CareFirst Medicare Advantage

Top 100 Prescription Drugs

Below is a list of the top 100 prescription drugs used by Medicare members in Maryland. If you don't see one of your prescriptions here, don't worry—this isn't a list of every drug covered by our plans.

This information applies to the CareFirst BlueCross BlueShield Advantage Essential (PPO) and CareFirst BlueCross BlueShield Advantage Complete (PPO). For a complete listing, prescription limitations and prior authorization requirements, go to **carefirst.com/medicareadvantage** or call **833-473-0394**. Please note, the coverage of prescription drugs is subject to change.

Drug Name	2026 Individual PPO Tiering
Albuterol Sulfate Hfa	3
Alendronate Sodium	1
Allopurinol	1
Alprazolam	2
Amlodipine Besylate	1
Amoxicillin	1
Amoxicillin-Clavulanate Potass	Tablet—2 or 3 Suspension—3 or 4
Arexvy	1
Aripiprazole	4
Atenolol	1
Atorvastatin Calcium	1
Azithromycin	Tablet—1 Suspension—3
Baclofen	2
Bupropion Xl	2
Buspirone Hcl	1 or 3
Carvedilol	1
Celecoxib	3
Cephalexin	Capsule—1 Suspension—3
Ciprofloxacin Hcl	1
Citalopram Hbr	Tablet - 1 Oral Solution—3
Clonazepam	2

Drug Name	2026 Individual PPO Tiering
Clonidine Hcl	1
Clopidogrel	1
Cyclobenzaprine Hcl	3
Diclofenac Sodium	Delayed Released Tablet—2 Extended Release Tablet—3 Oral Solution—2 or 3
Divalproex Sodium	Delayed Release Tablet—2 Extended Release Tablet—3 Capsule - 4
Donepezil Hcl	2
Doxycycline Hyclate	3
Duloxetine Hcl	3
Eliquis	3
Escitalopram Oxalate	Tablet—1 Oral Solution—4
Ezetimibe	2
Famotidine	Tablet—1 Suspension—4
Finasteride	1
Fluoxetine Hcl	Capsule—1 Oral Solution—3
Fluticasone Propionate	Nasal Suspension—2 Cream/Ointment—3
Furosemide	Tablet—1 Oral Solution—2
Gabapentin	Capsule/Tablet- 2 Oral Solution—3
Glimepiride	1
Glipizide	1
Hydralazine Hcl	1
Hydrochlorothiazide	1
Hydrocodone-Acetaminophen	Tablet—3 Suspension—4
Hydroxyzine Hcl	3
Ibuprofen	Tablet—1 Suspension—3
Januvia	3
Jardiance	3
Ketoconazole	Shampoo—2 Tablet/Cream—3

Drug Name	2026 Individual PPO Tiering
Lamotrigine	Tablet—1 Extended Release Tablet—4
Lantus Solostar	3
Latanoprost	1
Levetiracetam	Tablet—2 Extended Release Tablet—3 Oral Solution—3
Levothyroxine Sodium	2
Lisinopril	1
Lisinopril-Hydrochlorothiazide	1
Lorazepam	Tablet—2 Oral Solution—3
Losartan Potassium	1
Losartan-Hydrochlorothiazide	1
Meloxicam	1
Memantine Hcl	Tablet—3 Extended Release Capsule/Oral Solution—4
Metformin Hcl	1
Metformin Hcl Er	1
Methylprednisolone	Therapy Pack—2 Tablet—3
Metoprolol Succinate	1
Metoprolol Tartrate	1
Mirtazapine	2 or 3
Montelukast Sodium	1
Nifedipine Er	3
Nitrofurantoin Mono-Macro	3
Olanzapine	2
Olmesartan Medoxomil	1
Omeprazole	1
Oxycodone Hcl	Tablet—3 Oral Solution—4
Oxycodone-Acetaminophen	3
Ozempic	3
Pantoprazole Sodium	1
Potassium Chloride	Capsule or Tablet—2 Oral Solution—4
Pravastatin Sodium	1

Drug Name	2026 Individual PPO Tiering
Prednisone	Tablet—1 Therapy Pack—2 Oral Solution—4
Pregabalin	Capsule—3 Oral Solution—4
Quetiapine Fumarate	Tablet - 2 Extended Release Tablet—4
Risperidone	Tablet - 2 Oral Solution—3
Rosuvastatin Calcium	1
Sertraline Hcl	Tablet—1 Oral Solution—3
Shingrix	1
Simvastatin	1
Spironolactone	1
Sulfamethoxazole-Trimethoprim	Tablet—1 Suspension—3
Synthroid	4
Tamsulosin Hcl	1
Tizanidine Hcl	2
Tramadol Hcl	2
Trazodone Hcl	1
Trelegy Ellipta	3
Triamcinolone Acetonide	Cream/Ointment—2 Lotion/Dental Paste—3
Trulicity	3
Valsartan	1
Venlafaxine Hcl Er	Extended Release Capsule—2 Tablet—3
Warfarin Sodium	1
Xarelto	3
Zolpidem Tartrate	2

CareFirst BlueCross BlueShield Medicare Advantage is a PPO plan with a Medicare contract. Enrollment in CareFirst BlueCross BlueShield Medicare Advantage depends upon contract renewal.

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