October 2026

NC Medicaid Preferred Drug List Formulary Changes

The North Carolina Department of Health and Human Services established the NC Medicaid Preferred Drug List (PDL) to allow NC Medicaid to ensure access to cost-efficient, medically appropriate drug therapies that maximize patient health outcomes for all beneficiaries. PDL updates occur quarterly. For more information about formulary changes, call Vaya Health's Pharmacy Service Line at **1-800-540-6083**, available 7 a.m.-6 p.m., Monday-Saturday.

To access the current PDL, visit the NC Medicaid Preferred Drug List webpage.

In addition to the changes listed below, NC Medicaid may implement off-cycle changes to the PDL due to changes in market availability or manufacturer participation in the Medicaid Drug Rebate Program. For more information about the NC Medicaid process for administering and reviewing the PDL, visit the Preferred Drug List Review Panel webpage.

Changes Effective Oct. 1, 2026

New additions to the non-preferred formulary:

- Tapentadol and Tapentadol ER Tablet (generic for Nucynta and Nucynta ER)
- Zybic Solution
- Milnacipran Tablet (generic for Savella)
- Relgaabi Capsule
- Brivaracetam Solution (generic for Briviact)
- Subvenite Suspension
- Pivya Tablet
- Arynta Solution
- Myqorzo Tablet
- Sdamlo Solution
- Cardamyst Nasal Spray
- Niacin Tablet
- Evkeeza IV
- Redemplo Syringe
- Tryngolza AutoInjector
- Tyruko IV
- Igalmi SL Tablet
- Ozempic Tablet
- Calphron Tablet
- Magnebind 400 Rx Tablet
- Neulasta Vial
- Byqlovi Drops
- Bosaya Syringe (biosimilar for Prolia)
- Ipratropium HFA (generic for Atrovent)
- Beclomethasone Inhaler (generic for Qvar)
- Halobetasol Lotion (generic for Ultravate)
- Avtozma Vial, Autoinjector, and Syringe
- Icotyde Tablet
- Orladeyo Pellet Pack
- Atmeksi Suspension
- Ontralfy Solution

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Preferred/non-preferred changes:

- Trileptal Suspension to Non-Preferred
- Lacosamide Solution to Preferred
- Zyvox Suspension to Preferred; Linezolid Suspension to Non-Preferred
- EES Suspension and Erythromycin EC Capsule to Non-Preferred
- Neomycin Tablet to Preferred
- Tinidazole Tablet to Preferred
- Vosevi Tablet to Non-Preferred
- Rimantadine Tablet to Non-Preferred
- Hemangeol Solution to Non-Preferred
- Praluent Pen to Preferred
- Novolog Penfill, Flexpen and Vial to Preferred
- Novolog Mix 70/30 Flexpen and Vial to Preferred
- Mounjaro to Preferred
- Wegovy HD to Preferred
- Foundayo Tablet to Preferred
- Zepbound Pen, Vial, and Kwikpen to Preferred
- Voquenza Tablet, Dual Pak, and Triple Pak to preferred
- Prucalopride Tablet (generic for Motegrity) to Preferred
- Mesalamine ER Capsule (generic for Apriso, Pentasa) to preferred
- Darifenacin ER tablet (generic for Enablex) to Preferred
- Trospium Tablet and ER Capsule (generic for Sanctura and Sanctura XR) to Preferred
- Eliquis Sprinkle and Suspension to Preferred
- Ketorolac Solution (generic for Acular LS) to Preferred
- Bildyos Syringe (biosimilar for Prolia) to Non-Preferred; Enoby Syringe (biosimilar for Prolia) to Preferred
- Albuterol HFA (generic for Ventolin HFA Inhaler) to non-preferred
- Mometasone Nasal Spray (generic for Nasonex) to Preferred
- Tretinoin Cream (generic for Retin-A) to Preferred
- Testosterone Gel Packet (generic for Vogelxo) to Preferred
- Clindessa Vaginal Cream to Non-Preferred; Xaciato Vaginal Gel to Preferred
- Spinosad Topical Solution (Generic for Natroba) to Preferred
- Vtama Cream to Preferred
- Tezspire Pen and Syringe to Preferred
- Xolair Autoinjector, Syringe, and Vial to Preferred
- Lynkuet Capsule to Preferred
- Takhzyro Vial to Preferred

New category on the PDL – glucagon agents

Preferred:

- Glucagon Emergency Kit
- Gvoke Pen, Syringe, and Kit
- Proglycem Oral Suspension

Non-preferred:

- Baqsimi Nasal Spray
- Diazoxide Oral Suspension
- Glucagon Emergency Kit (Manufacturer: Amphastar)
- Zegalogue Syringe and Autoinjector

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New category on the PDL – octreotide and related agents

Preferred:

- Octreotide Acetate Ampule and Syringe
- Sandostatin LAR Depot Vial

Non-preferred

- Lanreotide Acetate Syringe
- Mycapssa Capsule
- Octreotide Acetate Vial
- Palsonify Tablet
- Signifor and Signifor LAR Injection
- Somatuline Depot Injection

New category on the PDL – potassium binders

Preferred:

- Lokelma Powder
- SPS Suspension
- Sodium Polystyrene Sulfonate Powder (generic for Kionex, SPS Suspension)

Non-preferred

- Lokelma Unit Dose
- Kionex Suspension
- Veltassa Powder