CDPHP® Medicare Advantage Drug Plans

CDPHP $o Medicare Rx (HMO)
CDPHP Choice Rx (HMO)
CDPHP Clear Rx (HMO)
CDPHP Group Medicare Rx (HMO)
CDPHP Group Medicare Rx (PPO)

A plan for life.

2026 Part B Pharmacy Drug List

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

This list was updated on 10/29/2025. For more recent information or other questions, please contact the Pharmacy Customer Care Center at 1-866-289-2319. TTY users should call 711. A representative is available 24 hours a day, seven days a week. Or, visit http://www.cdphp.com.

This document includes a list of Part B pharmacy drugs for our plan which is current as of 10/29/2025.

The information in the Requirements/Limits column tells you if CDPHP Medicare Advantage Drug Plans has any special requirements for coverage of your drug.

PA = Prior Authorization

QL = Quantity Limits (Specific quantity limits are listed in the Requirements/Limits column of the drug chart.)

AL = Age Limits

DME = Durable Medical Equipment

CY2026 CDPHP 5T MAPD PARTB LIST OF COVERED DRUGS (PDF)
(List of Covered Drugs)

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTINEOPLASTICS		
ALKYLATING AGENTS		
MELPHALAN	Part B Pharmacy Drug	
MYLERAN	Part B Pharmacy Drug	
temozolomide	Part B Pharmacy Drug	
ANTIMETABOLITES		
capecitabine	Part B Pharmacy Drug	
XELODA	Part B Pharmacy Drug	
ENZYME INHIBITORS		
ETOPOSIDE 50 MG CAP	Part B Pharmacy Drug	
HYCAMTIN (0.25 MG CAP, 1 MG CAP)	Part B Pharmacy Drug	
ANTIVIRALS		
ANTI-HIV AGENTS, INTEGRASE INHIBITORS (INSTI)		
APRETUDE	$0 Preventive Services	
ANTI-HIV AGENTS, OTHER		
YEZTUGO (300 MG TAB, 463.5 MG/1.5ML SOLUTION)	$0 Preventive Services	
ANTIVIRAL, CORONAVIRUS AGENTS		
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR	$0 Preventive Services	AL (At least 12 yrs old)
NUVAXOVID COVID-19 VACCINE	$0 Preventive Services	

You can find information on what the symbols and abbreviations on this table mean by going to page 1.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BLOOD GLUCOSE REGULATORS		
INSULINS		
FIASP PUMPCART	Part B Insulin	
BLOOD PRODUCTS AND MODIFIERS		
ANTICOAGULANTS		
HEPARIN NA (PORK) LOCK FLSH PF	Pharmacy DME	
heparin sodium (porcine) lock flush	Pharmacy DME	
ELECTROLYTES/MINERALS/METALS/VITAMINS		
ELECTROLYTE/MINERAL REPLACEMENT		
sodium chloride flush iv soln 0.9%	Pharmacy DME	
IMMUNOLOGICAL AGENTS		
VACCINES		
AFLURIA	$0 Preventive Services	
AFLURIA PRESERVATIVE FREE	$0 Preventive Services	
AFLURIA QUADRIVALENT	$0 Preventive Services	
CAPVAXIVE	$0 Preventive Services	
COMIRNATY	$0 Preventive Services	AL (At least 12 yrs old)
COMIRNATY 5-11 YEARS	$0 Preventive Services	
FLUAD	$0 Preventive Services	
FLUAD QUADRIVALENT	$0 Preventive Services	
FLUARIX	$0 Preventive Services	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FLUARIX QUADRIVALENT	$0 Preventive Services	
FLUBLOK	$0 Preventive Services	
FLUBLOK QUADRIVALENT	$0 Preventive Services	
FLUCELVAX	$0 Preventive Services	
FLUCELVAX QUADRIVALENT	$0 Preventive Services	
FLULAVAL	$0 Preventive Services	
FLULAVAL QUADRIVALENT	$0 Preventive Services	
FLUMIST	$0 Preventive Services	
FLUMIST QUADRIVALENT	$0 Preventive Services	
FLUZONE	$0 Preventive Services	
FLUZONE HIGH-DOSE	$0 Preventive Services	
FLUZONE HIGH-DOSE QUADRIVALENT	$0 Preventive Services	
FLUZONE QUADRIVALENT	$0 Preventive Services	
MNEXSPIKE	$0 Preventive Services	
MODERNA COVID-19 VAC 6M-11Y	$0 Preventive Services	AL (0.5 to 11 yrs old)
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSPENSION	$0 Preventive Services	
PFIZER COVID-19 VAC-TRIS 5-11Y	$0 Preventive Services	AL (5 to 11 yrs old)
PFIZER COVID-19 VAC-TRIS 6M-4Y	$0 Preventive Services	AL (0.5 to 4 yrs old)
PNEUMOVAX 23	$0 Preventive Services	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREVNAR 13	$0 Preventive Services	
PREVNAR 20	$0 Preventive Services	
SPIKEVAX	$0 Preventive Services	AL (At least 12 yrs old)
SPIKEVAX 6M-11Y	$0 Preventive Services	AL (0.5 to 11 yrs old)
VAXNEUVANCE	$0 Preventive Services	

MISCELLANEOUS THERAPEUTIC AGENTS

blood glucose calibration - liquid - high**	Diabetic Supplies	
blood glucose calibration - liquid - low**	Diabetic Supplies	
blood glucose calibration - liquid - normal**	Diabetic Supplies	
blood glucose calibration - liquid**	Diabetic Supplies	
blood glucose monitoring misc.**	Diabetic Supplies	
blood glucose monitoring supplies**	Diabetic Supplies	
insulin infusion pump - accessories**	Diabetic Supplies	
insulin infusion pump supplies - infusion set**	Diabetic Supplies	
insulin infusion pump supplies - reservoir**	Diabetic Supplies	
insulin infusion pump supplies**	Diabetic Supplies	
iv sets/tubing - kits**	Diabetic Supplies	
lancet devices**	Diabetic Supplies	
lancets kit**	Diabetic Supplies	

You can find information on what the symbols and abbreviations on this table mean by going to page 1.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
lancets misc.**	Diabetic Supplies	
lancets**	Diabetic Supplies	
multiple urine test strips**	Diabetic Supplies	
spacer/aerosol-holding chamber supplies - bags**	Pharmacy DME	
spacer/aerosol-holding chambers - device**	Pharmacy DME	
urine glucose monitoring supplies**	Diabetic Supplies	
urine glucose-ketones test strips**	Diabetic Supplies	
acetone (urine) test strip	Diabetic Supplies	
DEXCOM G6 RECEIVER	Pharmacy DME	QL (1 PER 365 OVER TIME)
DEXCOM G6 SENSOR	Pharmacy DME	QL (3 PER 30 DAYS)
DEXCOM G6 TRANSMITTER	Pharmacy DME	QL (1 PER 84 DAYS)
DEXCOM G7 RECEIVER	Pharmacy DME	QL (1 PER 365 OVER TIME)
DEXCOM G7 SENSOR	Pharmacy DME	QL (3 PER 30 DAYS)
FREESTYLE FREEDOM LITE	Diabetic Supplies	
FREESTYLE INSULINX TEST	Diabetic Supplies	QL (100 PER 30 DAYS)
FREESTYLE LIBRE 14 DAY READER	Pharmacy DME	QL (1 PER 365 OVER TIME)
FREESTYLE LIBRE 14 DAY SENSOR	Pharmacy DME	QL (2 PER 28 DAYS)
FREESTYLE LIBRE 2 PLUS SENSOR	Pharmacy DME	QL (2 PER 30 DAYS)
FREESTYLE LIBRE 2 READER	Pharmacy DME	QL (1 PER 365 OVER TIME)
FREESTYLE LIBRE 2 SENSOR	Pharmacy DME	QL (2 PER 28 DAYS)
FREESTYLE LIBRE 3 PLUS SENSOR	Pharmacy DME	QL (2 PER 28 DAYS)
FREESTYLE LIBRE 3 READER	Pharmacy DME	QL (1 PER 365 OVER TIME)

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FREESTYLE LIBRE 3 SENSOR	Pharmacy DME	QL (2 PER 28 DAYS)
FREESTYLE LITE TEST	Diabetic Supplies	QL (100 PER 30 DAYS)
FREESTYLE LITE W/DEVICE KIT	Diabetic Supplies	
FREESTYLE PRECISION NEO SYSTEM	Diabetic Supplies	
FREESTYLE PRECISION NEO TEST	Diabetic Supplies	QL (100 PER 30 DAYS)
FREESTYLE TEST	Diabetic Supplies	QL (100 PER 30 DAYS)
glucose urine test-(glucose oxidase) strip	Diabetic Supplies	
PRECISION XTRA BLOOD GLUCOSE	Diabetic Supplies	QL (100 PER 30 DAYS)
subcutaneous soft cannula 25 g x 0.71"	Diabetic Supplies	

You can find information on what the symbols and abbreviations on this table mean by going to page 1.

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*blood glucose calibration - liquid - low*** 5
*blood glucose calibration - liquid - normal*** 5
*blood glucose calibration - liquid*** 5
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*blood glucose monitoring supplies*** 5
*insulin infusion pump - accessories*** 5
*insulin infusion pump supplies - infusion set*** 5
*insulin infusion pump supplies - reservoir*** 5
*insulin infusion pump supplies*** 5
*iv sets/tubing - kits*** 5
*lancet devices*** 5
*lancets kit*** 5
*lancets misc.*** 6
*lancets*** 6
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AFLURIA QUADRIVALENT 3
APRETUDE 2

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CAPVAXIVE 3
COMIRNATY 3
COMIRNATY 5-11 YEARS 3

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YEZTUGO.....2