40mg dr
Cortrophin injection 80unt/ml	Droplet micr mis 34gx9/64
Cosentyx injection 150mg/ml	Dupixent injection 200/1.14

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Dupixent injection 200mg	Enoxaparin injection 100mg/ml
Dupixent injection 300mg/2ml	Enoxaparin injection 120/0.8ml
Durex mis realfeel	Enoxaparin injection 150mg/ml
Easy Comfort mis 29gx4mm	Enoxaparin injection 300/3ml
Easy Touch mis 30g	Ensacove capsule 25mg
Edex kit 10mcg	Enspryng injection
Edex kit 20mcg	Enstilar aer
Edex kit 40mcg	Eohilia suspension 2mg/10ml
Egrifta sv injection 2mg	Epogen injection 10000/ml
Ekterly tab 300mg	Epogen injection 20000/ml
Eletriptan tab 20mg	Epsolay cream 5%
Eletriptan tab 40mg	Ergomar sub 2mg
Eliquis tab 1.5mg	Erlotinib tab 25mg
Eliquis tab 2mg	Erythromycin/benzoyl gel 3-5%
Eltrombopag pow 12.5mg	Esomeprazole magnesium capsule 20mg
Elyxyb solution 120/4.8	Esomeprazole magnesium capsule 40mg
Emend capsule 80mg	Estradiol gel 0.06%
Emend pak 80 & 125	Estrogel
Emend suspension 125mg	Eucrisa ointment 2%
Emflaza suspension 22.75mg/ml	Eysuvis dro 0.25%
Emflaza tab 6mg	Fanapt tab 1mg
Emflaza tab 18mg	Fanapt tab 2mg
Emflaza tab 30mg	Fasenra pen injection 30mg/ml
Emflaza tab 36mg	Fc2 female mis condom
Emgality injection 120mg/ml	Fentanyl dis 37.5mcg/hr
Enbumyst solution 0.5mg/0.1ml	Fentanyl dis 50mcg/hr
Enoxaparin injection 30/0.3ml	Fentanyl dis 62.5mcg/hr
Enoxaparin injection 40/0.4ml	Fentanyl dis 75mcg/hr
Enoxaparin injection 60/0.6ml	Fentanyl dis 87.5mcg/hr
Enoxaparin injection 80/0.8ml	Fentanyl dis 100mcg/hr

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Filsuvez gel 10%	Gentamicin cream 0.1%
Firazyr injection 30mg/3ml	Gentamicin ointment 0.1%
Flurandrenolide lot 0.05%	Gentamicin solution 0.3% op
Follistim AQ injection 300unit	Gleevec tab 400mg
Follistim AQ injection 600unit	Golytely solution
Follistim AQ injection 900unit	Gomekli capsule 1mg
Fondaparinux injection 2.5/0.5	Gralise tab 450mg
Fondaparinux injection 5/0.4ml	Gralise tab 600mg
Fondaparinux injection 7.5mg/0.6ml	Hadlima injection 40/0.4ml
Fondaparinux injection 10/0.8ml	Hadlima push injection 40/0.4ml
Fotivda capsule 0.89mg	Harvoni pak 45-200mg
Fotivda capsule 1.34mg	Harvoni tab 45-200mg
Fragmin injection 2500/0.2	Hulio injection 40/0.8ml
Fragmin injection 2500/ml	Hycamtin capsule 0.25mg
Fragmin injection 5000/0.2	Hycamtin capsule 1mg
Fragmin injection 7500/0.3	Hydrocortisone butyrate cream 0.1%
Fragmin injection 10000/ml	Hydrocortisone valerate cream 0.2%
Fragmin injection 12500unt	Hydromorphone tab 8mg er
Fragmin injection 15000unt	Hydromorphone tab 16mg er
Fragmin injection 18000unt	Hydromorphone tab 32mg er
Fragmin injection 95000unt	Ibrance capsule 75mg
Frova tab 2.5mg	Ibrance capsule 100mg
Frovatriptan tab 2.5mg	Ibrance capsule 125mg
Fyremadel solution 250mcg/0.5ml	Ibrance tab 75mg
Gabapentin (oncedaily) tab 450mg	Ibrance tab 100mg
Gabapentin (oncedaily) tab 600mg	Ibrance tab 125mg
Galafold capsule 123mg	Icatibant injection 30mg/3ml
Ganirelix injection 250mcg/0.5ml	Imatinib tab 400mg
GaviLyte-C solution	Imbruvica suspension 70mg/ml
GaviLyte-G solution	Imcivree injection 10mg/ml

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Imitrex injection 4mg/0.5	Jaythari tab 30mg
Imitrex injection 6mg/0.5	Jaythari tab 36mg
Imitrex tab 25mg	Kesimpta injection 20/.4ml
Imitrex tab 50mg	Ketoconazole cream 2%
Imitrex tab 100mg	Ketoprofen capsule 25mg
Impavido capsule 50mg	Ketoprofen capsule 50mg
Imuldosa injection 45mg/0.5ml	Ketoprofen capsule 75mg
Imuldosa injection 90mg/ml	Ketoprofen capsule 200mg er
Ingrezza capsule 40-80mg	Kiprofen capsule 25mg
Insulin sryg mis 0.5ml/27g	Kitabis pak neb 300/5ml
Insulin sryg mis 1ml/32g	Krintafel tab 150mg
Insulin syrg mis 0.3/29g	Kygevvi pow 2gm/2gm
Insulin syrg mis 0.3/30g	Kymbee tab 6mg
Insulin syrg mis 0.3/31g	Kymbee tab 18mg
Insulin syrg mis 0.5/28g	Kymbee tab 30mg
Insulin syrg mis 0.5/29g	Kymbee tab 36mg
Insulin syrg mis 0.5/31g	Lagevrio capsule 200mg
Insulin syrg mis 0.5/32g	Lampit tab 30mg
Insulin syrg mis 0.5ml/30g	Lampit tab 120mg
Insulin syrg mis 1ml/27g	Lancet device mis adjust
Insulin syrg mis 1ml/28g	Lansoprazole capsule 30mg dr
Insulin syrg mis 1ml/29g	Lenalidomide capsule 20mg
Insulin syrg mis 1ml/30g	Lenalidomide capsule 25mg
Insulin syrg mis 1ml/31g	Levalbuterol neb 0.31mg
Insulin syrg u500 mis 31gx6mm	Levalbuterol neb 0.63mg
Inveltys suspension 1%	Levalbuterol neb 1.25/0.5
Itraconazole capsule 100mg	Levalbuterol neb 1.25mg
Jaythari suspension 22.75mg/ml	Levorphanol tab 2mg
Jaythari tab 6mg	Levorphanol tab 3mg
Jaythari tab 18mg	Libervant mis 5mg

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Libervant mis 7.5mg	Methylphenidate tab 18mg er
Libervant mis 10mg	Miebo drop 1.3gm/ml
Libervant mis 12.5mg	Migranal spr 4mg/ml
Libervant mis 15mg	Morphine sul capsule 30mg er
Lidocaine ointment 5%	Morphine sul capsule 45mg er
Liraglutide injection 18mg/3ml	Morphine sul capsule 50mg er
Locoid Lipo cream 0.1%	Morphine sul capsule 60mg er
Lofena tab 25mg	Morphine sul capsule 75mg er
Lokelma pak 10gm	Morphine sul capsule 80mg er
Lonsurf tab 15-6.14	Morphine sul capsule 90mg er
Lonsurf tab 20-8.19	Morphine sul capsule 100mg er
Lovenox injection 30/0.3ml	Morphine sul capsule 120mg er
Lovenox injection 40/0.4ml	Morphine sul tab 30mg er
Lovenox injection 60/0.6ml	Morphine sul tab 60mg er
Lovenox injection 80/0.8ml	Moviprep solution
Lovenox injection 100mg/ml	MS Contin tab 30mg er
Lovenox injection 120/0.8	MS Contin tab 60mg er
Lovenox injection 150mg/ml	Mupirocin ointment 2%
Lovenox injection 300/3ml	Mydayis capsule 12.5mg
Lumigan solution 0.01%	Mydayis capsule 25mg
Maxalt tab 10mg	Naratriptan tab 1mg
Maxalt-MLT tab 10mg	Naratriptan tab 2.5mg
Medroxyprogesterone injection 150mg/ml	Nateglinide tab 60mg
Mekinist solution 0.05mg/ml	Nayzilam spray 5mg
Menopur injection 75unit	Nexium capsule 20mg
Methadone solution 5mg/5ml	Nexium capsule 40mg
Methadone solution 10mg/5ml	Nilotinib capsule 50mg
Methadone tab 5mg	Nitazoxanide tab 500mg
Methadone tab 10mg	NovoFine Aut mis 30gx8mm
Methylphenidate (osm) 18mg er	Novofine mis 32gx6mm

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
NovoFine Plus mis 32gx4mm	Paxlovid tab 150-100
Nucala injection 100mg/ml	Paxlovid tab 300-100
Nurtec tab 75mg odt	Peg 3350/electrolytes
Nuzyra tab 150mg	Peg/nasul/c/ solution nacl/pot
Nystatin cream 100000	Peg-3350/nacl/na bicarbonate
Nystatin ointment 100000u	Pen needle mis 29gx1/2"
Nystatin ointment 100000 unit/gm	Pen needle mis 29gx3/16
Olpruva pak 2gm	Pen needle mis 29gx5/16
Olpruva pak 3gm	Pen needles mis 29gx1/2"
Olpruva pak 4 gm	Pen needles mis 31gx1/4"
Olpruva pak 5gm	Pen needles mis 31gx3/16
Oralair chld sub 100 ir	Pen needles mis 31gx5/16
Orlynvah tab 500-500	Pentips mis 29gx12mm
Orudis capsule 75mg	Pentips mis 31gx5mm
Otulfi injection 45mg/0.5ml	Pentips mis 31gx8mm
Otulfi injection 90mg/ml	Pentips mis 32gx4mm
Oxervate solution 20mcg/ml	Pheburane mis 483/gm
Oxycontin tab 10mg cr	Phentermine/topiramate 11.25-69
Oxycontin tab 15mg cr	Phentermine/topiramate 15-92
Oxycontin tab 20mg cr	Phentermine/topiramate 3.75-23
Oxycontin tab 30mg cr	Phentermine/topiramate 7.5-46
Oxycontin tab 40mg cr	Phyrago tab 50mg
Oxycontin tab 60mg cr	Phyrago tab 80mg
Oxycontin tab 80mg cr	Phytonadione tab 5mg
Oxymorphone tab 30mg er	Pilocarpine solution 1.25% op
Oxymorphone tab 40mg er	Pioglitazone tab 15mg
Palynziq injection 2.5/0.5	Pivya tab 185mg
Palynziq injection 10/0.5ml	Plegridy injection starter
Palynziq injection 20mg/ml	Plegridy pen injection starter
Paxlovid pak	Plenvu solution

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Pomalidomide capsule 1mg	Repatha Sure injection 140mg/ml
Pomalidomide capsule 2mg	Restasis mul emu 0.05%
Pomalidomide capsule 3mg	Retacrit injection 2000unit
Pomalidomide capsule 4mg	Retacrit injection 3000unit
Prednisolone solution 20mg/5ml	Retacrit injection 4000unit
Prevacid capsule 30mg dr	Retacrit injection 10000unt
Procrit injection 10000/ml	Retacrit injection 20000uni
Procrit injection 20000/ml	Retacrit injection 40000unt
Procrit injection 40000/ml	Retin-A cream 0.025%
Promacta powder 12.5mg	Retin-A cream 0.05%
Promethazine/codeine solution 6.25-10	Retin-A cream 0.1%
Pyquvi suspension 22.75mg	Retin-A gel 0.01%
Pyzchiva injection 45mg/0.5ml	Retin-A gel 0.025%
Pyzchiva injection 90mg/ml	Revlimid capsule 20mg
Pyzchiva injection 90mg/ml	Revlimid capsule 25mg
Qlosi solution 0.4%	Rinvoq tab 45mg er
Qsymia capsule 3.75-23mg	Rizatriptan tab 5mg
Qsymia capsule 7.5-46mg	Rizatriptan tab 5mg odt
Qsymia capsule 11.25-69mg	Rizatriptan tab 10mg
Qsymia capsule 15-92mg	Rizatriptan tab 10mg odt
Quick Touch mis 32gx5mm	Roflumilast tab 250mcg
Quick Touch mis 33gx8mm	Rozlytrek capsule 100mg
Quillichew chw 30mg er	Rozlytrek pak 50mg
Qvar RediHaler aer 40mcg	Sajazir injection 30mg/3ml
Relexxii tab 18mg er	Samsca tab 15mg
Relpax tab 20mg	Sancuso dis 3.1mg
Relpax tab 40mg	Saxenda injection 18mg/3ml
Repaglinide tab 0.5mg	Scemblix tab 40mg
Repaglinide tab 1mg	Segluromet tab 2.5-500
Repatha injection 140mg/ml	Selarsdi injection 45/0.5ml

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Selarsdi injection 90mg/ml	Strensiq injection 18/0.45ml
Sitavig tab 50mg	Strensiq injection 28/0.7ml
Sivextro tab 200mg	Strensiq injection 40mg/ml
Soaanz tab 20mg	Strensiq injection 80/0.8ml
Soaanz tab 40mg	Suflave solution
Soaanz tab 60mg	Sumatriptan injection 4mg/0.5ml
Sodium/potassium/magnesium solution	Sumatriptan injection 6mg/0.5ml
Sohonos capsule 1mg	Sumatriptan spr 5mg/act
Sohonos capsule 1.5mg	Sumatriptan spr 20mg/act
Sohonos capsule 2.5mg	Sumatriptan tab 25mg
Sohonos capsule 5mg	Sumatriptan tab 50mg
Sohonos capsule 10mg	Sumatriptan tab 100mg
Solosec gra 2gm	Sunitinib capsule 37.5mg
Sovaldi pak 200mg	Suprep Bowel solution prep
Sovaldi tab 200mg	Sutab tab
Sporanox capsule 100mg	Sutent capsule 37.5mg
Sporanox capsule pulsepak	Symbravo tab 20-10mg
Sprix spray 15.75mg	Taclonex suspension
Sprycel tab 50mg	Tafinlar tab 10mg
Sprycel tab 80mg	Takhzyro injection 150mg/ml
Starjemza injection 45mg/0.5ml	Takhzyro injection 300/2ml
Starjemza injection 90mg/ml	Talzenna capsule 0.25mg
Steglatro tab 5mg	Tarpeyo capsule 4mg
Stelara injection 45mg/0.5ml	Tasigna capsule 50mg
Stelara injection 90mg/ml	Tecfidera capsule 120mg
Stendra tab 50mg	Tegsedi injection 284/1.5
Stendra tab 100mg	Tobi neb 300/5ml
Stendra tab 200mg	Tobi Podhaler capsule 28mg
Steqeyma injection 45mg/0.5ml	Tobramycin neb 300/4ml
Steqeyma injection 90mg/ml	Tobramycin neb 300/5ml

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Tobramycin solution 0.3% op	Valtoco liq 20mg
Tobrex ointment 0.3% op	Valtoco spray 5mg
Tolvaptan tab 15mg	Valtoco spray 10mg
Tosymra solution 10mg	Valtrex tab 1gm
Tracleer tab 32mg	Varubi tab 90mg
Tremfya injection 200/2ml	Venclexta tab 10mg
Tretinoin cream 0.025%	Venclexta tab 100mg
Tretinoin cream 0.05%	Veozah tab 45mg
Tretinoin cream 0.1%	Vevye drops 0.1%
Tretinoin gel 0.01%	Vfend suspension 40mg/ml
Tretinoin gel 0.025%	Victoza injection 18mg/3ml
Triamcinolone cream 0.1%	Vigafyde solution 100mg/ml
Trudhesa aer 0.725mg	Vistogard pak 10gm
Tukysa tab 50mg	Vitrakvi capsule 100mg
Ubrelvy tab 50mg	Voriconazole suspension 40mg/ml
Ubrelvy tab 100mg	Vowst capsule
Ulticare mis 30gx3/16	Vuity solution 1.25% op
Upneeq solution 0.1%	Vybrique mis 25mg
Ustekinumab solution ttwe	Vybrique mis 50mg
Ustekinumab injection 45mg/0.5ml	Vybrique mis 75mg
Ustekinumab injection 90mg/ml	Vybrique mis 100mg
Ustekinumab-AAUZ injection 45mg/0.5ml	Vyvgart injection hytrulo
Ustekinumab-AAUZ injection 90mg/ml	Vyzulta solution 0.024%
Ustekinumab-AEKN injection 45mg/0.5ml	Wezlana injection 90mg/ml
Ustekinumab-AEKN injection 90mg/ml	Wynzora cream
Ustekinumab-TTWE injection 45mg/0.5ml	Xaciato gel 2%
Vafseo tab 150mg	Xarelto tab 15mg
Vafseo tab 300mg	Xdemvy dro 0.25%
Valacyclovir tab 1gm	Xifaxan tab 200mg
Valtoco liq 15mg	Xifaxan tab 550mg

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Quantity Limit (cont.)

Medication	
Xtampza ER capsule 9mg	Zomig nasal spray 2.5mg
Xtampza ER capsule 13.5mg	Zomig nasal spray 5mg
Xtampza ER capsule 18mg	Zomig tab 2.5mg
Xtampza ER capsule 27mg	Zomig tab 5mg
Xtampza ER capsule 36mg	Zovirax cream 5%
Xuriden powder 2gm	Zovirax ointment 5%
Xyosted injection 50/0.5	Zurzuvae capsule 20mg
Xyosted injection 75/0.5	Zurzuvae capsule 25mg
Xyosted injection 100/0.5	Zurzuvae capsule 30mg
Xyvona tab 2mg	
Xyvona tab 3mg	
Yesintek injection 45mg/0.5ml	
Yesintek injection 90mg/ml	
Yusimry injection 40/0.8ml	
Yutrepia capsule 79.5mcg	
Yutrepia capsule 106mcg	
Yuviwel injection 5.5mg	
Zavzpret spray 10mg	
Zembrace SymTouch injection 3/0.5ml	
Zilbrysq injection 16.6mg	
Zilbrysq injection 23mg	
Zilbrysq injection 32.4mg	
Zilxi aer 1.5%	
Zipsor capsule 25mg	
Zolmitriptan spr 2.5mg	
Zolmitriptan spr 5mg	
Zolmitriptan tab 2.5 mg odt	
Zolmitriptan tab 2.5mg	
Zolmitriptan tab 5mg	
Zolmitriptan tab 5mg odt	

© 2026 United HealthCare Services, Inc. All Rights Reserved.

Medications added to the PDL

We are giving you more medication options to treat your condition by adding more drugs to the PDL.

Medication	Tier	Coverage rules or limits	Other covered products
Airsupra	4	N/A	
Avtozma	5	PA, QL	Actemra is T5 PA,QL
Opvee	3	N/A	naloxone nasal spray, Narcan, Rextovy are T1 ($0)
Qulipta	4	PA, QL	Aimovig and Emgality are T3 PA, QL; Ubrelvy is T4 PA,QL
Trikafta	3	PA, QL	
Zeposia	5	PA, QL	

© 2026 United HealthCare Services, Inc. All Rights Reserved.

What should I do if coverage of my medication is changing?

Type of change	What is happening?	What should I do?
Exclusion	These medications are no longer covered by your plan.	Ask your health care provider if covered medications may work for you. To continue taking your medication, you can pay the full cost of the prescription and the amount you pay will not count toward any deductible or out-of-pocket maximum you may have.
Higher tier	Medications moving to a higher tier are still covered by your plan but may result in a higher cost share. Your plan covers other medications to treat your condition that may be a lower cost to you.	To save money, ask your health care provider about other medication options.
Non-formulary	These medications are no longer covered by your plan. Your plan covers other medications to treat your condition.	Ask your health care provider if covered medications may work for you. To continue taking your medication, you or your health care provider can ask us for a prior authorization or exception. If approved, your medication will be covered at the second highest tier.
Prior author-ization	These medications now require a prior authorization (PA) to be sure this medication is most appropriate for your condition. You need approval before you refill your prescription.	To continue taking your medication, you or your health care provider can ask us for a prior authorization or exception.

© 2026 United HealthCare Services, Inc. All Rights Reserved.

What should I do if coverage of my medication is changing? (cont.)

Type of change	What is happening?	What should I do?
Quantity limits	Your drug has a new quantity limit or the limit has changed. Quantity limits are updated based on medical guidance and Food and Drug Administration (FDA) recommendations to ensure medications are used appropriately.	If you are taking a medication that exceeds the new quantity limit, you or your health care provider can ask us for an exception to cover the additional amount.
Rx to medical	These are drug(s) that will no longer be covered under your pharmacy benefit, but may be covered under your medical benefit.	Talk to your health care provider to receive this drug through your medical benefit or to suggest other options for a drug that is covered by your pharmacy benefit.
Step therapy	You must first try other covered medications used to treat your condition before you can get your medication covered.	Ask your health care provider if other covered medications may work for you. To continue taking your medication, you or your health care provider can ask us for a prior authorization or exception.

© 2026 United HealthCare Services, Inc. All Rights Reserved.

How can I get a medication that requires a prior authorization or an exception?

Optum Rx, our Pharmacy Benefit Manager, processes prior authorization and exception requests on behalf of UnitedHealthcare Individual & Family plans. Contact your health care provider to submit a request. Health care providers can submit a request:

- **Online: professionals.optumrx.com/prior-authorization.html**
- **Phone: 1-800-711-4555**

The request should include the diagnosis, medication history, clinical justification, medical records/lab tests as needed and other supporting information. If information is missing, Optum Rx will contact your health care provider and request additional information. If you need help, you can also start a request at **myuhc.com/exchange** or by calling the member services number on your health plan ID card, and we can contact your health care provider for information to help process the request.



Need more information about your pharmacy drug coverage and costs?

Visit **myuhc.com/exchange.** You can also call the phone number on your health plan ID card. Health care providers can visit **uhcprovider.com/exchange.**



Additional coverage requirements or limits such as quantity limits may apply.

All branded medications are trademarks or registered trademarks of their respective owners.

UnitedHealthcare Individual & Family plans medical plan coverage offered by: UnitedHealthcare of Arizona, Inc.; Rocky Mountain Health Maintenance Organization Incorporated in CO; UnitedHealthcare of Florida, Inc.; UnitedHealthcare of Georgia, Inc; UnitedHealthcare of Illinois, Inc.; UnitedHealthcare Insurance Company in AL, IN, KS, LA, MO, NE, NH, NJ, NY, OR, SD, TN, and WY; Optimum Choice, Inc. in MD and VA; UnitedHealthcare Community Plan, Inc. in MI; UnitedHealthcare of Midlands, Inc. in ND; UnitedHealthcare of Mississippi, Inc.; UnitedHealthcare of New Mexico, Inc.; UnitedHealthcare of New York, Inc.; UnitedHealthcare of North Carolina, Inc.; UnitedHealthcare of Ohio, Inc.; UnitedHealthcare of Oklahoma, Inc.; UnitedHealthcare of South Carolina, Inc.; UnitedHealthcare of Texas, Inc.; UnitedHealthcare of Oregon, Inc. in WA; UnitedHealthcare of Wisconsin, Inc., and UnitedHealthcare Plan of the River Valley in Iowa. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

© 2026 United HealthCare Services, Inc. All Rights Reserved.