

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ALLERGENS, GRASS POLLEN
34 Tablets/Month
GRASSTEK (grass pollen-timothy, std)
ORALAIR (gr pol-orc/sw ver/rye/kent/tim)
ALLERGENS, MITES
30 Tablets/Month
ODACTRA (mite-dermatophagoides farinae, standardized)
ALLERGENS, RAGWEED POLLEN
34 Tablets/Month
RAGWITEK (weed pollen-short ragweed)
ALZHEIMER'S AGENTS
34 Capsules/Month
memantine hcl er (Example brand: NAMENDA XR)
NAMZARIC (memantine hcl/donepezil)
68 Tablets/Month
memantine hcl (Example brand: NAMENDA)
68 Tablets/Month
ZUNVEYL (benzgalantamine)
ANALGESICS, MISC
30 Tablets/Year
JOURNAVX (suzetrigine)
ANALGESICS, OPIOIDS LONG-ACTING
4 Patches/Month
BUTRANS (buprenorphine)
34 Tablets/Month
tramadol er 200 mg tablet (Example brand: RYZOLT ER)
tramadol er 300 mg tablet (Example brand: RYZOLT ER)
tramadol hcl er 200 mg tablet (Example brand: ULTRAM ER)
tramadol hcl er 300 mg tablet (Example brand: ULTRAM ER)
34 Tablets/Month
hydrocodone bitartrate er (Example brand: HYSINGLA ER)
HYSINGLA ER (hydrocodone bitartrate)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ANALGESICS, OPIOIDS LONG-ACTING
60 EA/Month (1 EA equals 1 film)
BELBUCA (buprenorphine)
68 Capsules/Month
hydrocodone bitartrate er (Example brand: ZOHYDRO ER)
68 Tablets/Month
tramadol er 100 mg tablet (Example brand: RYZOLT ER)
tramadol hcl er 100 mg tablet (Example brand: ULTRAM ER)
ANALGESICS, OPIOIDS SHORT-ACTING
360 Tablets or Capsules or Lozenges/Month
(Example brand: LORTAB)
(Example brand: NORCO)
acetamin-caff-dihydrocodeine (Example brand: TREZIX)
acetaminophen-codeine (Example brand: TYLENOL #2)
acetaminophen-codeine (Example brand: TYLENOL #3)
acetaminophen-codeine (Example brand: TYLENOL #4)
ASCOMP WITH CODEINE (asa/butalb/caffeine/codeine)
butalb-acetaminoph-caff-codein (Example brand: FIORICET W/ CODEINE)
codeine sulfate (Example brand: No Brand Product)
DILAUDID (hydromorphone)
ENDOCET (oxycodone/acetaminophen)
fentanyl citrate (Example brand: ACTIQ)
fentanyl citrate (Example brand: FENTORA)
FIORICET WITH CODEINE (butalb/acetaminoph/caff/codein)
hydrocodone-acetaminophen (Example brand: LORTAB)
hydrocodone-acetaminophen (Example brand: NORCO)
hydrocodone-acetaminophen (Example brand: VERDROCET)
hydrocodone-acetaminophen (Example brand: XODOL)
hydrocodone-ibuprofen (Example brand: IBUDONE)
hydrocodone-ibuprofen (Example brand: VICOPROFEN)
levorphanol tartrate (Example brand: LEVO-DROMORAN) (limit to 204 units/claim)
meperidine 50 mg tablet (Example brand: MEPERITAB) (limit to 68 units/claim)
morphine sulfate (Example brand: MSIR)
NALOCET (oxycodone/acetaminophen)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ANALGESICS, OPIOIDS SHORT-ACTING
360 Tablets or Capsules or Lozenges/Month
oxycodone hcl (Example brand: DAZIDOX)
oxycodone hcl (Example brand: OXYIR)
oxycodone hcl (Example brand: ROXICODONE)
oxymorphone hcl (Example brand: OXYMORPHONE)
pentazocine-naloxone hcl (Example brand: TALWIN NX)
PERCOCET (oxycodone/acetaminophen)
PROLATE (oxycodone/acetaminophen)
ROXICODONE (oxycodone)
ROXYBOND (oxycodone)
tramadol hcl 100 mg tablet (Example brand: ULTRAM) (limit to 136 units/claim)
tramadol hcl 25 mg tablet (Example brand: ULTRAM) (limit to 272 units/claim)
tramadol hcl 50 mg tablet (Example brand: ULTRAM) (limit to 272 units/claim)
tramadol hcl-acetaminophen (Example brand: ULTRACET) (limit to 272 units/claim)
ANALGESICS/ ANESTHETICS, TOPICAL
90 Patches/Month
DERMACINRX LIDOCAN (lidocaine)
LIDOCAN II (lidocaine)
LIDOCAN III (lidocaine)
LIDOCAN IV (lidocaine)
LIDOCAN V (lidocaine)
LIDODERM (lidocaine)
TRIDACAINE II (lidocaine)
TRIDACAINE III (lidocaine)
TRIDACAINE XL (lidocaine)
ZTLIDO (lidocaine)
ANDROGENIC AGENTS
136 Capsules/Month
JATENZO (testosterone undecanoate)
136 Capsules/Month
TLANDO (testosterone)
ANGIOTENSIN MODULATORS ARBs AND DRIs
34 Tablets/Month

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ANGIOTENSIN MODULATORS ARBs AND DRIs	
34 Tablets/Month	
ATACAND (candesartan cilexetil)	
ATACAND HCT (candesartan/hydrochlorothiazide)	
AVALIDE 300-12.5 MG TABLET (irbesartan/hydrochlorothiazide)	
AVAPRO (irbesartan)	
BENICAR (olmesartan)	
BENICAR HCT (olmesartan/hydrochlorothiazide)	
DIOVAN 320 MG TABLET (valsartan)	
DIOVAN HCT (valsartan/hydrochlorothiazide)	
EDARBI (azilsartan medoxomil)	
EDARBYCLOR (azilsartan med/chlorthalidone)	
irbesartan (Example brand: AVAPRO)	
MICARDIS (telmisartan)	
MICARDIS HCT (telmisartan/hydrochlorothiazide)	
telmisartan (Example brand: MICARDIS)	
34 Tablets/Month	
TEKTURNA (aliskiren)	
68 Tablets/Month	
AVALIDE 150-12.5 MG TABLET (irbesartan/hydrochlorothiazide)	
DIOVAN 160 MG TABLET (valsartan)	
DIOVAN 40 MG TABLET (valsartan)	
DIOVAN 80 MG TABLET (valsartan)	
ENTRESTO (sacubitril/valsartan)	
120 Capsules/Month	
ENTRESTO SPRINKLE (sacubitril/valsartan)	
ANGIOTENSIN MODULATORS, COMBINATIONS	
34 Tablets/Month	
AZOR (amlodipine bes/olmesartan)	
EXFORGE (amlodipine/valsartan)	
EXFORGE HCT (amlodipine/valsartan/hcthiacid)	
OLMSRTN-AMLDPN-HCTZ 40-10-12.5 (olmesartan med/amlodipine/hctz)	
OLMSRTN-AMLDPN-HCTZ 40-10-25MG (olmesartan med/amlodipine/hctz)	
OLMSRTN-AMLDPN-HCTZ 40-5-12.5 (olmesartan med/amlodipine/hctz)	

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ANGIOTENSIN MODULATORS, COMBINATIONS	
34 Tablets/Month	
	OLMSRTN-AMLDPN-HCTZ 40-5-25 MG (olmesartan med/amlodipine/hctz)
	telmisartan-amlodipine (Example brand: TWYNSTA)
	trandolapr-verapam er 4-240 mg (Example brand: TARKA ER)
	TRIBENZOR 40-10-12.5 MG TABLET (olmesartan med/amlodipine/hctz)
	TRIBENZOR 40-10-25 MG TABLET (olmesartan med/amlodipine/hctz)
	TRIBENZOR 40-5-12.5 MG TABLET (olmesartan med/amlodipine/hctz)
	TRIBENZOR 40-5-25 MG TABLET (olmesartan med/amlodipine/hctz)
68 Tablets/Month	
	OLMSRTN-AMLDPN-HCTZ 20-5-12.5 (olmesartan med/amlodipine/hctz)
	trandolapr-verapam er 1-240 mg (Example brand: TARKA ER)
	trandolapr-verapam er 2-180 mg (Example brand: TARKA ER)
	trandolapr-verapam er 2-240 mg (Example brand: TARKA ER)
	TRIBENZOR 20-5-12.5 MG TABLET (olmesartan med/amlodipine/hctz)
ANTIBIOTICS, TETRACYCLINES	
68 Tablets/Month	
	doxycycline hyclate (Example brand: PERIOSTAT)
ANTIBIOTICS, TOPICAL	
60 GM/Month (15-30 GM per tube)	
	mupirocin 2% cream (Example brand: BACTROBAN)
66 Grams/Month	
	CENTANY 2% OINTMENT (mupirocin)
ANTICOAGULANTS	
34 Tablets/Month	
	SAVAYSA (edoxaban tosylate)
	XARELTO 10 MG TABLET (rivaroxaban)
	XARELTO 20 MG TABLET (rivaroxaban)
68 Tablets or Capsules/Month	
	ELIQUIS 2.5 MG TABLET (apixaban)
	PRADAXA (dabigatran etexilate)
	XARELTO 15 MG TABLET (rivaroxaban)
	XARELTO 2.5 MG TABLET (rivaroxaban)
74 Tablets/Month	

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ANTICOAGULANTS
74 Tablets/Month
ELIQUIS 5 MG TABLET (apixaban)
ELIQUIS DVT-PE TREAT START 5MG (apixaban)
84 Capsule Sprinkle/Month
ELIQUIS SPRINKLE 0.15 MG CAP (apixaban)
204 Tablets Suspension/Month
ELIQUIS 0.5 MG PKT(1X0.5MG TB) (apixaban)
ELIQUIS 1.5 MG PKT(3X0.5MG TB) (apixaban)
ELIQUIS 2 MG PKT(4X 0.5 MG TB) (apixaban)
ANTICONVULSANT/NEUROPATHIC PAIN/FIBROMYAIGIA)
136 Capsules/Month
LYRICA (pregabalin)
ANTIDEPRESSANTS, OTHER
34 Capsule/Month
FETZIMA (levomilnacipran hydrochloride)
68 Capsules/Month
duloxetine hcl (Example brand: IRENKA DR)
ANTIDEPRESSANTS, OTHER/NEUROPATHIC PAIN/FIBROMYAIGIA
68 Capsules/Month
CYMBALTA (duloxetine hcl)
ANTIDIARRHEAL - G.I. CHLORIDE CHANNEL INHIBITORS
68 Tablets/Month
MYTESI (crofelemer)
ANTIEMETICS/ANTIVERTIGO AGENTS
136 Tablets/Month
DICLEGIS (doxylamine/pyridoxine)
ANTIFUNGALS, ORAL
102 Tablets/Month
NOXAFIL (posaconazole)
ANTI-NARCOLEPSY & ANTI-CATAPLEXY, SEDATIVE-TYPE AGT
540 ML/Month
XYREM (sodium oxybate)
XYWAV (gamma-hydroxybutyric acid)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ANTIPSYCHOTICS
34 Tablets/Month
LYBALVI (olanzapine)
34 Tablets/Month
LATUDA 120 MG TABLET (lurasidone)
LATUDA 20 MG TABLET (lurasidone)
LATUDA 40 MG TABLET (lurasidone)
68 Tablets/Month
LATUDA 60 MG TABLET (lurasidone)
LATUDA 80 MG TABLET (lurasidone)
ANTIVIRALS, Other
136 Tablets/Month
LIVTENCITY (maribavir)
BLADDER RELAXANT PREPARATIONS
8 Patches/Month
OXYTROL (oxybutynin)
34 Tablets or Packets/Month
darifenacin er (Example brand: ENABLEX)
DETROL LA (tolterodine tartrate er)
GEMTESA (vibegron)
MYRBETRIQ (mirabegron)
oxybutynin cl er 5 mg tablet (Example brand: DITROPAN XL)
TOVIAZ (fesoterodine fumarate)
tropium chloride er (Example brand: SANCTURA XR)
VESICARE (solifenacin succinate)
68 Tablets/Month
DETROL (tolterodine tartrate)
oxybutynin cl er 10 mg tablet (Example brand: DITROPAN XL)
oxybutynin cl er 15 mg tablet (Example brand: DITROPAN XL)
tropium chloride (Example brand: SANCTURA)
136 Tablets/Month
oxybutynin 2.5 mg tablet (Example brand: OXYBUTYNIN)
oxybutynin 5 mg tablet (Example brand: DITROPAN)
680 ML/Month

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

BLADDER RELAXANT PREPARATIONS
680 ML/Month
oxybutynin 5 mg/5 ml soln cup (Example brand: DITROPAN)
oxybutynin 5 mg/5 ml solution (Example brand: DITROPAN)
oxybutynin 5 mg/5 ml syrup (Example brand: DITROPAN)
BRONCHIECTASIS
30 Tablets/Month
BRINSUPRI (brensocatib)
BRONCHODILATORS, BETA AGONISTS
17 GM/Month (13.4 to 17 GM for 2 inhalers)
VENTOLIN HFA 90 MCG INHALER (albuterol sulfate) 8 GM
30 GM/Month (15 GM per inhaler)
XOPENEX HFA (levalbuterol tartrate)
36 GM/Month (36 GM for 2 inhalers)
VENTOLIN HFA 90 MCG INHALER (albuterol sulfate) 18 GM
CARDIAC TONE, CONTRACTILITY, AND REMODELING
34 Tablets/Month
VERQUVO (vericiguat)
CENTRAL NERVOUS SYSTEM AGENTS, MISCELLANEOUS
68 Capsules/Month
NUDEXTA (dextromethorphan hbr/quinidine)
CHEMOKINE RECEPTOR ANTAGONIST
120 Capsules/Month
XOLREMDI (mavoxiafor)
CONTRACEPTIVES (EMERGENCY), ORAL
8 Tablets/Month
ELLA (ulipristal acetate)
8 Tablets/Month
ECONTRA ONE-STEP (levonorgestrel)
MY CHOICE (levonorgestrel)
MY WAY (levonorgestrel)
NEW DAY (levonorgestrel)
OPTION 2 (levonorgestrel)
CONTRACEPTIVES, INJECTABLE

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

CONTRACEPTIVES,INJECTABLE
1 EA/3 Months (1 EA equals 1 vial or syringe)
DEPO-PROVERA (medroxyprogesterone acetate)
DEPO-SUBQ PROVERA 104 (medroxyprogesterone acetate)
CONTRACEPTIVES,TRANSDERMAL
9 Patches/3 Month
XULANE (norelgestromin/ethin.estradiol)
ZAFEMY (norelgestromin/ethin.estradiol)
COPD AGENTS
1 EA/Month (1 EA per inhaler)
TUDORZA PRESSAIR (aclidinium bromide)
4 GM/Month (4 GM per inhaler)
STIOLTO RESPIMAT (tiotropium br/olodaterol)
8 GM/Month (4 GM per inhaler)
COMBIVENT RESPIMAT (ipratropium/albuterol)
10.7 GM/Month (10.7 GM per inhaler)
BEVESPI AEROSPHERE (glycopyrrolate/formoterol)
25.8 GM/Month (12.9 GM per inhaler)
ATROVENT HFA (ipratropium bromide)
30 EA/Month (5-30 capsules per carton)
SPIRIVA HANDIHALER (tiotropium bromide)
34 Tablets/Month
DALIRESP (roflumilast)
CYTOKINE AND CAM ANTAGONISTS
1 EA/Month (1 EA equals 1 Kit (contains 2 pens)
2 EA/Month (1 EA equals 1 Kit (contains 1 pen)
ZYMFENTRA 120 MG/ML PEN (2PK) (infliximab-dyyb)
ZYMFENTRA 120 MG/ML PEN KIT (infliximab-dyyb)
1 EA/Month (1 EA equals 1 Kit (contains 2 prefilled syringes)
ZYMFENTRA 120 MG/ML SYRNG(2PK) (infliximab-dyyb)
3 EA/Year (3 EA Starter Kit contains 6 syringes)
CIMZIA 2X200 MG/ML(X3)START KT (certolizumab)
34 Tablets/Month
RINVOQ (upadacitinib)
XELJANZ XR (tofacitinib citrate)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

CYTOKINE AND CAM ANTAGONISTS
68 Tablets/Month
XELJANZ (tofacitinib citrate)
DECONGESTANTS, ORAL
136 Tablets/Month
NASAL DECONGESTANT (pseudoephedrine hcl)
SUDOGEST (pseudoephedrine hcl)
SUPHEDRIN (pseudoephedrine hcl)
DIABETIC SUPPLY
Quantity Limits for meters are temporarily suspended effective 6/25/2025
1 Calibration/Control Solution/Month
blood-glucose calibration control
1 EA/180 Days (1 EA equals 1 Lancing Device)
lancing device
1 EA/180 Days (1 EA equals 1 insulin administration pen)
pen injectors
1 EA/2 Year (1 EA equals to 1 blood glucose meter)
blood-glucose meter Temporarily suspended effective 6/25/2025
204 EA/Month (1 EA equals 1 test strip)
blood glucose test strips
204 EA/Month (1 EA equals 1 lancet)
lancets
204 EA/Month (1 EA equals 1 pen needle)
pen needles
204 Blood/Urine/Ketone Test Strips/Month
blood ketone test,strips
204 EA/Month (1 EA equals 1 Syringe with or without needle)
syringes with or without needle, insulin
ELECTROLYTE DEPLETERS
34 EA/Month (1 EA equals 1 powder pack)
VELTASSA 16.8 GM POWDER PACKET (patiomer calcium sorbitex)
VELTASSA 25.2 GM POWDER PACKET (patiomer calcium sorbitex)
VELTASSA 8.4 GM POWDER PACKET (patiomer calcium sorbitex)
240 EA/Month (1 EA equals 1 powder pack)
VELTASSA 1 GM POWDER PACKET (patiomer)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ENZYME INHIBITOR, ORAL
60 Tablets/Month
JOENJA (leniolisib)
EPINEPHRINE, SELF-ADMINISTERED
2 EA/Month (1 EA equals 1 syringe or nasal spray)
AUVI-Q (epinephrine)
EPIPEN (epinephrine)
EPIPEN 2-PAK (epinephrine)
EPIPEN JR (epinephrine)
EPIPEN JR 2-PAK (epinephrine)
NEFFY (epinephrine)
FRIEDREICH'S DISEASE
90 Capsules/Month
SKYCLARYS (omaveloxolone)
GI MOTILITY, CONSTIPATION
34 Capsules/Month
LINZESS (linaclotide)
34 Tablets/Month
MOVANTIK (naloxegol oxalate)
GI MOTILITY, DIARRHEA
68 Tablets/Month
LOTRONEX (alosetron hcl)
VIBERZI (eluxadoline)
GLUCAGON AGENTS
2 Syringe/Month (0.1 ML equals 1 Syringe)
GVOKE HYPOPEN 1PK 0.5MG/0.1 ML (glucagon)
GVOKE HYPOPEN 1-PK 1 MG/0.2 ML (glucagon)
GVOKE HYPOPEN 2PK 0.5MG/0.1 ML (glucagon)
GVOKE HYPOPEN 2-PK 1 MG/0.2 ML (glucagon)
GVOKE PFS 1-PK 1 MG/0.2 ML SYR (glucagon)
GVOKE PFS 2-PK 1 MG/0.2 ML SYR (glucagon)
ZEGALOGUE AUTOINJECTOR (dasiglucagon)
ZEGALOGUE SYRINGE (dasiglucagon)
2 EA/Month (1 EA equals 1 Kit/vial/intranasal device)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

GLUCAGON AGENTS
2 EA/Month (1 EA equals 1 Kit/vial/intranasal device)
BAQSIMI (glucagon)
GLUCAGON EMERGENCY KIT (glucagon)
PdCIm _BAQSIMI (glucagon)
GLUCOCORTICOIDS, INHALED
1 EA/Month (1 EA equals 1 inhaler)
ASMANEX (mometasone furoate)
1 EA/Month (1 EA equals 1 inhaler)
ARMONAIR DIGIHALER (fluticasone)
2 EA/Month (1 EA equals 1 inhaler)
AIRDUO DIGIHALER (fluticasone)
AIRDUO RESPICLICK (fluticasone)
2 EA/Month (1 EA equals 1 inhaler)
PULMICORT FLEXHALER (budesonide)
6.1 GM/Month (6.1 GM per inhaler)
ALVESCO 80 MCG INHALER (ciclesonide)
12.2 GM/Month (6.1 GM per inhaler)
ALVESCO (ciclesonide) 6.1 GM
13 GM/Month (8.8 -13 GM per inhaler)
ASMANEX HFA (mometasone furoate)
22 GM/Month (10.6 GM per inhaler)
fluticasone prop hfa 44 mcg (Example brand: FLOVENT HFA)
24 GM/Month (8-12 GM per inhaler)
ADVAIR HFA (fluticasone/salmeterol)
24 GM/Month (12 GM per inhaler)
fluticasone prop hfa 110 mcg (Example brand: FLOVENT HFA)
fluticasone prop hfa 220 mcg (Example brand: FLOVENT HFA)
24 GM/Month (6.9-12.2 GM per inhaler)
BREYNA (budesonide/ formoterol fumarate)
BREYNA (budesonide/formoterol fumarate)
SYMBICORT (budesonide/ formoterol fumarate)
SYMBICORT (budesonide/formoterol fumarate)
26 GM/Month (8.8 -13 GM per inhaler)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

GLUCOCORTICOIDS, INHALED
26 GM/Month (8.8 -13 GM per inhaler)
DULERA (mometasone furoate)
DULERA (mometasone/formoterol)
30 EA/Month (1 EA equals 1 blister pack)
ARNUITY ELLIPTA (fluticasone furoate)
32.1 GM/Month (10.7 GM equals 1 inhaler)
AIRSUPRA (albuterol/budesonide)
60 EA/Month (1 EA equals 1 powdered dose)
fluticasone prop 50 mcg diskus (Example brand: FLOVENT DISK)
120 EA/Month (1 EA equals 1 powdered dose)
ADVAIR DISKUS (fluticasone/salmeterol)
WIXELA INHUB (fluticasone/salmeterol)
120 EA/Month (1 EA equals 1 powdered dose)
BREO ELLIPTA (fluticasone/vilanterol)
120 EA/Month (1 EA equals 1 powdered dose)
fluticasone propionate (Example brand: FLOVENT DISK)
GOUT AGENTS
68 Tablets or Capsules/Month
COLCRYS (colchicine)
MITIGARE (colchicine)
HEADACHE AGENTS, ACUTE TREATMENT
1 Bottle
ZAVZPRET (zavegepant)
8 Tablets/Month
REYVOW (lasmiditan)
16 Tablets/Month
UBRELVY (ubrogepant)
18 Tablets/Month
NURTEC ODT (rimegepant)
HEADACHE AGENTS, PREVENTATIVE TREATMENT
1 ML/Month
AIMOVIG 140 MG/ML AUTOINJECTOR (erenumab-aooe) 1 ML
AIMOVIG 70 MG/ML AUTOINJECTOR (erenumab-aooe) 1 ML
3 Syringe/Month (1.5 ML equals 1 Syringe)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

HEADACHE AGENTS, PREVENTATIVE TREATMENT
3 Syringe/Month (1.5 ML equals 1 Syringe)
AJOVY AUTOINJECTOR (fremanezumab-vfrm)
AJOVY SYRINGE (fremanezumab-vfrm)
34 Tablets/Month
QULIPTA (atogepant)
HEADACHE AGENTS, TRIPTANS INJECTABLE
5 ML/Month (5 ML equals 10 (0.5 ML) vials)
sumatriptan 6 mg/0.5 ml vial (Example brand: IMITREX)
4 ML/Month (4 ML equals 8 (0.5 ML) syringes)
IMITREX 4 MG/0.5 ML CARTRIDGES (sumatriptan succinate)
IMITREX 4 MG/0.5 ML PEN INJECT (sumatriptan succinate)
IMITREX 6 MG/0.5 ML CARTRIDGES (sumatriptan succinate)
IMITREX 6 MG/0.5 ML PEN INJECT (sumatriptan succinate)
ZEMBRACE SYMTOUCH (sumatriptan succinate)
HEADACHE AGENTS, TRIPTANS NON-INJECTABLE
6 EA/Month (1 EA equals 1 unit dose sprayer or syringe)
sumatriptan 20 mg nasal spray (Example brand: IMITREX)
sumatriptan 5 mg nasal spray (Example brand: IMITREX)
TOSYMRA (sumatriptan)
ZOMIG 2.5 MG NASAL SPRAY (zolmitriptan)
ZOMIG 5 MG NASAL SPRAY (zolmitriptan)
18 Tablets/Month
almotriptan malate (Example brand: AXERT)
FROVA (froatriptan succinate)
IMITREX 100 MG TABLET (sumatriptan succinate)
IMITREX 25 MG TABLET (sumatriptan succinate)
IMITREX 50 MG TABLET (sumatriptan succinate)
MAXALT (rizatriptan)
MAXALT MLT (rizatriptan)
naratriptan hcl (Example brand: AMERGE)
RELPAK (eletriptan)
rizatriptan (Example brand: MAXALT MLT)
rizatriptan (Example brand: MAXALT)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

HEADACHE AGENTS, TRIPTANS NON-INJECTABLE	
18 Tablets/Month	
	sumatriptan succ-naproxen sod (Example brand: TREXIMET)
	zolmitriptan 2.5 mg odt (Example brand: ZOMIG ZMT)
	zolmitriptan 5 mg odt (Example brand: ZOMIG ZMT)
	ZOMIG 2.5 MG TABLET (zolmitriptan)
	ZOMIG 5 MG TABLET (zolmitriptan)
HEMOLYTIC ANEMIA (PYRUVATE KINASE DEFICIENCY)	
68 Tablets/Month	
	PYRUKYND (mitapivat)
HEREDITARY ANGIOEDEMA TREATMENT	
4 Tablets/Month	
	EKTERLY (sebetralstat)
HYPOGLYCEMICS, DPP-4 INHIBITORS	
34 Tablets/Month	
	alogliptin (Example brand: NESINA)
	alogliptin-pioglitazone (Example brand: OSENI)
	JANUMET XR 100-1,000 MG TABLET (sitagliptin phos/metformin hcl)
	JANUMET XR 50-500 MG TABLET (sitagliptin phos/metformin hcl)
	JANUVIA (sitagliptin phosphate)
	JENTADUETO XR 5 MG-1,000 MG TB (linagliptin/metformin)
	NESINA (alogliptin)
	ONGLYZA (saxagliptin)
	OSENI (alogliptin/pioglitazone)
	TRADJENTA (linagliptin)
	ZITUVIMET XR 100-1,000 MG TAB (sitagliptin-metformin)
	ZITUVIMET XR 50-500 MG TABLET (sitagliptin-metformin)
	ZITUVIO (sitagliptin)
68 Tablets/Month	
	JANUMET (sitagliptin phos/metformin hcl)
	JANUMET XR 50-1,000 MG TABLET (sitagliptin phos/metformin hcl)
	JENTADUETO (linagliptin/metformin)
	JENTADUETO XR 2.5 MG-1,000 MG (linagliptin/metformin)
	KAZANO (alogliptin/metformin)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

HYPOGLYCEMICS, DPP-4 INHIBITORS
68 Tablets/Month
KOMBIGLYZE XR (saxagliptin hcl/metformin)
ZITUVIMET (sitagliptin-metformin)
ZITUVIMET XR 50-1000 MG TABLET (sitagliptin-metformin)
HYPOGLYCEMICS, OTHER
34 Tablets/Month
FARXIGA (dapagliflozin propanediol)
INPEFA (sotagliflozin)
INVOKANA (canagliflozin)
JARDIANCE (empagliflozin)
QTERN (dapagliflozin/saxagliptin)
STEGLATRO 15 MG TABLET (ertugliflozin pidolate)
XIGDUO XR 10 MG-1,000 MG TAB (dapagliflozin/metformin)
XIGDUO XR 10 MG-500 MG TABLET (dapagliflozin/metformin)
XIGDUO XR 2.5 MG-1,000 MG TAB (dapagliflozin/metformin)
XIGDUO XR 5 MG-500 MG TABLET (dapagliflozin/metformin)
68 Tablets/Month
INVOKAMET (canagliflozin/metformin)
INVOKAMET XR (canagliflozin/metformin)
STEGLATRO 5 MG TABLET (ertugliflozin pidolate)
XIGDUO XR 5 MG-1,000 MG TABLET (dapagliflozin/metformin)
IMMUNOMODULATORS, ATOPIC DERMATITIS
34 Tablets/Month
CIBINQO (abrocitinib)
IMMUNOSUPPRESSANT
204 Capsules/Month
LUPKYNIS (voclosporin)
INTRANASAL RHINITIS AGENTS
16 GM/Month (16 GM per inhaler)
fluticasone propionate (Example brand: FLONASE)
XHANCE (fluticasone)
17 GM/Month (17 GM per pump bottle)
mometasone furoate (Example brand: NASONEX)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

LIPOTROPICS, OTHER
34 Tablets or Capsules /Month
ALTOPREV (lovastatin)
CRESTOR (rosuvastatin calcium)
fluvastatin sodium (Example brand: LESCOL)
LESCOL XL (fluvastatin er)
LIVALO (pitavastatin)
ZYPITAMAG (pitavastatin)
LYSOSOMAL STORAGE DISORDER
17 Capsules/Month
GALAFOLD (migalastat)
MENOPAUSAL SYMPTOMS
68 Capsules/Month
LYNKUET 60 MG CAPSULE (elinzanetant)
MENOPAUSAL SYSTEM RELEIF
34 Tablets/Month
VEOZAH (fezolinetant)
MOVEMENT DISORDERS
34 Capsules/Month
INGREZZA (valbenazine)
MULTIPLE SCLEROSIS AGENTS IMMUNOMODULATORS
1 EA/Month (1 EA equals 1 syringe)
AVONEX 30 MCG/0.5 ML SYR (4PK) (interferon beta-1a)
AVONEX PEN 30 MCG/0.5 ML (4PK) (interferon beta-1a)
68 Capsules/Month
TECFIDERA (dimethyl fumarate)
136 Capsules/Month
VUMERITY (diroximel fumarate)
NARCOLEPSY H3 RECEPTOR ANTAG/INVERSE AGONIST
68 Tablets/Month
WAKIX (pitolisant)
ONCOLOGY AGENTS, ORAL
60 Tablets/Month
pazopanib hcl 400 mg tablet (Example brand: generic only)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
120 Tablets/Month
VOTRIENT 200 MG TABLET (pazopanib)
3 Capsules/Month
NINLARO (ixazomib citrate)
6 Tablets/Month
INQOVI (decitabine)
8 Capsules/Month
ROMVIMZA (vimseltinib)
16 Tablets/Month
OJEMDA 100 MG TAB (400MG DOSE) (tovorafenib)
18 Tablets/Month
ONUREG (azacitidine)
20 Tablets/Month
OJEMDA 100 MG TAB (500MG DOSE) (tovorafenib)
21 Capsules/Month
FOTIVDA (tivozanib)
21 Capsules/Month
FRUZAQLA 5 MG CAPSULE (fruquintinib)
24 Tablets/Month
OJEMDA 100 MG TAB (600MG DOSE) (tovorafenib)
30 Tablets/Month
ERLEADA 240 MG TABLET (apalutamide)
ZEJULA (niraparib)
30 Tablets or Capsules/Month
IMBRUVICA 140 MG TABLET (ibrutinib)
IMBRUVICA 280 MG TABLET (ibrutinib)
IMBRUVICA 420 MG TABLET (ibrutinib)
IMBRUVICA 70 MG CAPSULE (ibrutinib)
30 Capsules/Month
TALZENNA (talazoparib)
30 Tablets/Month
ITOVEBI 9 MG TABLET (inavolisib)
30 Tablets/Month
LAZCLUZE 240 MG TABLET (lazertinib)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
30 Tablets/Month
OJJAARA (mometotinib)
30 Tablets/Month
VORANIGO 40 MG TABLET (orasidenib)
34 Capsules/Month
ROZLYTREK 100 MG CAPSULE (entrectinib)
34 Tablets/Month
GILOTRIF (afatinib dimaleate)
34 Tablets/Month
IDHIFA (enasidenib)
34 Tablets/Month
ALUNBRIG 180 MG TABLET (brigatinib)
ALUNBRIG 90 MG TABLET (brigatinib)
34 Tablets/Month
BALVERSA 5 MG TABLET (erdafitinib)
VIZIMPRO (dacomitinib)
34 Tablets/Month
AYVAKIT (avapritinib)
34 Tablets/Month
LORBRENA 100 MG TABLET (lorlatinib)
34 Capsules/Month
BOSULIF 50 MG CAPSULE (bosutinib)
42 Capsules/Month
GOMEKLI 1 MG CAPSULE (mirdametininb)
56 Tablets/Month
OGSIVEO (nirogacestat)
60 Tablets/Month
LAZCLUZE 80 MG TABLET (lazertininb)
60 Tablets/Month
JAYPIRCA (pirtobrutininb)
REZLIDHIA (olutasidenib)
60 Tablets/Month
SCSEMBLIX 20 MG TABLET (asciminib)
SCSEMBLIX 40 MG TABLET (asciminib)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
60 Tablets/Month
WAYRILZ (rilzabrutinib)
60 Tablets/Month
VORANIGO 10 MG TABLET (orasidenib)
60 Tablets/Month
AKEEGA (niraparib/abiraterone)
60 Tablets/Month
INLURIYO (imlunestrant)
60 Tablets/Month
ITOVEBI 3 MG TABLET (inavolisib)
60 Tablets/Month
REVUFORJ 160 MG TABLET (revumenib)
60 Tablets or Capsules/Month
RETEVMO 120 MG TABLET (selpercatinib)
RETEVMO 160 MG TABLET (selpercatinib)
RETEVMO 80 MG CAPSULE (selpercatinib)
RETEVMO 80 MG TABLET (selpercatinib)
60 Tablets/Month
LUMAKRAS 120 MG TABLET (sotorasib)
LUMAKRAS 240 MG TABLET (sotorasib)
60 Tablets/Month
VANFLYTA (quizartinib)
60 Tablets/Month
BRUKINSA (zanubrutinib)
BRUKINSA (zanubrutinib)
60 Capsules/Month
AUGTYRO 160 MG CAPSULE (repotrectinib)
63 Tablets/Month
KISQALI (ribociclib)
64 Tablets/Month
TRUQAP (capivasertib)
68 Tablets/Month
TEPMETKO (tepotinib)
XTANDI 80 MG TABLET (enzalutamide)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
68 Tablets/Month
ZYTIGA 500 MG TABLET (abiraterone)
68 Tablets/Month
VERZENIO (abemaciclib)
68 Tablets/Month
ALUNBRIG 30 MG TABLET (brigatinib)
68 Tablets/Month
BALVERSA 4 MG TABLET (erdafitinib)
TIBSOVO (ivosidenib)
68 Capsules/Month
VITRAKVI 100 MG CAPSULE (larotrectinib)
68 Capsules/Month
COPIKTRA (duvelisib)
84 Capsules/Month
GOMEKLI 2 MG CAPSULE (mirdametinib)
84 Capsules/Month
FRUZAQLA 1 MG CAPSULE (fruquintinib)
90 Capsules/Month
IBTROZI (taletrectinib)
90 Tablets/Month
ERLEADA 60 MG TABLET (apalutamide)
90 Tablets/Month
LUMAKRAS 320 MG TABLET (sotorasib)
90 Tablets/Month
HERNEXEOS (zongertinib)
90 Tablets or Capsules/Month
RETEVMO 40 MG CAPSULE (selpercatinib)
RETEVMO 40 MG TABLET (selpercatinib)
102 Capsules/Month
ROZLYTREK 200 MG CAPSULE (entrectinib)
102 Capsules/Month
XTANDI 40 MG CAPSULE (ebzakytamide)
XTANDI 40 MG TABLET (enzalutamide)
102 Capsules/Month

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
102 Capsules/Month
LENVIMA (lenvatinib)
102 Tablets/Month
LORBRENA 25 MG TABLET (lorlatinib)
102 Tablets/Month
BALVERSA 3 MG TABLET (erdafitinib)
XOSPATA (gilteritinib)
120 Tablets or Capsules/Month
IMBRUVICA 140 MG CAPSULE (ibrutinib)
120 Tablets/Month
SCEMBLIX 100 MG TABLET (asciminib)
120 Tablets/Month
DANZITEN (nilotinib)
120 Tablets/Month
REVUFORJ 110 MG TABLET (revumenib)
120 Capsules/Month
nilotinib d-tartrate 150 mg cp (Example brand: NILOTINIB (GENERIC ONLY))
nilotinib d-tartrate 200 mg cp (Example brand: NILOTINIB (GENERIC ONLY))
nilotinib d-tartrate 50 mg cap (Example brand: NILOTINIB (GENERIC ONLY))
120 Capsules/Month
XALKORI 200 MG CAPSULE (crizotinib)
XALKORI 250 MG CAPSULE (crizotinib)
136 Capsules/Month
KOSELUGO 25 MG CAPSULE (selumetinib)
136 Tablets/Month
ABIRTEGA 250 MG TABLET (abiraterone)
ZYTIGA 250 MG TABLET (abiraterone)
136 Tablets/Month
RUBRACA (rucaparib)
136 Tablets/Month
LYNPARZA (olaparib)
136 Capsules/Month
TASIGNA (nilotinib)
TURALIO (pexidartinib)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
136 Tablets/Month
YONSA (abiraterone)
136 Tablets/Month
NUBEQA (darolutamide)
136 Tablets/Month
TABRECTA (capmatinib)
136 Tablets/Month
TUKYSA (tucatinib)
168 Tablets Susp/Month
GOMEKLI 1 MG TABLET FOR SUSP (mirdametinib)
180 Tablets/Month
KRAZATI (adagrasib)
204 Capsules/Month
BRAFTOVI 75 MG CAPSULE (encorafenib)
204 Tablets/Month
NERLYNX (neratinib)
204 Tablets/Month
MEKTOVI (binimetinib)
204 Capsules/Month
VITRAKVI 25 MG CAPSULE (larotrectinib)
204 Capsules/Month
BOSULIF 100 MG CAPSULE (bosutinib)
204 Tablets/Month
LYTGOBI (futibatinib)
204 Tablets/Month
OGSIVEO (nirogacestat)
204 Capsules/Month
AUGTYRO 40 MG CAPSULE (repotrectinib)
240 Tablets/Month
REVUFORJ 25 MG TABLET (revumenib)
240 Pellets/Month
XALKORI 150 MG PELLET (crizotinib)
XALKORI 20 MG PELLET (crizotinib)
XALKORI 50 MG PELLET (crizotinib)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

ONCOLOGY AGENTS, ORAL
272 Capsules/Month
RYDAPT (midostaurin)
272 Capsules/Month
KOSELUGO 10 MG CAPSULE (selumetinib)
272 Capsules/Month
TAZVERIK (tazemetostat)
272 Capsules/Month
IWILFIN (eflornithine)
408 Packs/Month
ROZLYTREK 50 MG PELLET PACKET (entrectinib)
OPHTHALMICS, GLAUCOMA – PROSTAGLANDINS
2 Bottles/Month (2.5 ml equals 1 Bottle)
VUITY (pilocarpine)
5 ML/Month
(Example brand: LUMIGAN)
bimatoprost (Example brand: LUMIGAN)
LUMIGAN (bimatoprost)
TRAVATAN Z (travoprost)
XALATAN (latanoprost)
OTC COVID - 19 TESTING KITS
2 Tests/Month
covid-19 antigen test kit
PITUITARY SUPPRESSIVE AGENT
60 Capsules/Month
CRENESSITY (crinecerfont)
PROTON PUMP INHIBITOR
34 Tablets or Capsules /Month
DEXILANT DR 30 MG CAPSULE (dexlansoprazole)
PREVACID DR 15 MG SOLUTAB (lansoprazole)
68 Tablets or Capsules or Packet/Month
DEXILANT DR 60 MG CAPSULE (dexlansoprazole)
NEXIUM DR 10 MG PACKET (esomeprazole mag trihydrate)
NEXIUM DR 2.5 MG PACKET (esomeprazole magnesium)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

PROTON PUMP INHIBITOR
68 Tablets or Capsules or Packet/Month
NEXIUM DR 20 MG PACKET (esomeprazole mag trihydrate)
NEXIUM DR 40 MG PACKET (esomeprazole mag trihydrate)
NEXIUM DR 5 MG PACKET (esomeprazole magnesium)
omeprazole-bicarb 20-1,680 pkt (Example brand: ZEGERID)
omeprazole-bicarb 40-1,680 pkt (Example brand: ZEGERID)
PREVACID DR 30 MG SOLUTAB (lansoprazole)
PRILOSEC DR 10 MG SUSPENSION (omeprazole magnesium)
PRILOSEC DR 2.5 MG SUSPENSION (omeprazole magnesium)
PROTONIX 40 MG SUSPENSION (pantoprazole)
PULMONARY ARTERIAL HYPERTENSION
34 Tablets/Month
OPSUMIT (macitentan)
68 Tablets/Month
ADCIRCA (tadalafil)
ALYQ (tadalafil)
LETAIRIS (ambrisentan)
TRACLEER (bosentan)
UPTRAVI (selexipag)
102 Tablets/Month
ADEMPAS (riociguat)
SEDATIVE HYPNOTICS
10 Tablets/Month
zolpidem tartrate (Example brand: INTERMEZZO)
34 Tablets/Month
QUVIVIQ (daridorexant)
SKELETAL MUSCLE RELAXANTS
84 Tablets/Month
SOMA 250 MG TABLET (carisoprodol)
136 Tablets/Month
SOMA 350 MG TABLET (carisoprodol)
SOMATOSTATIN AGENTS
112 Tablets/Month

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

SOMATOSTATIN AGENTS
112 Tablets/Month
MYCAPSSA (octreotide)
STIMULANTS
136 Tablets, Capsules, or Patches/Month
(dexmethylphenidate hcl)
(methylphenidate hcl)
ADDERALL (dextroamphetamine/amphetamine)
ADDERALL XR (dextroamphetamine/amphetamine)
ADZENYS XR-ODT (amphetamine)
APTENSIO XR (methylphenidate hcl)
AZSTARYS (serdexmethylphenidate/dexmethylphenidate) (Limited to 34 units/claim)
CONCERTA (methylphenidate hcl)
COTEMPLA XR-ODT (methylphenidate)
DAYTRANA (methylphenidate hcl)
DEXEDRINE (dextroamphetamine sulfate)
dextroamphetamine sulfate er (Example brand: DEXEDRINE)
EVEKEO (amphetamine)
EVEKEO ODT (amphetamine)
FOCALIN (dexmethylphenidate hcl)
FOCALIN XR (dexmethylphenidate hcl)
JORNAY PM (methylphenidate er)
methamphetamine hcl (Example brand: DESOXYN)
methylphenidate er (Example brand: METADATE ER)
methylphenidate er (Example brand: METHYLIN)
methylphenidate er (la) (Example brand: RITALIN LA)
methylphenidate hcl (Example brand: METHYLIN CHEW)
methylphenidate hcl cd (Example brand: METADATE CD)
methylphenidate hcl er (cd) (Example brand: METADATE CD)
MYDAYIS (dextroamphetamine/amphetamine)
QUILLICHEW ER (methylphenidate hcl)
RELEXXII (methylphenidate hcl)
RELEXXII (methylphenidate)
RITALIN (methylphenidate hcl)

Quantity Limit Drugs and Diabetic Supplies

Effective Date: December 1, 2025

STIMULANTS
136 Tablets, Capsules, or Patches/Month
RITALIN LA (methylphenidate hcl)
VYVANSE (lisdexamfetamine dimesylate)
XELSTRYM (dextroamphetamine) (Limited to 34 units/claim)
ZENZEDI (dextroamphetamine sulfate)
STIMULANTS, RELATED AGENTS - WAKE PROMOTING
136 Tablets or Capsules/Month
NUVIGIL (armodafinil)
PROVIGIL (modafinil)
SUNOSI (solriamfetol)
Thrombopoietin Receptor Agonist
68 Tablets/Month
ALVAIZ (eltrombopag)
TOPICALANTICHOLINERGIC HYPERHIDROSIS AGENTS
60 ML/Month (1 bottle)
SOFDRA (sofpironium)
UTERINE DISORDER TREATMENTS
34 Tablets/Month
ORILISSA 150 MG TABLET (elagolix sodium)
68 Tablets/Month
ORILISSA 200 MG TABLET (elagolix sodium)
VAGINAL ESTROGEN PREPARATIONS
1 EA/3 Month (1 EA equals 1 vaginal ring)
ESTRING (estradiol)
FEMRING (estradiol acetate)