

## MEDICARE PART D EXCLUDED DRUGS LIST 2024\_updated January 2024

**Reason: LIST** = multiple reasons it's excluded; "not covered under Part D law"

**Reason: Not properly listed with FDA** = CMS considers it best practice for Part D sponsors to consider the proper listing of a drug product with the FDA as a prerequisite for making a Part D drug coverage determination. The FDA is unable to provide regulatory status determinations through their regular processes if a drug product is not properly listed. Therefore, Part D sponsors should begin the drug coverage determination process by confirming that a prescription drug product national drug code (NDC) is properly listed with the FDA.

| Label Name                | Reason                       |
|---------------------------|------------------------------|
| 12-PANEL POC KIT TOXICOLO | Diagnostic Agent             |
| 1ST BASE CRE              | Bulk Ingredient              |
| 1ST MEDX-PTC PAD LIDOCAIN | Unapproved Drug              |
| 3ML GLAS SYR KIT NA HEPAR | Diagnostic Agent             |
| 5ML GLAS SYR KIT NA HEPAR | Diagnostic Agent             |
| 7T LIDO GEL 2%            | LIST                         |
| A.A.G.C KIT CRE TERODERM  | Not properly listed with FDA |
| ABANEU-SL SUB             | Vitamin/Mineral              |
| ABECMA INJ                | LIST                         |
| ACACIA EXTRA SOL 1:20     | Non-standardized allergenic  |
| ACACIA POLLN INJ 1:40     | LIST                         |
| ACCRUFER CAP 30MG         | LIST                         |
| ACCUCAINE INJ 1%          | LIST                         |
| ACCUA KIT COV-2           | Diagnostic Agent             |
| ACD FORMULA SOL A         | Blood Component              |
| ACESO AG PAD 4"X4"        | Surgical Supply/Medical      |
| ACIOXIAY CRE 15-4%        | Not properly listed with FDA |
| ACNESIC GEL 0.5%          | Not properly listed with FDA |
| ACTCT FLEX 3 PAD 4"X4"    | Not properly listed with FDA |
| ACTI ANTIMIC PAD 2"X2"    | Not properly listed with FDA |
| ACTI ANTIMIC PAD 4"X4"    | Not properly listed with FDA |
| ACTICOAT 7 PAD 2"X2"      | Not properly listed with FDA |
| ACTICOAT 7 PAD 4"X5"      | Not properly listed with FDA |
| ACTICOAT SUR PAD 4"X10"   | Surgical Supply/Medical      |
| ACTICOAT SUR PAD 4"X8"    | Surgical Supply/Medical      |
| ACTICOAT SUR PAD 4X13.75" | Surgical Supply/Medical      |
| ACTICOAT SUR PAD 4X4-3/4" | Surgical Supply/Medical      |
| ACTIVASE INJ 100MG        | LIST                         |
| ACTIVASE INJ 50MG         | LIST                         |
| ACTIVITE TAB              | Vitamin/Mineral              |
| ACUICYN SOL               | Not properly listed with FDA |
| ACUNOL TAB 600MG          | Unapproved Drug              |
| ACYCLOVIX PAK             | LIST                         |
| ADA SHA                   | Not properly listed with FDA |
| ADAINZDE GEL              | Not properly listed with FDA |
| ADAINZOXIA GEL            | Not properly listed with FDA |
| ADAPAL/BEN P PAD 0.1-2.5% | Unapproved Drug              |
| ADAPTADERM CRE            | Not properly listed with FDA |
| ADC/FLUORIDE DRO 0.5MG    | Vitamin/Mineral              |
| ADDYI TAB 100MG           | Sexual Dysfunction Agent     |
| ADENOCAINE INJ 40ML       | Not properly listed with FDA |
| ADENOSINE INJ 3MG/ML      | Diagnostic Agent             |
| ADENOSINE INJ 60/20ML     | Diagnostic Agent             |

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| ADENOSINE INJ 6MG/2ML    | Diagnostic Agent             |
| ADENOSINE INJ 90/30ML    | Diagnostic Agent             |
| ADIPEX-P CAP 37.5MG      | Anorexic, Anti-obesity Agent |
| ADIPEX-P TAB 37.5MG      | Anorexic, Anti-obesity Agent |
| ADRENAL C TAB FORMULA    | Vitamin/Mineral              |
| ADREVIEW INJ             | Diagnostic Agent             |
| ADTHYZA TAB 130MG        | Unapproved Drug              |
| ADTHYZA TAB 16.25MG      | Unapproved Drug              |
| ADTHYZA TAB 32.5MG       | Unapproved Drug              |
| ADTHYZA TAB 65MG         | Unapproved Drug              |
| ADTHYZA TAB 97.5MG       | Unapproved Drug              |
| ADUHELM INJ 170MG        | LIST                         |
| ADUHELM INJ 300MG        | LIST                         |
| ADV ALLERGY KIT COLLECTI | Not properly listed with FDA |
| ADVANCED MIS AM/PM       | Vitamin/Mineral              |
| ADVATE INJ 1000UNIT      | Blood Component              |
| ADVATE INJ 1500UNIT      | Blood Component              |
| ADVATE INJ 2000UNIT      | Blood Component              |
| ADVATE INJ 2500UNIT      | Blood Component              |
| ADVATE INJ 3000UNIT      | Blood Component              |
| ADVATE INJ 4000UNIT      | Blood Component              |
| ADVATE INJ 5000UNIT      | Blood Component              |
| ADYNOVATE INJ 1000UNIT   | Blood Component              |
| ADYNOVATE INJ 1500UNIT   | Blood Component              |
| ADYNOVATE INJ 2000UNIT   | Blood Component              |
| ADYNOVATE INJ 250UNIT    | Blood Component              |
| ADYNOVATE INJ 3000UNIT   | Blood Component              |
| ADYNOVATE INJ 500UNIT    | Blood Component              |
| ADYNOVATE INJ 750UNIT    | Blood Component              |
| AFLURIA QUAD INJ 2021-22 | Influenza vaccine            |
| AFLURIA QUAD INJ 2021-22 | Influenza vaccine            |
| AFLURIA QUAD INJ 2021-22 | Influenza vaccine            |
| AFLURIA QUAD INJ 2022-23 | Influenza vaccine            |
| AFLURIA QUAD INJ 2022-23 | Influenza vaccine            |
| AFLURIA QUAD INJ 2023-24 | Influenza vaccine            |
| AFLURIA QUAD INJ 2023-24 | Influenza vaccine            |
| AFSTYLA KIT 1000UNIT     | Blood Component              |
| AFSTYLA KIT 1500UNIT     | Blood Component              |
| AFSTYLA KIT 2000UNIT     | Blood Component              |
| AFSTYLA KIT 2500UNIT     | Blood Component              |
| AFSTYLA KIT 250UNIT      | Blood Component              |
| AFSTYLA KIT 3000UNIT     | Blood Component              |
| AFSTYLA KIT 500UNIT      | Blood Component              |

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| Label Name               | Reason  |
|--------------------------|---|
| AGONEAZE KIT 2.5-2.5%    | LIST  |
| AIRAVITE TAB             | Vitamin/Mineral                                       |
| AK-FLUOR INJ 10% OP      | Diagnostic Agent                                      |
| AK-FLUOR INJ 25% OP      | Diagnostic Agent                                      |
| ALADERM PLUS EMU         | Not properly listed with FDA                          |
| ALBUKED 25 INJ 25%       | Blood Component                                       |
| ALBUKED 5 INJ 5%         | Blood Component                                       |
| ALBUMIN HUM INJ 25%      | Blood Component                                       |
| ALBUMIN HUM INJ 5%       | Blood Component                                       |
| ALBUMINEX SOL 25%        | Blood Component                                       |
| ALBUMINEX SOL 5%         | Blood Component                                       |
| ALBUMIN-ZLB INJ          | Blood Component                                       |
| ALBUMIN-ZLB SOL 25%      | Blood Component                                       |
| ALBURX INJ 5%            | Blood Component                                       |
| ALBUTEIN INJ 25%         | Blood Component                                       |
| ALBUTEIN INJ 5%          | Blood Component                                       |
| ALCOHOL BASE GEL         | Not properly listed with FDA                          |
| ALCOH-WIPE MIS 12"X12"   | Not properly listed with FDA                          |
| ALDER EXTRAC SOL 1:20    | Non-standardized allergenic                           |
| ALEVAMAX CRE             | Not properly listed with FDA                          |
| ALEVICYN GEL             | Not properly listed with FDA                          |
| ALEVICYN SOL DERMAL      | Not properly listed with FDA                          |
| ALEVICYN SG GEL ANTIPRUR | Not properly listed with FDA                          |
| ALKERAN TAB 2MG          | Oral drug for cancer; infusion available under Part B |
| ALLEVYN AG MIS 6-3/4"    | Surgical Supply/Medical                               |
| ALLEVYN AG MIS 9"X9"SAC  | Surgical Supply/Medical                               |
| ALLEVYN AG PAD 2"X2"     | Surgical Supply/Medical                               |
| ALLEVYN AG PAD 3"X3"     | Not properly listed with FDA                          |
| ALLEVYN AG PAD 4"X4"     | Surgical Supply/Medical                               |
| ALLEVYN AG PAD 5"X5"     | Not properly listed with FDA                          |
| ALLEVYN AG PAD 6"X6"     | Surgical Supply/Medical                               |
| ALLEVYN AG PAD 7"X7"     | Not properly listed with FDA                          |
| ALLEVYN AG PAD 8"X8      | Surgical Supply/Medical                               |
| ALLEVYN GENT PAD 4"X4    | Not properly listed with FDA                          |
| ALLEVYN GENT PAD 8"X8"   | Not properly listed with FDA                          |
| ALMOND INJ EXTRACT       | Diagnostic Agent                                      |
| ALMOND EXT INJ 1:20      | Diagnostic Agent                                      |
| ALPAWASH OIN             | Not properly listed with FDA                          |
| ALPHA-LIPOIC SOL ACID    | Unapproved Drug                                       |
| ALPHANATE INJ 1000UNIT   | Blood Component                                       |
| ALPHANATE INJ 1500UNIT   | Blood Component                                       |
| ALPHANATE INJ 2000UNIT   | Blood Component                                       |
| ALPHANATE INJ 250 UNIT   | Blood Component                                       |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ALPHANATE INJ 500 UNIT    | Blood Component              |
| ALPHANINE SD INJ 1000UNIT | Blood Component              |
| ALPHANINE SD INJ 1500UNIT | Blood Component              |
| ALPHANINE SD INJ 500UNIT  | Blood Component              |
| ALPROLIX INJ 1000UNIT     | Blood Component              |
| ALPROLIX INJ 2000UNIT     | Blood Component              |
| ALPROLIX INJ 250UNIT      | Blood Component              |
| ALPROLIX INJ 3000UNIT     | Blood Component              |
| ALPROLIX INJ 4000UNIT     | Blood Component              |
| ALPROLIX INJ 500UNIT      | Blood Component              |
| ALPROSTADIL INJ 500MCG    | Erectile Dysfunction         |
| ALTADERM CRE BASE         | Not properly listed with FDA |
| ALTAFLUOR-BE SOL 0.25-0.4 | Diagnostic Agent             |
| ALTERNAR ALT INJ 1:20     | Diagnostic Agent             |
| ALTERNARIA SOL ALTERNAT   | Non-standardized allergenic  |
| ALTUVIIIIO INJ 1000UNIT   | Blood Component              |
| ALTUVIIIIO INJ 2000UNIT   | Blood Component              |
| ALTUVIIIIO INJ 250 UNIT   | Blood Component              |
| ALTUVIIIIO INJ 250UNIT    | Blood Component              |
| ALTUVIIIIO INJ 3000UNIT   | Blood Component              |
| ALTUVIIIIO INJ 4000UNIT   | Blood Component              |
| ALTUVIIIIO INJ 500UNIT    | Blood Component              |
| ALTUVIIIIO INJ 750IU      | Blood Component              |
| AMD FOAM PAD 4"X4"        | Not properly listed with FDA |
| AMER SYCAMOR INJ 1:20     | LIST                         |
| AMERICAN SOL BEECH        | Non-standardized allergenic  |
| AMERICAN SOL COCKROAC     | Non-standardized allergenic  |
| AMERICAN ELM INJ 1:20     | LIST                         |
| AMERICAN ELM SOL          | Non-standardized allergenic  |
| AMIDATE INJ 2MG/ML        | General Anesthetic           |
| AMINO PM RMS CAP          | Not properly listed with FDA |
| AMINOAM CAP RMS           | Not properly listed with FDA |
| AMINORELIEF CAP RMS       | Not properly listed with FDA |
| AMITRIPTYLIN CRE          | Not properly listed with FDA |
| AMITRIPTYLIN KIT 2%       | Bulk Ingredient              |
| AMLADEX TAB               | Multi-vitamin                |
| AMLODIPINE SUS 1MG/ML     | LIST                         |
| AMMONIA N 13 INJ          | Diagnostic Agent             |
| AMORPH WOUND GEL DRESSING | Not properly listed with FDA |
| AMYTAL SOD INJ 500MG      | Unapproved Drug              |
| AMYVID INJ                | Diagnostic Agent             |
| ANA-LEX KIT               | Unapproved Drug              |
| ANALPRAM HC CRE 2.5-1%    | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ANALPRAM-HC CRE 1-1%      | Unapproved Drug              |
| ANALPRAM-HC LOT 2.5%      | Unapproved Drug              |
| ANALPRM SNGL CRE HC 2.5-1 | Unapproved Drug              |
| ANASCORP INJ              | LIST                         |
| ANASPAZ TAB 0.125MG       | Unapproved Drug              |
| ANAVIP INJ                | Antivenin                    |
| ANECTINE INJ 200/10ML     | LIST                         |
| ANECTINE INJ 20MG/ML      | LIST                         |
| ANESTHESIA KIT S/I-40A    | General Anesthetic           |
| ANESTHESIA KIT S/I-40H    | General Anesthetic           |
| ANHYDROUS CRE BASE        | Not properly listed with FDA |
| ANHYDROUS OIN BASE        | Not properly listed with FDA |
| ANODYNE LPT KIT 2.5-2.5%  | LIST                         |
| ANTICOAGULNT INJ SOD CITR | Unapproved Drug              |
| ANTIPRURITIC GEL          | Not properly listed with FDA |
| ANTIVENIN KIT LAT MACT    | LIST                         |
| ANTIVENIN NA INJ CORAL SN | LIST                         |
| ANUCORT-HC SUP 25MG       | Not properly listed with FDA |
| ANUSOL-HC SUP 25MG        | Unapproved Drug              |
| APLISOL INJ 5/0.1ML       | Diagnostic Agent             |
| APP SLIM RMS CAP          | Not properly listed with FDA |
| APPLE INJ EXTRACT         | Diagnostic Agent             |
| APPLE EXT INJ 1:40        | Diagnostic Agent             |
| APRIZIO PAK KIT           | LIST                         |
| APRIZIO PAK KIT II        | LIST                         |
| AP-ZEL TAB                | Vitamin/Mineral              |
| AQUACEL FOAM PAD 5"X5"    | LIST                         |
| AQUACEL FOAM PAD 7"X7"    | LIST                         |
| AQUASOL A INJ 50000/ML    | Vitamin/Mineral              |
| AQUASTAT SOL 0.9%         | Surgical Supply/Medical      |
| AQUASTAT SFR SOL 0.9%     | Surgical Supply/Medical      |
| AQUORAL SPR               | Not properly listed with FDA |
| ARIDA GEL                 | Surgical Supply/Medical      |
| ARIDOL KIT                | Diagnostic Agent             |
| ARIZONA INJ CYPRESS       | Non-standardized allergenic  |
| ARMOUR THYRO TAB 120MG    | Unapproved Drug              |
| ARMOUR THYRO TAB 15MG     | Unapproved Drug              |
| ARMOUR THYRO TAB 180MG    | Unapproved Drug              |
| ARMOUR THYRO TAB 240MG    | Unapproved Drug              |
| ARMOUR THYRO TAB 300MG    | Unapproved Drug              |
| ARMOUR THYRO TAB 30MG     | Unapproved Drug              |
| ARMOUR THYRO TAB 60MG     | Unapproved Drug              |
| ARMOUR THYRO TAB 90MG     | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ARNICA TIN FLOWER         | Unapproved Drug              |
| ARNICA LG LIQ             | Unapproved Drug              |
| ARTICADENT INJ DENTAL     | LIST                         |
| ARTICADENT INJ DENTAL     | LIST                         |
| ARTISS KIT 2ML            | LIST                         |
| ARZOL SILVER MIS NITR APP | Unapproved Drug              |
| ASCLERA INJ 0.5%          | LIST                         |
| ASCLERA INJ 1%            | LIST                         |
| ASCOR SOL 25000MG         | Vitamin/Mineral              |
| ASCORBIC ACD INJ 500MG/ML | Vitamin/Mineral              |
| ASCORBIC ACI SOL 500MG/ML | Unapproved Drug              |
| ASILNASAL CAP RMS         | Not properly listed with FDA |
| ASPEN POLLEN INJ 1:20     | Non-standardized allergenic  |
| ASPERG FUMIG INJ 1:20     | Diagnostic Agent             |
| ASPERGILLUS INJ 1:10      | Non-standardized allergenic  |
| ASPERGILLUS INJ 1:20      | Diagnostic Agent             |
| ASPERGILLUS INJ SOLN 1:20 | Non-standardized allergenic  |
| ASPYRERX MIS              | Not properly listed with FDA |
| ASTAMED MYO CAP           | Not properly listed with FDA |
| ASTERO GEL 4%             | Not properly listed with FDA |
| ASTRINGYN SOL 259MG/GM    | Not properly listed with FDA |
| ATABEX EC TAB 29-1MG      | Vitamin/Mineral              |
| ATABEX OB TAB 29-1MG      | Vitamin/Mineral              |
| ATENOLOL SUS 1MG/ML       | Not properly listed with FDA |
| ATLANTIC COD INJ 1:20     | Diagnostic Agent             |
| ATOPADERM CRE             | Device                       |
| ATOPA VO EMU              | Surgical Supply/Medical      |
| ATOPICLAIR CRE            | Device                       |
| ATRACURIUM INJ 10MG/ML    | LIST                         |
| ATRACURIUM INJ 10MG/ML    | LIST                         |
| ATRACURIUM INJ 50MG/5ML   | LIST                         |
| ATRAPRO GEL HYDROGEL      | Device                       |
| ATRAPRO CP KIT            | Not properly listed with FDA |
| ATRAPRO DERM SPR          | Not properly listed with FDA |
| ATREVIS CRE               | Not properly listed with FDA |
| ATROPINE SUL INJ 0.4MG/ML | Unapproved Drug              |
| ATROPINE SUL INJ 1.2/3ML  | Unapproved Drug              |
| ATROPINE SUL INJ 1MG/ML   | Unapproved Drug              |
| ATROPINE SUL OIN 1% OP    | Unapproved Drug              |
| AUREOBASIDIU INJ 1:20     | Diagnostic Agent             |
| AUREOBASIDIU SOL 1:20     | Non-standardized allergenic  |
| AUXIPRO CRE VANISHIN      | Not properly listed with FDA |
| AVAILNEX CHW 750MG        | Not properly listed with FDA |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| AVAR PAD 9.5-5%           | Unapproved Drug              |
| AVAR CLEANSE EMU 10-5%    | Unapproved Drug              |
| AVAR LS LIQ 10-2%         | Unapproved Drug              |
| AVAR LS PAD 10-2%         | Unapproved Drug              |
| AVAR-E EMOLL CRE 10-5%    | Unapproved Drug              |
| AVAR-E GREEN CRE 10-5%    | Unapproved Drug              |
| AVAR-E LS CRE 10-2%       | Unapproved Drug              |
| AVEIDAOXIA GEL            | Not properly listed with FDA |
| AVENOVA SOL 0.01%         | Not properly listed with FDA |
| AVIDOXY DK KIT            | Not properly listed with FDA |
| AVO CREAM EMU             | Surgical Supply/Medical      |
| AVOCADO INJ EXTRACT       | Diagnostic Agent             |
| AXONA POW                 | Medical Food                 |
| AXUMIN INJ                | Diagnostic Agent             |
| AZADROX GEL               | Surgical Supply/Medical      |
| AZALGIA CAP               | Dietary Supplement           |
| AZESCO TAB 13-1MG         | Vitamin/Mineral              |
| AZUPHEN MB CAP 120MG      | Unapproved Drug              |
| B & C OIN                 | Device                       |
| B-12 COMP KIT 1000MCG     | Vitamin/Mineral              |
| BACLOFEN CRE              | Not properly listed with FDA |
| BACLOFEN CRE 1%           | Bulk Ingredient              |
| BACMIN TAB                | Vitamin/Mineral              |
| BACTER WATER INJ BENZ ALC | Unapproved Drug              |
| BAHIA SOL EXTRACT         | Non-standardized allergenic  |
| BAL SALT SOL OP           | LIST                         |
| BALD CYPRESS INJ 1:20     | Non-standardized allergenic  |
| BALFAXAR INJ 1000IU       | Blood Component              |
| BALFAXAR INJ 500IU        | Blood Component              |
| BALSAM PERU OIN CASTOR    | Device                       |
| BANANA INJ EXTRACT        | Diagnostic Agent             |
| BANANA EXT INJ 1:40       | Diagnostic Agent             |
| BANDAGE ROLL MIS 4.5"X3YD | Not properly listed with FDA |
| BARIUM POW SULFATE        | Diagnostic Agent             |
| BARLEY EXT INJ 1:20       | Diagnostic Agent             |
| BASADROX GEL              | Surgical Supply/Medical      |
| BASE CRE LIPOSOME         | Bulk Ingredient              |
| BASE W301 CRE             | Not properly listed with FDA |
| BAYBERRY WAX SOL MYR EXTR | Non-standardized allergenic  |
| B-COMPLEX INJ             | Vitamin/Mineral              |
| B-COMPLEX INJ 100         | Vitamin/Mineral              |
| B-COMPLEX INJ HYDRXCB     | Vitamin/Mineral              |
| BD POSIFLUSH INJ 0.9%     | Not properly listed with FDA |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| BD POSIFLUSH INJ 3ML      | Surgical Supply/Medical      |
| BD VERITOR KIT COV/FLU    | Diagnostic agent             |
| BD VERITOR KIT SARSCOV2   | Diagnostic Agent             |
| BD VERITOR KIT STREP A    | Diagnostic agent             |
| BEAU RX GEL               | Not properly listed with FDA |
| BEBTELOVIMAB SOL 175/2ML  | Not properly listed with FDA |
| BEE VENOM INJ 1300MCG     | Non-standardized allergenic  |
| BEE VENOM INJ 550MCG      | Non-standardized allergenic  |
| BEEF EXTRACT INJ 1:10     | Diagnostic Agent             |
| BEEF EXTRACT INJ 1:20     | Diagnostic Agent             |
| BELLA/OPIUM SUP 16.2-30   | Unapproved Drug              |
| BELLA/OPIUM SUP 16.2-60   | Unapproved Drug              |
| BENEFIX INJ 1000UNIT      | Blood Component              |
| BENEFIX INJ 2000UNIT      | Blood Component              |
| BENEFIX INJ 250UNIT       | Blood Component              |
| BENEFIX INJ 3000UNIT      | Blood Component              |
| BENEFIX INJ 500UNIT       | Blood Component              |
| BENSAL HP OIN             | Unapproved Drug              |
| BENZ PER FOR LOT HC 7.5-1 | Not properly listed with FDA |
| BENZ PER- HC LOT 5-0.5%   | Not properly listed with FDA |
| BENZ PEROXID GEL 6.5%     | Not properly listed with FDA |
| BENZAC AC LIQ 5% WASH     | Unapproved Drug              |
| BENZALKONIUM SOL 50%      | Unapproved Drug              |
| BENZALKONIUM SOL NF       | Not properly listed with FDA |
| BENZEPRO AER 5.2%         | Not properly listed with FDA |
| BENZEPRO AER 5.3%         | Unapproved Drug              |
| BENZEPRO AER 9.7%         | Not properly listed with FDA |
| BENZEPRO LIQ 6.8%         | Not properly listed with FDA |
| BENZEPRO LIQ CREAMY       | Unapproved Drug              |
| BENZEPRO MIS 5.8%         | Not properly listed with FDA |
| BENZEPRO MIS 6%           | Unapproved Drug              |
| BENZEPRO SC AER 9.8%      | Unapproved Drug              |
| BENZODOX 30 MIS           | Unapproved Drug              |
| BENZODOX 60 MIS           | Unapproved Drug              |
| BENZOIN TIN NF            | Unapproved Drug              |
| BENZOIN CMPD TIN          | Unapproved Drug              |
| BENZONATATE CAP 100MG     | Cough/Cold                   |
| BENZONATATE CAP 150MG     | Cough/Cold                   |
| BENZONATATE CAP 200MG     | Cough/Cold                   |
| BENZOYL PER AER 9.8%      | Unapproved Drug              |
| BENZOYL PERO GEL 8%       | Not properly listed with FDA |
| BENZOYL PERX LIQ 6.9%     | Not properly listed with FDA |
| BENZPHETAMIN TAB 50MG     | Anorexic, Anti-obesity Agent |



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|---------------------------|------------------------------|
| BERMUDA SOL GRASS         | Non-standardized allergenic  |
| BERMUDA GRAS INJ 10000BAU | LIST                         |
| BETA 1 KIT KIT 30MG/5ML   | LIST                         |
| BETALIDO KIT              | LIST                         |
| BETALOAN SUI INJ 3-3MG/ML | LIST                         |
| BETAMETH SOD INJ 12MG/2ML | Unapproved Drug              |
| BETAMETH SOD INJ 6MG/ML   | Unapproved Drug              |
| BEVACIZUMAB INJ 1.25MG    | Not properly listed with FDA |
| BEVACIZUMAB INJ 2.5/1ML   | Not properly listed with FDA |
| BEVACIZUMAB INJ 2/0.08ML  | Not properly listed with FDA |
| BEVACIZUMAB INJ 3.25/.13  | Not properly listed with FDA |
| BEVACIZUMAB INJ 3.75/.15  | Not properly listed with FDA |
| BIAFINE EMU               | Surgical Supply/Medical      |
| BI-EST 50:50 MICRO CRE    | Not properly listed with FDA |
| BIIFENAC MIS 1000 KIT     | LIST                         |
| BIIFENAC 500 MIS KIT      | LIST                         |
| BILAC CAP                 | Dietary Supplement           |
| BIMATOPROST SOL 0.03%     | Cosmetic                     |
| BI-MIX INJ 150-5MG        | Erectile Dysfunction         |
| BINAXNOW KIT COVID-19     | Diagnostic Agent             |
| BIO GLO TES 1MG OP        | Diagnostic Agent             |
| BIOCEL TAB                | Vitamin/Mineral              |
| BIOGRD ISLND PAD 4"X10"   | Not properly listed with FDA |
| BIOGRD ISLND PAD 4"X14"   | Not properly listed with FDA |
| BIOGRD ISLND PAD 4"X5"    | Not properly listed with FDA |
| BIONECT AER 0.2%          | Surgical Supply/Medical      |
| BIONECT CRE 0.2%          | Surgical Supply/Medical      |
| BIONECT GEL 0.2%          | Surgical Supply/Medical      |
| BIOPAR DELTA CAP FORTE    | Multi-vitamin                |
| BIOPEPTIDE CRE BASE       | Not properly listed with FDA |
| BIPOL SOROKI INJ 1:20     | Non-standardized allergenic  |
| BIPOL SOROKI INJ 1:20     | Diagnostic Agent             |
| BLACK WALNUT INJ 1:10     | Non-standardized allergenic  |
| BLACK WALNUT INJ 1:20     | Non-standardized allergenic  |
| BLACK WALNUT INJ 20000PNU | Non-standardized allergenic  |
| BLACK WALNUT INJ 40000PNU | Non-standardized allergenic  |
| BLACK WILLOW INJ 1:20     | Non-standardized allergenic  |
| BLACK/SWEET INJ BIRCH     | Non-standardized allergenic  |
| BLANCHE CRE 4%            | Cosmetic                     |
| BLUDIGO INJ 8MG/ML        | Diagnostic Agent             |
| BLUE CRAB INJ 1:20        | Diagnostic Agent             |
| BOCASAL POW               | Not properly listed with FDA |
| BONE MARROW KIT BIOPSY    | Not properly listed with FDA |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| BORIC ACID GRA            | Bulk Ingredient              |
| BOTOX COSMET INJ 100UNIT  | Cosmetic                     |
| BOTOX COSMET INJ 50UNIT   | Cosmetic                     |
| BOTRYTIS EXT SOL 1:10     | LIST                         |
| BOX ELDER INJ 1:20        | Non-standardized allergenic  |
| BP 10-1 EMU               | Unapproved Drug              |
| BP CLEANSING EMU 10-4%    | Unapproved Drug              |
| BP VIT 3 CAP              | Vitamin/Mineral              |
| BP WASH LIQ 2.5%          | Unapproved Drug              |
| BP WASH LIQ 7%            | Unapproved Drug              |
| BPCO OIN                  | Not properly listed with FDA |
| B-PLEX TAB                | Vitamin/Mineral              |
| B-PLEX PLUS TAB           | Vitamin/Mineral              |
| BPM TAB 6MG               | Unapproved Drug              |
| BPM PSEUDO TAB 6-45MG     | Unapproved Drug              |
| BPM-PSE-DM SYP 2-30-10    | LIST                         |
| BRAZIL NUT INJ 1:20       | Diagnostic Agent             |
| BREVITAL SOD INJ 500MG    | General Anesthetic           |
| BREYANZI INJ              | LIST                         |
| BROM/PSE/DM SYP           | Cough/Cold                   |
| BROM/PSE/DM SYP 2/30/10   | LIST                         |
| BROM/PSE/DM SYP 2/30/10   | LIST                         |
| BROM/PSE/DM SYP 2-30-10   | Not properly listed with FDA |
| BROME SOL 1:20            | Non-standardized allergenic  |
| BROMFED DM SOL 2-30-10    | LIST                         |
| BROWN SHRIMP INJ 1:20     | Diagnostic Agent             |
| BSP 0820 KIT              | LIST                         |
| BSS SOL OP                | LIST                         |
| BSS PLUS SOL OP           | LIST                         |
| BUPIV/DEXTRO INJ SPINAL   | LIST                         |
| BUPIVAC HCL INJ 0.125%    | Unapproved Drug              |
| BUPIVAC/NACL INJ          | Not properly listed with FDA |
| BUPIVACA/D5W INJ /SPINAL  | LIST                         |
| BUPIVACAINE INJ DEXAMETH  | Not properly listed with FDA |
| BUPIVACAINE INJ SPINAL    | LIST                         |
| BUPIVACAINE/ INJ EPI 0.25 | LIST                         |
| BUPIVACAINE/ INJ EPI 0.25 | LIST                         |
| BUPIVACAINE/ INJ EPI 0.5% | LIST                         |
| BUPIVACAINE/ INJ EPI 0.5% | LIST                         |
| BUPIVILOG KIT             | LIST                         |
| BYFAVO INJ 20MG           | General Anesthetic           |
| CA ALGINATE MIS 12" ROPE  | Unapproved Drug              |
| CA ALGINATE PAD 2"X2"     | Unapproved Drug              |

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| Label Name                | Reason  |
|---------------------------|---|
| CA ALGINATE PAD 4"X4"     | Unapproved Drug   |
| CA ALGINATE PAD 4"X8"     | Unapproved Drug   |
| CADIRAMD KIT              | Unapproved Drug   |
| CAFFEINE/SOD INJ BENZOATE | Unapproved Drug   |
| CALCIFOL WAF              | Vitamin/Mineral   |
| CALCIUM GLUC INJ 1000/10  | not properly listed with FDA                              |
| CALCIUM-FA WAF PLUS D     | Vitamin/Mineral   |
| CALI PEPPER INJ TREE      | Non-standardized allergenic                               |
| CALSODORE KIT 0.005%      | LIST  |
| CALSODORE PAK 0.005-5%    | Unapproved Drug   |
| CAM PRO COMP BAR GLYTACTI | Not properly listed with FDA                              |
| CANDIDA INJ ALBICANS      | Diagnostic Agent  |
| CANDIDA ALBI SOL 100MG/ML | Non-standardized allergenic                               |
| CANDIN INJ                | Diagnostic Agent  |
| CANTALOUPE INJ EXTRACT    | Diagnostic Agent  |
| CANVAS DX MIS AUTISM      | Not properly listed with FDA                              |
| CAPECITABINE TAB 150MG    | Covered under Part B; oral drug only indicated for cancer |
| CAPECITABINE TAB 500MG    | Covered under Part B; oral drug only indicated for cancer |
| CAPSFENAC PAK             | LIST  |
| CAPSINAC PAK              | LIST  |
| CAPSULE #0 CAP VEG        | Not properly listed with FDA                              |
| CAPSULE #0 CAP VEGGIE     | Not properly listed with FDA                              |
| CAPSULE #1 CAP VEG        | Not properly listed with FDA                              |
| CAPSULE #1 CAP VEGGIE     | Not properly listed with FDA                              |
| CAPSULE #3 CAP VEG        | Not properly listed with FDA                              |
| CAPSULE #3 CAP VEGGIE     | Not properly listed with FDA                              |
| CAPSULE 0 CAP CLR DR      | Unapproved Drug   |
| CAPSULE CONI CAP -SN #000 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #0 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #0 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #1 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #1 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #2 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #3 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #3 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP #4 | Unapproved Drug   |
| CAPSULE CONI CAP -SNAP#00 | Unapproved Drug   |
| CAPSULE EZFT CAP #0       | Not properly listed with FDA                              |
| CAPSULE EZFT CAP #00      | Not properly listed with FDA                              |
| CARBOGEL GEL 940          | Bulk Ingredient   |
| CARBOHOL GEL 940          | Bulk Ingredient   |
| CARBOMER GEL AQUEOUS      | Bulk Ingredient   |
| CARBOMER GEL HYDROALC     | Bulk Ingredient   |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| CARDIOLITE KIT            | Diagnostic Agent             |
| CARDIOPL IND SOL 4:1      | Not properly listed with FDA |
| CARDIOPL IND SOL 8:1      | Not properly listed with FDA |
| CARDIOPL IND SOL LOW DEX8 | Not properly listed with FDA |
| CARDIOPL IND SOL NON-EN 8 | Not properly listed with FDA |
| CARDIOPL IND SOL PLASMA 4 | Not properly listed with FDA |
| CARDIOPL IND SOL PLS/TROM | Not properly listed with FDA |
| CARDIOPL MN SOL 8:1       | Not properly listed with FDA |
| CARDIOPL MN SOL PLS/TROM  | Not properly listed with FDA |
| CARDIOPL REP SOL 4:1      | Not properly listed with FDA |
| CARDIOPL MN SOL LOW TROM  | Not properly listed with FDA |
| CARDIOPLEGI SOL DEL NIDO  | LIST                         |
| CARDIOPLEGIA SOL MAIN 4:1 | Not properly listed with FDA |
| CARDIOPLEGIC SOL          | LIST                         |
| CARDIOTEK-RX TAB          | Vitamin/Mineral              |
| CARVYKTI INJ              | LIST                         |
| CASGEVY INJ               | LIST                         |
| CASHEW NUT INJ 1:20       | Diagnostic Agent             |
| CAT HAIR SOL EXTRACT      | Non-standardized allergenic  |
| CAT HAIR EXT INJ 10000BAU | LIST                         |
| CAT HAIR EXT INJ 5000BAU  | LIST                         |
| CATHFLO ACTI INJ 2MG      | LIST                         |
| CATTLE EPITH SOL 1:20     | Non-standardized allergenic  |
| CAVERJECT INJ 40MCG       | Erectile Dysfunction         |
| CAVERJECT KIT 20MCG       | Erectile Dysfunction         |
| CAVERJECT IM KIT 10MCG    | Erectile Dysfunction         |
| CAYA DPR                  | Not properly listed with FDA |
| CEDAR ELM INJ 1:20        | Non-standardized allergenic  |
| CELACYN GEL               | Not properly listed with FDA |
| CELERY EXT INJ 1:40       | Diagnostic Agent             |
| CEM-UREA SOL 45%          | Unapproved Drug              |
| CENFOL TAB                | Vitamin/Mineral              |
| CENTANY AT KIT 2%         | LIST                         |
| CERACADE EMU              | Not properly listed with FDA |
| CERAMAX CRE               | Not properly listed with FDA |
| CERAMAX LOT               | Not properly listed with FDA |
| CEREFOLIN TAB             | Vitamin/Mineral              |
| CEREFOLIN TAB NAC         | Vitamin/Mineral              |
| CEREFOLIN TAB NAC         | Vitamin/Mineral              |
| CERTEC INJ                | Diagnostic Agent             |
| CERIANNA SOL 4-100        | Diagnostic Agent             |
| CEROVEL LOT 40%           | Unapproved Drug              |
| CERVICAL MIS SPECIMEN     | Diagnostic Agent             |

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| Label Name   | Reason  |
|--|---|
| CETACAINE AER  | Unapproved Drug   |
| CETACAINE GEL 2-2-14%  | Unapproved Drug   |
| CETACAINE LIQ 2-2-14%  | Unapproved Drug   |
| CETRORELIX INJ 0.25MG  | Fertility Agent   |
| CETRORELIX KIT 0.25MG  | Fertility Agent   |
| CETROTIDE KIT 0.25MG   | Fertility Agent   |
| CHERRY SYP   | Bulk Ingredient   |
| CHICKEN MEAT INJ 1:20  | Diagnostic Agent  |
| CHICKEN MEAT INJ EXTRACT   | Diagnostic Agent  |
| CHIRHOSTIM SOL 16MCG   | Diagnostic Agent  |
| CHLOHUX SHA 0.05-2%  | Not properly listed with FDA  |
| CHLOOXIA CRE   | Not properly listed with FDA  |
| CHLOOXIA OIN   | Not properly listed with FDA  |
| CHLOOXIA SOL   | Not properly listed with FDA  |
| CHLORHEX GLU SOL 20%   | Bulk Ingredient   |
| CHOLECAL DF TAB  | Dietary Supplement  |
| CHOLESTEROL TES & LIPID  | Diagnostic Agent  |
| CHOLETEC INJ   | Diagnostic Agent  |
| CHROMIUM CL INJ 4MCG/ML  | Not properly listed with FDA  |
| CHRYSADERM CRE DAY   | Not properly listed with FDA  |
| CHRYSADERM CRE NIGHT   | Not properly listed with FDA  |
| CIALIS TAB 10MG  | Erectile Dysfunction  |
| CIALIS TAB 2.5MG* [Coverable for Benign Prostatic Hyperplasia (BPH) diagnosis only.] | Erectile Dysfunction [only coverable for diagnosis of Benign Prostatic Hyperplasia (BPH)] |
| CIALIS TAB 20MG  | Erectile Dysfunction  |
| CIALIS TAB 5MG* [Coverable for Benign Prostatic Hyperplasia (BPH) diagnosis only.]   | Erectile Dysfunction [only coverable for diagnosis of Benign Prostatic Hyperplasia (BPH)] |
| CICLODAN SOL KIT 8%  | LIST  |
| CICLOPIROX KIT 8%  | Unapproved Drug   |
| CIFEREX CAP  | Unapproved Drug   |
| CISATRACURIU INJ 10MG/5ML  | LIST  |
| CISATRACURIU INJ 10MG/ML   | LIST  |
| CISATRACURIU INJ 20/10ML   | LIST  |
| CISATRACURIU INJ 200/20ML  | LIST  |
| CISATRACURIU INJ 2MG/ML  | Not properly listed with FDA  |
| CITRANATAL CAP HARMONY   | Vitamin/Mineral   |
| CITRANATAL CAP HARMONY   | Vitamin/Mineral   |
| CITRANATAL CAP HARMONY   | Vitamin/Mineral   |
| CITRANATAL CAP MEDLEY  | Vitamin/Mineral   |
| CITRANATAL MIS   | Vitamin/Mineral   |
| CITRANATAL MIS 90 DHA  | Vitamin/Mineral   |
| CITRANATAL MIS B-CALM  | Vitamin/Mineral   |
| CITRANATAL PAK ASSURE  | Vitamin/Mineral   |
| CITRANATAL PAK DHA   | Vitamin/Mineral   |
| CITRANATAL PAK ESSENCE   | Vitamin/Mineral   |

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| Label Name              | Reason                       |
|-------------------------|------------------------------|
| CITRANATAL TAB BLOOM    | Vitamin/Mineral              |
| CITRANATAL TAB RX       | Vitamin/Mineral              |
| CITRULLINE TAB EASY 1GM | Not properly listed with FDA |
| CLADO SPHAER INJ 1:20   | Non-standardized allergenic  |
| CLADO SPHAER INJ 1:20   | Diagnostic Agent             |
| CLADOSPORIUM INJ 1:20   | Non-standardized allergenic  |
| CLAM EXTRACT INJ 1:20   | Diagnostic Agent             |
| CLARISCAN INJ 10MMOL    | Diagnostic Agent             |
| CLARISCAN INJ 2.5MMOL   | Diagnostic Agent             |
| CLARISCAN INJ 50MMOL    | Diagnostic agent             |
| CLARISCAN INJ 5MMOL     | Diagnostic Agent             |
| CLARISCAN INJ 7.5MMOL   | Diagnostic Agent             |
| CLENIA PLUS SUS 9-4.25% | Unapproved Drug              |
| CLINDACIN KIT ETZ 1%    | LIST                         |
| CLINDACIN KIT PAC 1%    | LIST                         |
| CLINDAVIX KIT           | LIST                         |
| CLINOIN CRE             | Not properly listed with FDA |
| CLINPRO 5000 PST 1.1%   | Unapproved Drug              |
| CLOBETAVIX KIT 0.05%    | LIST                         |
| CLOBETEX PAK            | LIST                         |
| CLODAN KIT 0.05%        | LIST                         |
| CLOMID TAB 50MG         | Fertility Agent              |
| CLOMIPHENE TAB 50MG     | Fertility Agent              |
| C-NATE DHA CAP 28-1-200 | Vitamin/Mineral              |
| COAGADEX INJ 250UNIT    | Blood Component              |
| COAGADEX INJ 500UNIT    | Blood Component              |
| COAL TAR SOL 20%        | Not properly listed with FDA |
| COCKLEBUR EX SOL 1:20   | Non-standardized allergenic  |
| COCKROACH INJ 1:20      | Non-standardized allergenic  |
| COCKROACH INJ 1:20      | Diagnostic Agent             |
| COCOA BEAN INJ EXTRACT  | Diagnostic Agent             |
| COCONUT EXT INJ 1:20    | Diagnostic Agent             |
| COD LIVER OIL           | Vitamin/Mineral              |
| COENZYME INJ Q-10       | Unapproved Drug              |
| COLCIGEL GEL            | Unapproved Drug              |
| COLLANEX POW            | LIST                         |
| COLLATYL GEL            | Device                       |
| COLLODION LIQ FLEXIBLE  | Not properly listed with FDA |
| COMIRNATY INJ 30/0.3ML  | LIST                         |
| COMPLETE NAT PAK DHA    | Vitamin/Mineral              |
| COMPLETENATE CHW        | Vitamin/Mineral              |
| CO-NATAL FA TAB 29-1MG  | Vitamin/Mineral              |
| CONCENTRATE CRE         | Not properly listed with FDA |

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| Label Name   | Reason                       |
|--|------------------------------|
| CONCEPT DHA CAP  | Vitamin/Mineral              |
| CONCEPT OB CAP   | Vitamin/Mineral              |
| CONRAY INJ 60%   | Diagnostic Agent             |
| CONTR ALLRGY KIT PREMD PK                                  | Unapproved Drug              |
| CONTRAVE TAB 8-90MG  | Anorexic, Anti-obesity Agent |
| CONVENIENCE PAK  | Not properly listed with FDA |
| COPASIL GEL  | Not properly listed with FDA |
| CORIFACT KIT   | Blood Component              |
| CORN EXTRACT INJ 1:40                                      | Diagnostic Agent             |
| CORN POLLEN SOL 1:20                                       | Non-standardized allergenic  |
| CORTANE-B LOT  | Unapproved Drug              |
| CORTI-SAV CRE 1-1%   | Unapproved Drug              |
| CORTROSYN INJ 0.25MG                                       | Diagnostic Agent             |
| COSYNTROPIN INJ 0.25MG                                     | Diagnostic Agent             |
| COSYNTROPIN INJ 0.25MG                                     | Diagnostic Agent             |
| COVARYX TAB 1.25-2.5                                       | Unapproved Drug              |
| COVARYX HS TAB   | Unapproved Drug              |
| COVID-19 KIT FLU A&B                                       | Diagnostic Agent             |
| COVID-19 MRNA VAC TRIS-S 6MO-4Y-PFIZER IM SUSP 3 MCG/0.2ML | LIST                         |
| COW MILK EXT INJ 1:20                                      | Diagnostic Agent             |
| CRAB EXTRACT INJ 1:10                                      | Diagnostic Agent             |
| CREAM BASE CRE   | Not properly listed with FDA |
| CREAM BASE CRE NIOSOMES                                    | Not properly listed with FDA |
| CREAM-HEAVY CRE BASE                                       | Not properly listed with FDA |
| CROFAB INJ   | Not properly listed with FDA |
| CRYODOSE AER TA  | Not properly listed with FDA |
| CURAFOAM AG PAD 4"X4"                                      | Surgical Supply/Medical      |
| CURITY AMD MIS 1"X3'                                       | Not properly listed with FDA |
| CURITY AMD MIS 1/2"X3'                                     | Not properly listed with FDA |
| CURITY AMD MIS 1/4"X3'                                     | Not properly listed with FDA |
| CURITY AMD PAD 4"X4"                                       | Not properly listed with FDA |
| CURITY HYPER MIS 1/2"X15'                                  | Not properly listed with FDA |
| CURITY IODO MIS STRIP                                      | Not properly listed with FDA |
| CURITY NACL PAD 6"X6-3/4                                   | Not properly listed with FDA |
| CUTIS PLUS CRE   | Bulk Ingredient              |
| CYANOCOBALAM INJ 10000MCG                                  | LIST                         |
| CYANOCOBALAM INJ 1000MCG                                   | Vitamin/Mineral              |
| CYANOCOBALAM INJ 30000MCG                                  | LIST                         |
| CYANOCOBALAM SOL 2000MCG                                   | Unapproved Drug              |
| CYANOCOBALAM SPR 500MCG                                    | LIST                         |
| CYCLOBENZAPR CRE 20MG/GM                                   | Bulk Ingredient              |
| CYCLOPAK PAK   | Unapproved Drug              |
| CYCLOPHENE CRE RAPIDPAQ                                    | Unapproved Drug              |

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| Label Name                | Reason                                   |
|---------------------------|--|
| CYFOLEX CAP               | Vitamin/Mineral                          |
| CYSTO-CONRAY INJ II 17.2% | Diagnostic Agent                         |
| CYSTOGRAFIN INJ 30%       | Diagnostic Agent                         |
| CYSTOGRAFIN- INJ DILUTE   | Diagnostic Agent                         |
| CYSVIEW INJ 100MG         | Diagnostic Agent                         |
| CYTALUX INJ 3.2/1.6       | Diagnostic Agent                         |
| CYTRA K GRA CRYSTALS      | Unapproved Drug                          |
| DANDELION INJ 1:20        | LIST                                     |
| DATSCAN SOL               | Diagnostic Agent                         |
| DAVIMET-M CHW MULTIVIT    | Multi-vitamin                            |
| DAXXIFY INJ 100U          | Cosmetic                                 |
| DAYAVITE TAB              | Multi-vitamin                            |
| D-CARE BLOOD TES GLUCOSE  | Diagnostic Agent                         |
| DEBACTEROL SOL 30-50%     | Device                                   |
| DEFINITY SUS              | Diagnostic Agent                         |
| DEFINITY RT SUS           | Diagnostic Agent                         |
| DELFLEX-LC SOL 1.5% DEX   | Dialysis covered by ESRD bundled payment |
| DELFLEX-LC/ SOL 2.5% DEX  | Dialysis covered by ESRD bundled payment |
| DELFLEX-LC/ SOL 4.25 DEX  | Dialysis covered by ESRD bundled payment |
| DELFLEX-SM/ SOL 1.5% DEX  | Dialysis covered by ESRD bundled payment |
| DELFLEX-SM/ SOL 2.5% DEX  | Dialysis covered by ESRD bundled payment |
| DELUO SPR                 | LIST                                     |
| DENTA 5000 CRE PLUS       | Unapproved Drug                          |
| DENTA 5000 CRE PLUS 2PK   | Unapproved Drug                          |
| DENTAGEL GEL 1.1%         | Unapproved Drug                          |
| DEOXIA GEL                | Not properly listed with FDA             |
| DEOXIA LOT                | Not properly listed with FDA             |
| DEOXIADEMTAR GEL          | Not properly listed with FDA             |
| DEPLIN 15 CAP             | Medical Food                             |
| DEPLIN 7.5 CAP            | Medical Food                             |
| DEPRIZINE SUS RAPIDPAQ    | Unapproved Drug                          |
| DERMA SERUM CRE FREEDOM   | Not properly listed with FDA             |
| DERMABASE CRE             | Not properly listed with FDA             |
| DERMACINRX CAP PROBITRA   | Dietary Supplement                       |
| DERMACINRX CHW DAVIMET    | Multi-vitamin                            |
| DERMACINRX KIT 4-2-5%     | LIST                                     |
| DERMACINRX KIT COMBOPAK   | LIST                                     |
| DERMACINRX PAK LEXITRAL   | Not properly listed with FDA             |
| DERMACINRX PAK PHN        | LIST                                     |
| DERMACINRX PAK THERAZOL   | LIST                                     |
| DERMACINRX PAK ZRM        | LIST                                     |
| DERMACINRX TAB PRETRATE   | Unapproved Drug                          |
| DERMACINRX TAB RIBOT-E    | Vitamin/Mineral                          |



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| Label Name                | Reason                                   |
|---------------------------|--|
| DERMALID PAK              | LIST                                     |
| DERMELLE GEL              | Device                                   |
| DERMETAZOLE PAK 2-20%     | Unapproved Drug                          |
| DERPIXIA GEL              | Device                                   |
| DESFLURANE SOL            | General Anesthetic                       |
| DETECTNET INJ 1MCL/ML     | Diagnostic Agent                         |
| DEX/MOX/KETO SOL          | Unapproved Drug                          |
| DEXAM/MOXI SOL 1-5MG/ML   | Unapproved Drug                          |
| DEXATRAN CAP              | Multi-vitamin                            |
| DEXERYL CRE               | Not properly listed with FDA             |
| DEXIFOL TAB               | Vitamin/Mineral                          |
| DEXLIDO KIT               | LIST                                     |
| DEXLIDO-M KIT             | LIST                                     |
| DEXONTO 0.4% SOL 20MG/5ML | Unapproved Drug                          |
| DFS DR/MS/ KIT MENT/CAP   | LIST                                     |
| DFS/MS/MENTH KIT /CAP PAK | LIST                                     |
| DIABETIC CAP VITAMIN      | Unapproved Drug                          |
| DIADIMAXIA GEL            | Not properly listed with FDA             |
| DIALYVITE TAB             | Vitamin/Mineral                          |
| DIALYVITE TAB 3000        | Vitamin/Mineral                          |
| DIALYVITE TAB 5000        | Vitamin/Mineral                          |
| DIALYVITE/ TAB ZINC       | Vitamin/Mineral                          |
| DIANEAL SOL LOW CALC      | Dialysis covered by ESRD bundled payment |
| DIANEAL SOL LOW CALC      | Dialysis covered by ESRD bundled payment |
| DIANEAL SOL LOW CALC      | Dialysis covered by ESRD bundled payment |
| DIANEAL PD-2 SOL 1.5% DEX | Dialysis covered by ESRD bundled payment |
| DIANEAL PD-2 SOL 2.5% DEX | Dialysis covered by ESRD bundled payment |
| DIANEAL PD-2 SOL 4.25%DEX | Dialysis covered by ESRD bundled payment |
| DIAOXIA GEL               | Not properly listed with FDA             |
| DIASDIMAXIA GEL           | Not properly listed with FDA             |
| DIASOXIA GEL              | Not properly listed with FDA             |
| DICLAREAL PAK 2/0.025%    | Unapproved Drug                          |
| DICLOFONO GEL 1.6%        | Unapproved Drug                          |
| DICLOHEAL-60 MIS          | LIST                                     |
| DICLONA GEL 1-4.5%        | Unapproved Drug                          |
| DICLONA+ PAD 1.25-4.5     | Unapproved Drug                          |
| DICLOPAK PAK              | LIST                                     |
| DICLOPR KIT 1-10-30%      | LIST                                     |
| DICLOSAICIN MIS           | LIST                                     |
| DICLOSTREAM PAK 1.5-10%   | LIST                                     |
| DICLOTREX PAK             | LIST                                     |
| DICLOTREX II PAK          | Unapproved Drug                          |
| DICLOVIX KIT              | LIST                                     |

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| DICLOVIX DM PAK 1.5-8%   | LIST                         |
| DICLOZOR MIS 1%          | LIST                         |
| DICOPANOL SUS 5MG/ML     | Unapproved Drug              |
| DICOPANOL SUS RAPIDPAQ   | Unapproved Drug              |
| DIETHYLPROP TAB 25MG     | Anorexic, Anti-obesity Agent |
| DIETHYLPROP TAB 75MG ER  | Anorexic, Anti-obesity Agent |
| DIFMETIOXRIM SOL         | Not properly listed with FDA |
| DIMENTHO PAK             | LIST                         |
| DIMOXIA GEL              | Not properly listed with FDA |
| DIOCHLOY SOL             | Not properly listed with FDA |
| DIPENTOCAINE CRE 5-5-2%  | Unapproved Drug              |
| DIPRIVAN INJ             | General Anesthetic           |
| DIPRIVAN INJ 100/10ML    | General Anesthetic           |
| DIPRIVAN INJ 200/20ML    | General Anesthetic           |
| DIPRIVAN INJ 500/50ML    | General Anesthetic           |
| DIPYRIDAMOLE INJ 5MG/ML  | Diagnostic Agent             |
| DMT SUIK KIT 10MG/ML     | LIST                         |
| DNA COLLECT KIT          | Diagnostic Agent             |
| DOCK-SORREL INJ 1:20     | Non-standardized allergenic  |
| DOCK-SORREL INJ 1:20     | Non-standardized allergenic  |
| DODEX INJ                | LIST                         |
| DOG SOL EPITHELI         | Non-standardized allergenic  |
| DOG EPITHELI INJ 1:20    | Diagnostic Agent             |
| DOG EPITHELI SOL 1:20    | Non-standardized allergenic  |
| DOG FENNEL SOL 1:20      | Non-standardized allergenic  |
| DONNATAL ELX GRAPE       | Unapproved Drug              |
| DONNATAL ELX MINT        | Unapproved Drug              |
| DONNATAL TAB 16.2MG      | Unapproved Drug              |
| DOTAREM INJ 10MMOL       | Diagnostic Agent             |
| DOTAREM INJ 2.5MMOL      | Diagnostic Agent             |
| DOTAREM INJ 50MMOL       | Diagnostic Agent             |
| DOTAREM INJ 5MMOL        | Diagnostic Agent             |
| DOTAREM INJ 7.5MMOL      | Diagnostic Agent             |
| DOTATOC INJ GA 68        | Diagnostic Agent             |
| DOTREMIN TAB             | Unapproved Drug              |
| DOUBLE PM SOL            | Not properly listed with FDA |
| DOUBLEDEX KIT            | LIST                         |
| DRAIN SPONGE PAD 4"X4"   | Not properly listed with FDA |
| DRAXACE SUS              | Not properly listed with FDA |
| DRAXACE LOT SUS CLEANSER | Not properly listed with FDA |
| DRCAPS CLEAR CAP SIZE 00 | Unapproved Drug              |
| DRCAPS CLEAR CAP SIZE 1  | Unapproved Drug              |
| DRIHEP PLUS KIT 100UNIT  | Diagnostic Agent             |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| DRIHEP SYRNG KIT 100UNIT  | Diagnostic Agent             |
| DRISDOL CAP 50000UNT      | Vitamin/Mineral              |
| DRITHO-CREME CRE HP 1%    | Unapproved Drug              |
| DRIXECE SUS               | Not properly listed with FDA |
| DRYSOL SOL 20%            | Unapproved Drug              |
| DUAL COMPLEX CRE 1 KIT    | Not properly listed with FDA |
| DUET DHA MIS BALANCED     | Vitamin/Mineral              |
| DUET DHA MIS BALANCED     | Vitamin/Mineral              |
| DUET DHA MIS BALANCED     | Vitamin/Mineral              |
| DUET DHA MIS BALANCED     | Vitamin/Mineral              |
| DUET DHA 400 MIS 25-1-400 | Vitamin/Mineral              |
| DUET DHA 400 MIS 25-1-400 | Vitamin/Mineral              |
| DULOXICAINE PAK 30MG-4%   | Unapproved Drug              |
| DUODOTE INJ               | LIST                         |
| DURABASE CRE              | Not properly listed with FDA |
| DURABASE CRE ADVANCED     | Not properly listed with FDA |
| DURAFIBER PAD 4X4-3/4"    | Surgical Supply/Medical      |
| DURAFIBER AG PAD 2"X2"    | Surgical Supply/Medical      |
| DURAFIBER AG PAD 3/4X18"  | Surgical Supply/Medical      |
| DURAFIBER AG PAD 4"X4"    | Surgical Supply/Medical      |
| DURAFIBER AG PAD 4X4-3/4" | Surgical Supply/Medical      |
| DURAFIBER AG PAD 6"X6"    | Surgical Supply/Medical      |
| DURAFIBER AG PAD 8X11.75" | Surgical Supply/Medical      |
| DUROLANE INJ 60MG/3ML     | Surgical Supply/Medical      |
| D-XYLOSE POW              | Diagnostic Agent             |
| DYNAFOAM AG PAD 4"X4"     | Surgical Supply/Medical      |
| DYNAGINATE PAD 4"X5"      | Surgical Supply/Medical      |
| DYNAGINATE PAD AG 2"X2"   | Surgical Supply/Medical      |
| DYNAMIC KIT               | Diagnostic Agent             |
| DYNAMIC PLUS KIT PAK      | Diagnostic Agent             |
| DYURAL 80-LM KIT          | Unapproved Drug              |
| DYURAL-40 KIT             | LIST                         |
| DYURAL-80 KIT             | LIST                         |
| DYURAL-L KIT              | LIST                         |
| DYURAL-LM KIT             | LIST                         |
| EASTERN INJ COTTONW       | Non-standardized allergenic  |
| EASTERN INJ COTTONWO      | Diagnostic Agent             |
| EASTERN SOL COTTONWO      | LIST                         |
| EASYGEL GEL 0.4%          | Unapproved Drug              |
| EASYGEL GEL 0.4%CHRY      | Unapproved Drug              |
| EASYGEL GEL 0.4%CITR      | Unapproved Drug              |
| EASYGEL GEL 0.4%MINT      | Unapproved Drug              |
| EB-N3 DR CAP              | Multi-vitamin                |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ECEOXIA CRE               | Not properly listed with FDA |
| ECOTEST KIT COVID-19      | Diagnostic agent             |
| EC-RX DHEA CRE 10%        | Not properly listed with FDA |
| EC-RX DHEA CRE 4%         | Not properly listed with FDA |
| EC-RX ESTRAD CRE 0.4%     | Not properly listed with FDA |
| EC-RX ESTRAD CRE 0.6%     | Not properly listed with FDA |
| EC-RX PROGES CRE 10%      | Not properly listed with FDA |
| EC-RX PROGES CRE 20%      | Not properly listed with FDA |
| EC-RX TESTOS CRE 0.2%     | Not properly listed with FDA |
| EC-RX TESTOS CRE 0.4%     | Not properly listed with FDA |
| EC-RX TESTOS CRE 10%      | Not properly listed with FDA |
| EC-RX TESTOS CRE 20%      | Not properly listed with FDA |
| ECZEMOL TAB               | Unapproved Drug              |
| EDETATE DISO INJ 150MG/ML | Unapproved Drug              |
| EDEX KIT 10MCG            | Erectile Dysfunction         |
| EDEX KIT 20MCG            | Erectile Dysfunction         |
| EDEX KIT 40MCG            | Erectile Dysfunction         |
| ED-SPAZ TAB 0.125MG       | Unapproved Drug              |
| EEMT TAB 1.25-2.5         | Unapproved Drug              |
| EEMT HS TAB               | Unapproved Drug              |
| EFFER-K TAB 10MEQ         | Unapproved Drug              |
| EFFER-K TAB 20MEQ         | Unapproved Drug              |
| EFFER-K TAB 25MEQ EF      | Unapproved Drug              |
| EGG WHITE INJ EXTRACT     | Diagnostic Agent             |
| EHA LOT 4%                | Unapproved Drug              |
| ELEMAR PATCH KIT 5%-6%    | OTC product                  |
| ELESTONE CRE              | Not properly listed with FDA |
| ELFOLATE TAB 15MG         | Vitamin/Mineral              |
| ELFOLATE TAB 7.5MG        | Vitamin/Mineral              |
| ELFOLATE PLU TAB 3-35-2MG | Vitamin/Mineral              |
| ELITE-OB TAB              | Vitamin/Mineral              |
| ELOCTATE INJ 1000UNIT     | Blood Component              |
| ELOCTATE INJ 1500UNIT     | Blood Component              |
| ELOCTATE INJ 2000UNIT     | Blood Component              |
| ELOCTATE INJ 250UNIT      | Blood Component              |
| ELOCTATE INJ 3000UNIT     | Blood Component              |
| ELOCTATE INJ 4000UNIT     | Blood Component              |
| ELOCTATE INJ 5000UNIT     | Blood Component              |
| ELOCTATE INJ 500UNIT      | Blood Component              |
| ELOCTATE INJ 6000UNIT     | Blood Component              |
| ELOCTATE INJ 750UNIT      | Blood Component              |
| ELUCIREM INJ 10ML         | Diagnostic Agent             |
| ELUCIREM INJ 15ML         | Diagnostic Agent             |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ELUCIREM INJ 3ML          | Diagnostic Agent             |
| ELUCIREM INJ 7.5ML        | Diagnostic Agent             |
| ELUCIREM INJ BULK         | Diagnostic Agent             |
| EMOLIVAN CRE              | Not properly listed with FDA |
| EMOLLIENT CRE             | Not properly listed with FDA |
| EMPRICAINE KIT II         | LIST                         |
| EMPTY CAPSUL CAP SIZE 0   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 00  | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 1   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 1   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 2   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 3   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 4   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 5   | Unapproved Drug              |
| EMPTY CAPSUL CAP SIZE 7   | Unapproved Drug              |
| EMREAL KIT 2.5-2.5%       | LIST                         |
| EMULSION SB EMU           | Not properly listed with FDA |
| ENBRACE HR CAP            | Vitamin/Mineral              |
| ENDEAVORRX MIS            | LIST                         |
| ENDOMETRIN SUP 100MG      | Fertility Agent              |
| ENGLISH PLAN INJ 1:20     | Non-standardized allergenic  |
| ENGLISH PLAN INJ 1:20     | Diagnostic Agent             |
| ENGLISH WALNT INJ 1:20    | Diagnostic Agent             |
| ENLYTE CAP                | Unapproved Drug              |
| ENOVARX CRE 2.5%          | Not properly listed with FDA |
| ENOXILUV KIT INJ 40/0.4ML | Unapproved Drug              |
| ENTERAGAM POW 5GM         | Not properly listed with FDA |
| ENTTY EMU SPRAY           | Not properly listed with FDA |
| ENU PRO3 POW PLUS         | Not properly listed with FDA |
| ENZADYNE CAP              | Not properly listed with FDA |
| ENZNONUTY OIN             | Not properly listed with FDA |
| ENZOCLEAR AER 9.8%        | Unapproved Drug              |
| EOVIST INJ                | Diagnostic Agent             |
| EPHEDRINE INJ 25MG/5ML    | Not properly listed with FDA |
| EPHEDRINE INJ 50/10ML     | Not properly listed with FDA |
| EPHEDRINE INJ 50MG/5ML    | Not properly listed with FDA |
| EPHEDRINE SU INJ 50MG/ML  | Unapproved Drug              |
| EPICERAM EMU              | LIST                         |
| EPICOCC NIGR INJ 1:10     | Non-standardized allergenic  |
| EPICYN SPR                | Not properly listed with FDA |
| EPINEPHR PRO KIT 1MG/ML   | LIST                         |
| EPINEPHRINE INJ 0.1MG/ML  | Unapproved Drug              |
| EPINEPHRINE INJ 1MG/10ML  | Unapproved Drug              |

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| Label Name                | Reason  |
|---------------------------|---|
| EPINEPHRINE KIT SNAP-EMS  | Unapproved Drug                                       |
| EPINPHEPHRIN KIT SNAP     | LIST  |
| EPINPHEPHRIN KIT SNAP-V   | Not properly listed with FDA                          |
| EPISNAP KIT               | LIST  |
| EQUACARE JR POW CHOCO     | Dietary Supplement                                    |
| EQUACARE JR POW UNFLAVOR  | Dietary Supplement                                    |
| EQUACARE JR POW VANILLA   | Dietary Supplement                                    |
| ERCAID KIT CLASSIC        | Erectile Dysfunction                                  |
| ERCAID KIT ESTEEM         | Erectile Dysfunction                                  |
| ERGOAL CAP 2500UNIT       | Vitamin/Mineral                                       |
| ESCAVITE CHW              | Vitamin/Mineral                                       |
| ESCAVITE D CHW            | Vitamin/Mineral                                       |
| ESCAVITE LQ DRO 0.25-6MG  | Vitamin/Mineral                                       |
| ESPEROCT INJ 1000UNIT     | Blood Component                                       |
| ESPEROCT INJ 1500UNIT     | Blood Component                                       |
| ESPEROCT INJ 2000UNIT     | Blood Component                                       |
| ESPEROCT INJ 3000UNIT     | Blood Component                                       |
| ESPEROCT INJ 500UNIT      | Blood Component                                       |
| ESPUMIL AER               | Bulk Ingredient                                       |
| ESSENTIAL POW CARE JR     | Dietary Supplement                                    |
| ESSENTRA MIS 9X9"         | Not properly listed with FDA                          |
| EST ESTROGEN TAB MTEST HS | Unapproved Drug                                       |
| ESTROG/MTEST TAB 1.25-2.5 | Unapproved Drug                                       |
| ETHOXIA CRE               | Unapproved Drug                                       |
| ETHYL CHLOR AER FINE PIN  | Not properly listed with FDA                          |
| ETHYL CHLOR AER FN STRM   | Not properly listed with FDA                          |
| ETHYL CHLOR AER MED JET   | Not properly listed with FDA                          |
| ETHYL CHLOR AER MED STRM  | Not properly listed with FDA                          |
| ETHYL CHLOR AER MIST      | Not properly listed with FDA                          |
| ETHYL CHLOR AER SPRAY     | Not properly listed with FDA                          |
| ETOMIDATE INJ 20/10ML     | General Anesthetic                                    |
| ETOMIDATE INJ 2MG/ML      | General Anesthetic                                    |
| ETOMIDATE INJ 40/20ML     | General Anesthetic                                    |
| ETOPOSIDE CAP 50MG        | Oral drug for cancer; infusion available under Part B |
| EUFLEXXA INJ 10MG/ML      | Surgical Supply/Medical                               |
| EVICEL KIT 2ML            | Not properly listed with FDA                          |
| EVICEL KIT 5ML            | Not properly listed with FDA                          |
| EXEM MIS                  | Diagnostic agent                                      |
| EXODERM LOT 25-1%         | Unapproved Drug                                       |
| EXTRANEAL SOL             | Dialysis covered by ESRD bundled payment              |
| E-Z-DISK TAB 700MG        | Diagnostic Agent                                      |
| E-Z-HD SUS 98%            | Diagnostic Agent                                      |
| E-Z-PAQUE SUS 60%         | Diagnostic Agent                                      |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| E-Z-PAQUE SUS 96%         | Diagnostic Agent             |
| E-Z-PASTE CRE 60%         | Diagnostic Agent             |
| FA-B6-B12 TAB             | Vitamin/Mineral              |
| FABB TAB 2.2-25-1         | Vitamin/Mineral              |
| FAGRON LS CRE PLUS        | Not properly listed with FDA |
| FANATREX SUS 25MG/ML      | Unapproved Drug              |
| FASTEP KIT COVID-19       | Diagnostic agent             |
| FBL KIT CRE 15-4-5%       | Bulk Ingredient              |
| FEIBA INJ                 | Blood Component              |
| FEM PH GEL                | Not properly listed with FDA |
| FEMCAP MIS 22MM           | Device                       |
| FEMCAP MIS 26MM           | Device                       |
| FEMCAP MIS 30MM           | Device                       |
| FENOVAR KIT               | Unapproved Drug              |
| FENTANYL INJ 5000/100     | General Anesthetic           |
| FENTANYL INJ 50MCG/ML     | General Anesthetic           |
| FENTANYL CIT INJ          | General Anesthetic           |
| FENTANYL CIT INJ 100/2ML  | General Anesthetic           |
| FENTANYL CIT INJ 1000/20  | General Anesthetic           |
| FENTANYL CIT INJ 1000MCG  | General Anesthetic           |
| FENTANYL CIT INJ 100MCG   | General Anesthetic           |
| FENTANYL CIT INJ 1250MCG  | General Anesthetic           |
| FENTANYL CIT INJ 1500/30  | General Anesthetic           |
| FENTANYL CIT INJ 1500MCG  | General Anesthetic           |
| FENTANYL CIT INJ 250/5ML  | General Anesthetic           |
| FENTANYL CIT INJ 2500/50  | General Anesthetic           |
| FENTANYL CIT INJ 2500MCG  | General Anesthetic           |
| FENTANYL CIT INJ 250MCG   | General Anesthetic           |
| FENTANYL CIT INJ 2750MCG  | General Anesthetic           |
| FENTANYL CIT INJ 500MCG   | General Anesthetic           |
| FENTANYL CIT INJ 50MCG/ML | General Anesthetic           |
| FENTANYL CIT SOL 2500/50  | General Anesthetic           |
| FENTANYL CIT SOL 2500MCG  | General Anesthetic           |
| FENT-BUP-NAC INJ          | Not properly listed with FDA |
| FERAHEME INJ 510/17ML     | LIST                         |
| FEROCON CAP               | Vitamin/Mineral              |
| FEROTRINSIC CAP           | Vitamin/Mineral              |
| FERRIC GLUCO INJ 12.5/ML  | Vitamin/Mineral              |
| FERRLECIT INJ 12.5MG/M    | Vitamin/Mineral              |
| FERRO-PLEX TAB            | Vitamin/Mineral              |
| FERUMOXYTOL INJ 510/17ML  | LIST                         |
| FIBERSOUR HN LIQ          | Not properly listed with FDA |
| FIBRIK CAP                | Vitamin/Mineral              |

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| FIBRYGA INJ 1GM          | Blood Component              |
| FIBRYGA INJ 1MG          | Blood Component              |
| FINAPOD SOL 0.1-7%       | Not properly listed with FDA |
| FINASTERIDE TAB 1MG      | Cosmetic                     |
| FIRE ANT INJ 1:10        | Non-standardized allergenic  |
| FIRE ANT EXT INJ 1:20    | Non-standardized allergenic  |
| FIRST PANTPR SUS 4MG/ML  | Not properly listed with FDA |
| FIRST-BACLOF SUS 1       | Not properly listed with FDA |
| FIRST-BACLOF SUS 5 KIT   | Not properly listed with FDA |
| FIRST-METRON SUS 50MG/ML | Not properly listed with FDA |
| FIRST-MOUTHW SUS BLM     | Unapproved Drug              |
| FIRST-OMEPRA SUS 2MG/ML  | Bulk Ingredient              |
| FITALITE CRE BASE        | Not properly listed with FDA |
| FLAVOR BLEND SUS         | Unapproved Drug              |
| FLAVOR PLUS LIQ          | Unapproved Drug              |
| FLAVOR SWEET SYP         | Unapproved Drug              |
| FLEXBUMIN INJ 25%        | Blood Component              |
| FLEXBUMIN INJ 5%         | Blood Component              |
| FLEXIPAK PAK 75-0.025    | LIST                         |
| FLORIVA CHW 0.25MG       | Vitamin/Mineral              |
| FLORIVA CHW 0.5MG        | Vitamin/Mineral              |
| FLORIVA CHW 1MG          | Vitamin/Mineral              |
| FLORIVA DRO 0.25MG       | Unapproved Drug              |
| FLORIVA DRO PLUS         | Vitamin/Mineral              |
| FLUAD QUADRI INJ 2021-22 | Influenza vaccine            |
| FLUAD QUADRI INJ 2022-23 | Influenza vaccine            |
| FLUAD QUADRI INJ 2023-24 | Influenza vaccine            |
| FLUARIX QUAD INJ 2021-22 | Influenza vaccine            |
| FLUARIX QUAD INJ 2022-23 | Influenza vaccine            |
| FLUARIX QUAD INJ 2023-24 | Influenza vaccine            |
| FLUBLOK QUAD INJ 2021-22 | Influenza vaccine            |
| FLUBLOK QUAD INJ 2022-23 | Influenza vaccine            |
| FLUBLOK QUAD INJ 2023-24 | Influenza vaccine            |
| FLUCAINE SOL 0.25-0.5    | Diagnostic Agent             |
| FLUCLVX QUAD INJ 2021-22 | Influenza vaccine            |
| FLUCLVX QUAD INJ 2021-22 | Influenza vaccine            |
| FLUCLVX QUAD INJ 2022-23 | Influenza vaccine            |
| FLUCLVX QUAD INJ 2022-23 | Influenza vaccine            |
| FLUCLVX QUAD INJ 2023-24 | Influenza vaccine            |
| FLUCLVX QUAD INJ 2023-24 | Influenza vaccine            |
| FLUDEOXYGLUC SOL 20-300  | Diagnostic Agent             |
| FLUDEOXYGLUC SOL 20-500  | Diagnostic Agent             |
| FLULAVAL QUA INJ 2021-22 | Influenza vaccine            |



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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| FLULAVAL QUA INJ 2022-23  | Influenza vaccine            |
| FLULAVAL QUA INJ 2023-24  | Influenza vaccine            |
| FLUMIST QUAD SUS 2021-22  | Influenza vaccine            |
| FLUMIST QUAD SUS 2022-23  | Influenza vaccine            |
| FLUMIST QUAD SUS 2023-24  | Influenza vaccine            |
| FLUOPAR KIT               | LIST                         |
| FLUORE/BENOX SOL 0.3-0.4% | Diagnostic Agent             |
| FLUORE-BENOX SOL 0.25-0.4 | Diagnostic Agent             |
| FLUORESCEIN INJ 10% OP    | Diagnostic Agent             |
| FLUORESCEIN/ SOL PROPARAC | Diagnostic Agent             |
| FLUORESCITE INJ 10% OP    | Diagnostic Agent             |
| FLUORID SENS PST 1.1-5%   | Not properly listed with FDA |
| FLUORIDE CHW 0.25MG F     | Unapproved Drug              |
| FLUORIDE CHW 0.5MG F      | Unapproved Drug              |
| FLUORIDE CHW 1MG F        | Unapproved Drug              |
| FLUORIDEX CON DLY REN     | Not properly listed with FDA |
| FLUORIDEX PST 1.1%        | Unapproved Drug              |
| FLUOR-I-STRI TES 1MG OP   | Diagnostic Agent             |
| FLUORITAB DRO 0.125MG     | Unapproved Drug              |
| FLUOROD F 18 SOL 37-1480  | Diagnostic Agent             |
| FLUOVIX PAK 0.1%          | LIST                         |
| FLUOVIX PLUS PAK 0.1%     | LIST                         |
| FLURA-SAFE SOL            | Diagnostic Agent             |
| FLUROX SOL OP             | Diagnostic Agent             |
| FLUSH SYRING INJ 0.9%     | Not properly listed with FDA |
| FLUZONE INJ 2021-22       | Influenza vaccine            |
| FLUZONE HD INJ 2022-23    | Influenza vaccine            |
| FLUZONE HD INJ 2023-24    | Influenza vaccine            |
| FLUZONE QUAD INJ 2021-22  | Influenza vaccine            |
| FLUZONE QUAD INJ 2021-22  | Influenza vaccine            |
| FLUZONE QUAD INJ 2021-22  | Influenza vaccine            |
| FLUZONE QUAD INJ 2022-23  | Influenza vaccine            |
| FLUZONE QUAD INJ 2022-23  | Influenza vaccine            |
| FLUZONE QUAD INJ 2022-23  | Influenza vaccine            |
| FLUZONE QUAD INJ 2023-24  | Influenza vaccine            |
| FLUZONE QUAD INJ 2023-24  | Influenza vaccine            |
| FOAMIL LIQ                | Not properly listed with FDA |
| FOLAGENT CAP DHA          | Multi-vitamin                |
| FOLBEE TAB                | Vitamin/Mineral              |
| FOLBEE PLUS TAB           | Vitamin/Mineral              |
| FOLBEE PLUS TAB CZ        | Vitamin/Mineral              |
| FOLBIC RF TAB             | Vitamin/Mineral              |
| FOLCYTEINE TAB MULTIVIT   | Multi-vitamin                |

## MEDICARE PART D EXCLUDED DRUGS LIST 2024\_updated January 2024

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| FOLDITAM TAB             | Unapproved Drug              |
| FOLGARD OS TAB           | Vitamin/Mineral              |
| FOLGARD RX TAB           | Vitamin/Mineral              |
| FOLIC ACID INJ 50/10ML   | Vitamin/mineral              |
| FOLIC ACID INJ 5MG/ML    | Vitamin/Mineral              |
| FOLIC ACID TAB 1000MCG   | Vitamin/Mineral              |
| FOLIC ACID TAB 1MG       | Vitamin/Mineral              |
| FOLIC D3 CAP             | Vitamin/mineral              |
| FOLIC-K CAP              | Vitamin/Mineral              |
| FOLI-D TAB               | Vitamin/Mineral              |
| FOLIKA-D TAB 1-5000      | Vitamin/Mineral              |
| FOLITE TAB               | Dietary Supplement           |
| FOLITIN-Z TAB            | Multi-vitamin                |
| FOLIVANE-F CAP           | Vitamin/Mineral              |
| FOLIVANE-OB CAP          | Vitamin/Mineral              |
| FOLIXAPURE TAB 1-5000    | Vitamin/Mineral              |
| FOLIXATE TAB             | Unapproved Drug              |
| FOLLISTIM AQ INJ 300UNIT | Fertility Agent              |
| FOLLISTIM AQ INJ 600UNIT | Fertility Agent              |
| FOLLISTIM AQ INJ 900UNIT | Fertility Agent              |
| FOLPLEX 2.2 TAB          | Vitamin/Mineral              |
| FOLTANX TAB              | Vitamin/Mineral              |
| FOLTANX RF CAP           | Vitamin/Mineral              |
| FOLTRATE TAB             | Vitamin/Mineral              |
| FOLTREXYL TAB            | Unapproved Drug              |
| FOLTRIN CAP              | Vitamin/Mineral              |
| FOLTX TAB                | Vitamin/Mineral              |
| FOLVITE-D TAB            | Dietary Supplement           |
| FOOD COLOR LIQ BLUE      | Not properly listed with FDA |
| FORANE SOL               | General Anesthetic           |
| FORAXA EMU               | Surgical Supply/Medical      |
| FORMALDEHYDE SOL 10%     | Unapproved Drug              |
| FORMALDEHYDE SOL 37%     | Unapproved Drug              |
| FOSTEUM CAP              | Medical Food                 |
| FOSTEUM PLUS CAP         | Medical Food                 |
| FREEDOM CRE DERMA-D      | Not properly listed with FDA |
| FREEDOM CRE DERMA-N      | Not properly listed with FDA |
| FROTEK CRE 10%           | Not properly listed with FDA |
| FUL-GLO TES 0.6MG OP     | Diagnostic Agent             |
| FUL-GLO TES 1MG OP       | Diagnostic Agent             |
| FYREMADEL SOL 250/0.5    | Fertility Agent              |
| GABA/NAPROX CRE M-P TRAN | Not properly listed with FDA |
| GADAVIST INJ 1MMOL/ML    | Diagnostic Agent             |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| GADOBUTROL INJ 1MMOL/ML   | Diagnostic Agent             |
| GADOTERATE INJ 10/20ML    | Diagnostic Agent             |
| GADOTERATE INJ 2.5/5ML    | Diagnostic Agent             |
| GADOTERATE INJ 5/10ML     | Diagnostic Agent             |
| GADOTERATE INJ 50/100ML   | Diagnostic Agent             |
| GADOTERATE INJ 7.5/15ML   | Diagnostic Agent             |
| GALAXTRA POW              | Not properly listed with FDA |
| GALLIUM 67 SOL 13.2MCI    | Diagnostic Agent             |
| GALLIUM 67 SOL 19.8MCI    | Diagnostic Agent             |
| GALLIUM 67 SOL 6.6MCI     | Diagnostic Agent             |
| GALLIUM 67 SOL 8.8MCI     | Diagnostic Agent             |
| GALLIUM GA68 INJ GOZETOTI | Diagnostic Agent             |
| GALZIN CAP 25MG           | Vitamin/Mineral              |
| GALZIN CAP 50MG           | Vitamin/Mineral              |
| GANIRELIX AC INJ 250/0.5  | Fertility Agent              |
| GAPEAUM CRE BUDIBAC       | Bulk Ingredient              |
| GASTROGRAFIN SOL 66-10%   | Diagnostic Agent             |
| GAUZE SPONGE PAD 4X4 12PL | Not properly listed with FDA |
| GEBAUERS SPR AER /STRETCH | Not properly listed with FDA |
| GELCLAIR GEL              | Device                       |
| GELFILM MIS OP            | Not properly listed with FDA |
| GEL-FLOW KIT              | Not properly listed with FDA |
| GELFOAM-JMI KIT POWDER    | Not properly listed with FDA |
| GELFOAM-JMI KIT SPONGE    | Not properly listed with FDA |
| GEL-ONE INJ 30MG/3ML      | Surgical Supply/Medical      |
| GELSYN-3 INJ 16.8/2ML     | Surgical Supply/Medical      |
| GELX GEL                  | Surgical Supply/Medical      |
| GEN7T LOT 3.5%            | Unapproved Drug              |
| GEN7T PAD 3.5%            | Unapproved Drug              |
| GEN7T PLUS LOT 3.5-7%     | Unapproved Drug              |
| GEN7T PLUS PAD 3.5-7%     | Unapproved Drug              |
| GENADUR KIT               | Not properly listed with FDA |
| GENADUR LIQ               | Not properly listed with FDA |
| GENICIN TAB VITA-D        | Dietary Supplement           |
| GENICIN TAB VITA-S        | Vitamin/Mineral              |
| GENVISC 850 INJ 25/2.5    | Surgical Supply/Medical      |
| GERMAN INJ COCKROAC       | Non-standardized allergenic  |
| GIALAX KIT                | LIST                         |
| GILPHEX TR TAB 10-388MG   | Unapproved Drug              |
| GLEOLAN SOL 1500MG        | Diagnostic Agent             |
| GLOFIL-125 INJ 0.1%       | Diagnostic Agent             |
| GLOSTRIPS MIS 1MG OP      | Diagnostic Agent             |
| GLUCAGEN INJ 1MG          | Diagnostic Agent             |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| GLUCAGON INJ 1MG          | Diagnostic Agent             |
| GLUTATHIONE INJ 200MG/ML  | Unapproved Drug              |
| GLUTATHIONE INJ 6GM/30ML  | Unapproved Drug              |
| GLYCINE INJ 50MG/ML       | Unapproved Drug              |
| GLYCINE SOL 1.5% IRR      | Not properly listed with FDA |
| GLYCOPYRROLA INJ 0.6/3ML  | Unapproved Drug              |
| GLYCOPYRROLA INJ 1MG/5ML  | Unapproved Drug              |
| GLYTAC COMPL BAR 10PE     | Not properly listed with FDA |
| GLYTACTIN LIQ RES/LITE    | Not properly listed with FDA |
| GLYTACTIN LIQ RESTOR10    | not properly listed with FDA |
| GLYTACTIN LIQ RTD 10      | Not properly listed with FDA |
| GLYTACTIN LIQ RTD 15      | Not properly listed with FDA |
| GLYTACTIN PAK BTMK/DLT    | not properly listed with FDA |
| GLYTACTIN PAK SWIRL 15    | Not properly listed with FDA |
| GLYTACTIN POW APPLE       | Dietary Supplement           |
| GLYTACTIN POW BD 20/20    | Not properly listed with FDA |
| GLYTACTIN POW BETMLK15    | not properly listed with FDA |
| GLYTACTIN POW BETTRMLK    | not properly listed with FDA |
| GLYTACTIN POW BLD 10PE    | Not properly listed with FDA |
| GLYTACTIN POW BLD PKU     | Not properly listed with FDA |
| GLYTACTIN POW PUNCH       | Dietary Supplement           |
| GLYTACTIN POW RESTOR 5    | Not properly listed with FDA |
| GLYTACTIN POW RST LT10    | not properly listed with FDA |
| GLYTACTIN POW TROPICAL    | Dietary Supplement           |
| GLYTACTIN 15 LIQ RTD LITE | Not properly listed with FDA |
| GOLDENROD SOL 1:20        | Non-standardized allergenic  |
| GONAL-F INJ 1050UNIT      | Fertility Agent              |
| GONAL-F INJ 450UNIT       | Fertility Agent              |
| GONAL-F RFF INJ 75UNIT    | Fertility Agent              |
| GRAFCO SILVR MIS NIT APPL | Unapproved Drug              |
| GRASS POLLEN INJ MIX/KORT | LIST                         |
| GRASS POLLEN SOL MIX OF 6 | LIST                         |
| GREEN ASH INJ 1:20        | Non-standardized allergenic  |
| GREEN GLO MIS 1.5MG       | Diagnostic Agent             |
| GUANENDRUX CRE 10-5-40%   | Not properly listed with FDA |
| HACKBERRY EX SOL 1:20     | Non-standardized allergenic  |
| HALUCORT GEL              | Device                       |
| HAPRODERM GEL             | Device                       |
| HAXCHLO SHA               | Not properly listed with FDA |
| HAXCHLODREX SHA           | Not properly listed with FDA |
| HAXDRAX SHA 0.77-2%       | Not properly listed with FDA |
| HAZELNUT EXT INJ 1:20     | Diagnostic Agent             |
| HC PRAMOXINE CRE 2.5-1%   | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| HC/PRAMOXINE CRE 1-2.35%  | Unapproved Drug              |
| HC-LIDOCAINE CRE 1-1%     | Not properly listed with FDA |
| HCU EASY TAB              | Not properly listed with FDA |
| HCU EXPRESS PAK 15+ UNFL  | Not properly listed with FDA |
| HCU EXPRESS PAK 20+ UNFL  | Not properly listed with FDA |
| HEALON DUET INJ PRO       | Not properly listed with FDA |
| HELIXATE FS INJ 500UNIT   | Blood Component              |
| HEMATINIC/FA TAB          | Vitamin/Mineral              |
| HEMATRON-AF TAB           | Vitamin/Mineral              |
| HEMLIBRA INJ 105/0.7      | Blood Component              |
| HEMLIBRA INJ 150/ML       | Blood Component              |
| HEMLIBRA INJ 30MG/ML      | Blood Component              |
| HEMLIBRA INJ 60/0.4       | Blood Component              |
| HEMMOREX-HC SUP 25MG      | Unapproved Drug              |
| HEMMOREX-HC SUP 30MG      | Unapproved Drug              |
| HEMMOREX-HC SUP 30MG      | Unapproved Drug              |
| HEMOCYTE-F TAB            | Vitamin/Mineral              |
| HEMOFIL M INJ 1000UNIT    | Blood Component              |
| HEMOFIL M INJ 1700UNIT    | Blood Component              |
| HEMOFIL M INJ 250UNIT     | Blood Component              |
| HEMOFIL M INJ 500UNIT     | Blood Component              |
| HEPARIN LOCK INJ 100/ML   | Not properly listed with FDA |
| HEPARIN LOCK INJ 10UNT/ML | Not properly listed with FDA |
| HEPARIN LOCK INJ 1UNIT/ML | Not properly listed with FDA |
| HEPARIN LOCK KIT 100/ML   | Not properly listed with FDA |
| HEPATOLITE KIT 99M        | Diagnostic Agent             |
| HEPMED KIT                | Not properly listed with FDA |
| HEXIOUNYL LOT 3-5-20%     | Not properly listed with FDA |
| HISTATROL INJ 0.275/ML    | Diagnostic Agent             |
| HISTATROL INJ 2.75/ML     | Diagnostic Agent             |
| HOMACTIN AA LIQ PLUS      | Not properly listed with FDA |
| HOMACTIN AA POW PLUS      | Not properly listed with FDA |
| HOMATROPAIRE SOL 5% OP    | Unapproved Drug              |
| HOME PAP KIT              | Diagnostic Agent             |
| HORMEL ALLERGY ANTIGEN    | Not properly listed with FDA |
| HORMONE BASE CRE NIOSOMES | Not properly listed with FDA |
| HORMONE HEAV CRE NIOSOMES | Not properly listed with FDA |
| HORNET VENOM INJ 1300MCG  | Non-standardized allergenic  |
| HORNET VENOM INJ 550MCG   | Non-standardized allergenic  |
| HORSE EPITHE INJ 1:10     | Non-standardized allergenic  |
| HORSE EPITHE INJ 1:20     | Non-standardized allergenic  |
| HPR PLUS AER              | LIST                         |
| HPR PLUS CRE              | LIST                         |

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| Label Name                | Reason  |
|---------------------------|---|
| HPR PLUS KIT              | Device  |
| HUMATE-P SOL 2400UNIT     | Blood Component                                       |
| HUMATE-P SOL 250-600      | Blood Component                                       |
| HUMATE-P SOL 500-1200     | Blood Component                                       |
| HYALGAN INJ 20MG/2ML      | Surgical Supply/Medical                               |
| HYCANTIN CAP 0.25MG       | Oral drug for cancer; infusion available under Part B |
| HYCANTIN CAP 1MG          | Oral drug for cancer; infusion available under Part B |
| HYCLODEX SOL 0.012%       | Not properly listed with FDA                          |
| HYD POL/CPM SUS 10-8/5ML  | Cough/Cold  |
| HYDR/CPM/PSE LIQ 5-4-60MG | Cough/Cold  |
| HYDRABASE SB CRE CUST BSE | Not properly listed with FDA                          |
| HYDRFRA BLUE PAD RDY 2.5" | Not properly listed with FDA                          |
| HYDRFRA BLUE PAD RDY 4X5" | Not properly listed with FDA                          |
| HYDRFRA BLUE PAD RDY 8X8" | Not properly listed with FDA                          |
| HYDRFRA MRF PAD 2"X2.75"  | Not properly listed with FDA                          |
| HYDRO 40 AER FOAM         | Unapproved Drug                                       |
| HYDRO/NACL INJ 10/50ML    | Not properly listed with FDA                          |
| HYDRO/NACL INJ 20/100ML   | Not properly listed with FDA                          |
| HYDRO/NACL INJ 50/50      | Not properly listed with FDA                          |
| HYDROC IODO CRE 1%        | Unapproved Drug                                       |
| HYDROC IODO CRE 1-1%      | Unapproved Drug                                       |
| HYDROC/PRAM SUP 25-18MG   | Unapproved Drug                                       |
| HYDROCORT CRE IODOQUIN    | Unapproved Drug                                       |
| HYDROCORT KIT 2%          | Unapproved Drug                                       |
| HYDROCORT AC SUP 25MG     | Unapproved Drug                                       |
| HYDROCORT AC SUP 30MG     | Unapproved Drug                                       |
| HYDROCORT/ CRE IODOQUIN   | Unapproved Drug                                       |
| HYDROCORTISO PAK 2%       | Unapproved Drug                                       |
| HYDROFERA PAD 4"X4"       | Not properly listed with FDA                          |
| HYDROFERA PAD BLUE 2X2    | Not properly listed with FDA                          |
| HYDROFERA PAD BLUE 4X4    | Not properly listed with FDA                          |
| HYDROFERA PAD BLUE 6X6    | Not properly listed with FDA                          |
| HYDROFERA PAD BLUE 9MM    | Not properly listed with FDA                          |
| HYDROFERA PAD MRF 2.5"    | Not properly listed with FDA                          |
| HYDROFERA PAD MRF4"X4"    | Not properly listed with FDA                          |
| HYDROFRA MRF PAD 2-1/4X8" | Not properly listed with FDA                          |
| HYDROG WOUND MIS 3" DISK  | Not properly listed with FDA                          |
| HYDROG WOUND MIS 4-3/4"   | Not properly listed with FDA                          |
| HYDROGEL GEL              | Not properly listed with FDA                          |
| HYDROGEL DRE PAD 2"X3"    | Surgical Supply/Medical                               |
| HYDROGEL DRE PAD 4"X5"    | Surgical Supply/Medical                               |
| HYDROGEL GAU PAD 2"X2"    | Not properly listed with FDA                          |
| HYDROGEL GAU PAD 4"X4"    | Not properly listed with FDA                          |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| HYDROGEL GAU PAD 4"X8"    | Not properly listed with FDA |
| HYDROGEN PER SOL 30%      | Not properly listed with FDA |
| HYDROMO/NACL INJ 20/100ML | OTC                          |
| HYDROMORPHON SUP 3MG      | Not properly listed with FDA |
| HYDROQUINONE CRE 4%       | Cosmetic                     |
| HYDROXOCOBAL INJ 1000MCG  | Not properly listed with FDA |
| HYDROXYM GEL 2%           | Unapproved Drug              |
| HYDROXYPROG INJ 250MG/ML  | LIST                         |
| HYGEL GEL 2.5%            | Surgical Supply/Medical      |
| HYLAFEM SUP               | Unapproved Drug              |
| HYLAGUARD CRE             | Not properly listed with FDA |
| HYLATOPIC CRE PLUS        | Device                       |
| HYLATOPIC LOT PLUS        | Not properly listed with FDA |
| HYLAVITE TAB              | Vitamin/Mineral              |
| HYLAZINC TAB              | Vitamin/Mineral              |
| HYLENEX INJ 150 UNIT      | LIST                         |
| HYMOVIS INJ 24MG/3ML      | Surgical Supply/Medical      |
| HYOLEV MB TAB 81MG        | Unapproved Drug              |
| HYOPHEN TAB               | Unapproved Drug              |
| HYOSCYAMINE DRO 0.125/ML  | Unapproved Drug              |
| HYOSCYAMINE ELX 0.125/5   | Unapproved Drug              |
| HYOSCYAMINE INJ 0.5MG/ML  | Unapproved Drug              |
| HYOSCYAMINE SUB 0.125MG   | Unapproved Drug              |
| HYOSCYAMINE TAB 0.125MG   | Unapproved Drug              |
| HYOSCYAMINE TAB 0.125MG   | Unapproved Drug              |
| HYOSCYAMINE TAB 0.375 ER  | Unapproved Drug              |
| HYOSCYAMINE TAB 0.375 SR  | Unapproved Drug              |
| HYOSYNE DRO 0.125/ML      | Unapproved Drug              |
| HYOSYNE ELX 0.125/5       | Unapproved Drug              |
| HYPERHEP B INJ            | LIST                         |
| HYPERXSAL NEB 3.5%        | Not properly listed with FDA |
| HYPOCYN SOL 0.012%        | LIST                         |
| HYPOCYN SPR               | LIST                         |
| HYRONAN KIT               | Unapproved Drug              |
| IBUPAK KIT                | LIST                         |
| IBUPROFEN CRE 10%         | Bulk Ingredient              |
| IC GREEN INJ 25MG         | Diagnostic Agent             |
| ID NOW KIT COVID-19       | Diagnostic Agent             |
| ID NOW 2.0 KIT TEST       | Diagnostic Agent             |
| ID NOW CONTR KIT COVID-19 | Diagnostic Agent             |
| ID NOW INFL KIT CONTROL   | Diagnostic Agent             |
| ID NOW INFLU KIT A & B 2  | Diagnostic Agent             |
| ID NOW RSV KIT            | Diagnostic agent             |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ID NOW RSV KIT CONTROL    | Diagnostic agent             |
| ID NOW STREP KIT A2       | Diagnostic agent             |
| ID NOW STREP KIT A2 CNTRL | Diagnostic agent             |
| IDELVION SOL 1000UNIT     | Blood Component              |
| IDELVION SOL 2000UNIT     | Blood Component              |
| IDELVION SOL 250UNIT      | Blood Component              |
| IDELVION SOL 3500UNIT     | Blood Component              |
| IDELVION SOL 500UNIT      | Blood Component              |
| IDYYXIATAR GEL 5-0.025%   | Not properly listed with FDA |
| ILIDERM SPR               | Not properly listed with FDA |
| ILLUCCIX KIT CONFIG A     | Diagnostic Agent             |
| ILLUCCIX KIT CONFIG B     | Diagnostic Agent             |
| IMCIVREE INJ 10MG/ML      | Anorexic, Anti-obesity Agent |
| IMOXIA CRE                | Not properly listed with FDA |
| IMUBOLIC CAP              | Dietary Supplement           |
| INATAL GT TAB             | Vitamin/Mineral              |
| INAVIX PAK 75-0.025       | LIST                         |
| INDIGO CARMI INJ 8MG/ML   | Diagnostic Agent             |
| INDIOMIN MB CAP 120MG     | Unapproved Drug              |
| INDIUM IN111 INJ DTPA     | Diagnostic Agent             |
| INDIUM IN111 INJ OXYQUINO | Diagnostic Agent             |
| INDOCYANINE INJ 25MG      | Diagnostic Agent             |
| INFED INJ 50MG/ML         | Vitamin/Mineral              |
| INFLAMMACIN MIS 75-0.025  | LIST                         |
| INFLATHERM PAK            | LIST                         |
| INFUVITE INJ              | Vitamin/Mineral              |
| INFUVITE INJ ADULT        | Vitamin/Mineral              |
| INFUVITE INJ PEDIATRI     | Vitamin/Mineral              |
| INJECTAFER INJ 100/2ML    | LIST                         |
| INJECTAFER INJ 750/15ML   | Not properly listed with FDA |
| INOVA KIT 4%              | Not properly listed with FDA |
| INTEGRA F CAP             | Vitamin/Mineral              |
| INULIN INJ 100MG/ML       | Diagnostic Agent             |
| INZDEAXIATAR GEL          | Not properly listed with FDA |
| INZDEAXIAVAR GEL          | Not properly listed with FDA |
| INZDEOXIA GEL 1-2.5-4%    | Not properly listed with FDA |
| IODINE SOL STRONG         | Not properly listed with FDA |
| IODINE TIN 2%             | Not properly listed with FDA |
| IODIXANOL SOL 270MG/ML    | Diagnostic Agent             |
| IODIXANOL SOL 320MG/ML    | Diagnostic Agent             |
| IODOFLEX PAD PAD          | Surgical Supply/Medical      |
| ODOFORM STR MIS 1/2"X15'  | Not properly listed with FDA |
| ODOFORM STR MIS 1/4"X15'  | Not properly listed with FDA |



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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| IODIFORM STR MIS 2"X15'   | Not properly listed with FDA |
| IDOQU/HC GEL ALOE         | Unapproved Drug              |
| IDOQU/HC/ GEL ALOE        | Not properly listed with FDA |
| IDOQUIMEZ CRE 1-1.9%      | Not properly listed with FDA |
| IODOSORB GEL              | Not properly listed with FDA |
| IODOSORB GEL 0.9%         | Not properly listed with FDA |
| IOHEXOL SOL 240MG/ML      | Diagnostic Agent             |
| IOHEXOL SOL 300MG/ML      | Diagnostic Agent             |
| IOPAMIDOL INJ 41%         | Diagnostic Agent             |
| IOPAMIDOL INJ 61%         | Diagnostic Agent             |
| ISOFLURANE SOL            | General Anesthetic           |
| ISOMETH/CAFF TAB /APAP    | Unapproved Drug              |
| ISOP ALCOHOL SOL 70%      | Not properly listed with FDA |
| ISOPROPANOL SOL 70%       | LIST                         |
| ISOSULFAN INJ BLUE 1%     | Diagnostic Agent             |
| ISOVACTIN AA POW PLUS     | Not properly listed with FDA |
| ISOVUE-200 INJ 41%        | Diagnostic Agent             |
| ISOVUE-250 INJ 51%        | Diagnostic Agent             |
| ISOVUE-250 INJ 51%MLTPK   | Diagnostic Agent             |
| ISOVUE-300 INJ 61%        | Diagnostic Agent             |
| ISOVUE-370 INJ 76%        | Diagnostic Agent             |
| ISOVUE-M 200 INJ 41%      | Diagnostic Agent             |
| ISOVUE-M 300 INJ 61%      | Diagnostic Agent             |
| ISOXSUPRINE TAB 10MG      | Unapproved Drug              |
| ISOXSUPRINE TAB HCL 20MG  | Unapproved Drug              |
| ITHOXIA CRE               | Not properly listed with FDA |
| IXINITY INJ 1000UNIT      | Blood Component              |
| IXINITY INJ 1500UNIT      | Blood Component              |
| IXINITY INJ 2000UNIT      | Blood Component              |
| IXINITY INJ 250UNIT       | Blood Component              |
| IXINITY INJ 3000UNIT      | Blood Component              |
| IXINITY INJ 500UNIT       | Blood Component              |
| JANSSEN VACC INJ COVID-19 | Unapproved Drug              |
| JENLIVA CAP               | Multi-vitamin w/ iron        |
| JEUVEAU INJ 100UNIT       | Cosmetic                     |
| JIVI INJ 1000UNIT         | Blood Component              |
| JIVI INJ 2000UNIT         | Blood Component              |
| JIVI INJ 3000UNIT         | Blood Component              |
| JIVI INJ 500 UNIT         | Blood Component              |
| JNT/TUNNEL/ KIT TRIGGER   | LIST                         |
| JOHNSON SOL GRASS         | Non-standardized allergenic  |
| JUNE GRASS SOL POLLEN     | Non-standardized allergenic  |
| JUST RIGHT GEL 5000       | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| K CITRATE SOL CITR ACD    | Unapproved Drug              |
| K.B.G.L IN CRE TERODERM   | Bulk Ingredient              |
| K/NA CITRATE SOL CITR ACD | Unapproved Drug              |
| KAMDOY EMU                | Device                       |
| KATARAXAP EMU             | Cosmetic                     |
| KATARVIA EMU 4-0.025%     | Cosmetic                     |
| KATARYA EMU               | Cosmetic                     |
| KATARYAXN EMU             | Cosmetic                     |
| KAXM EMU                  | Cosmetic                     |
| KCENTRA KIT 1000UNIT      | Blood Component              |
| KCENTRA KIT 500UNIT       | Blood Component              |
| KEDBUMIN INJ 25%          | Blood Component              |
| KEIDO EMU                 | Cosmetic                     |
| KELARX GEL                | Device                       |
| KERAGEL GEL WOUND         | Device                       |
| KERAGELT GEL              | Device                       |
| KERALYT GEL 6%            | Unapproved Drug              |
| KERALYT KIT SCALP 6%      | Unapproved Drug              |
| KERALYT SHA 6%            | Unapproved Drug              |
| KERAMATRIX MIS 10X10CM    | Device                       |
| KERAMATRIX MIS 5X5CM      | Device                       |
| KERLIX AMD MIS BANDAGE    | Not properly listed with FDA |
| KETALAR INJ 100MG/ML      | General Anesthetic           |
| KETALAR INJ 10MG/ML       | General Anesthetic           |
| KETALAR INJ 50MG/ML       | General Anesthetic           |
| KETAMIN/NACL INJ 10MG/ML  | General Anesthetic           |
| KETAMIN/NACL INJ 20MG/2ML | General Anesthetic           |
| KETAMIN/NACL INJ 50MG/5ML | General Anesthetic           |
| KETAMIN/NACL SOL 100/10ML | General Anesthetic           |
| KETAMIN/NACL SOL 20MG/2ML | General Anesthetic           |
| KETAMINE INJ 100MG/ML     | General Anesthetic           |
| KETAMINE INJ 10MG/ML      | General Anesthetic           |
| KETAMINE INJ 500/5ML      | General anesthetic           |
| KETAMINE INJ 50MG/ML      | General Anesthetic           |
| KETAMINE HCL INJ 0.6MG/ML | gENeral Anesthetic           |
| KETAMINE HCL INJ 100/10ML | General Anesthetic           |
| KETAMINE HCL INJ 100/2ML  | General Anesthetic           |
| KETAMINE HCL INJ 1MG/ML   | General Anesthetic           |
| KETAMINE HCL INJ 300/30ML | General Anesthetic           |
| KETAMINE HCL INJ 30MG/3ML | General Anesthetic           |
| KETAMINE HCL INJ 50MG/5ML | General Anesthetic           |
| KETAMINE HCL INJ NACL     | General Anesthetic           |
| KETAMINE HCL SOL          | General Anesthetic           |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| KETAMINE HCL SOL 20MG/2ML | General Anesthetic           |
| KETAMINE HCL SOL 50MG/ML  | General Anesthetic           |
| KETAMINE HCL TRO 100MG    | General Anesthetic           |
| KETARYA EMU               | Cosmetic                     |
| KETODAN KIT 2%            | LIST                         |
| KETOPHENE CRE RAPIDPAQ    | Unapproved Drug              |
| KETOROCAINE KIT -L        | LIST                         |
| KETOROCAINE KIT -LM       | LIST                         |
| KETOVIE LIQ               | Not properly listed with FDA |
| KETOVIE LIQ CHOCOLAT      | Not properly listed with FDA |
| KETOVIE LIQ PEPTIDE       | Not properly listed with FDA |
| KETOVIE LIQ UNFLAVOR      | Not properly listed with FDA |
| KETOVIE LIQ VANILLA       | Not properly listed with FDA |
| KEVARAXAP EMU             | Cosmetic                     |
| KEVARTIA EMU 6-0.05%      | Cosmetic                     |
| KEVARYA EMU               | Cosmetic                     |
| KEXM EMU                  | Cosmetic                     |
| KEYA EMU                  | Cosmetic                     |
| KEYFOLIC TAB              | Multi-vitamin                |
| KEYLOSA TAB               | Multi-vitamin                |
| KINEVAC INJ 5MCG          | Diagnostic Agent             |
| KIVIK EMU                 | Device                       |
| KLOR-CON/EF TAB 25MEQ FR  | Unapproved Drug              |
| KOATE INJ 1000UNIT        | Blood Component              |
| KOATE INJ 250UNIT         | Blood Component              |
| KOATE INJ 500 UNIT        | Blood Component              |
| KOATE-DVI INJ 1000UNIT    | Blood Component              |
| KOATE-DVI INJ 500UNIT     | Blood Component              |
| KOCHIA EXTRA INJ 1:20     | Non-standardized allergenic  |
| KOGENATE FS INJ 1000UNIT  | Blood Component              |
| KOGENATE FS INJ 2000UNIT  | Blood Component              |
| KOGENATE FS INJ 250UNIT   | Blood Component              |
| KOGENATE FS INJ 3000UNIT  | Blood Component              |
| KOGENATE FS INJ 500UNIT   | Blood Component              |
| KOSHR PRENAT TAB 30-1MG   | Vitamin/Mineral              |
| KOTARAXAP EMU             | Cosmetic                     |
| KOVALTRY INJ 1000UNIT     | Blood Component              |
| KOVALTRY INJ 2000UNIT     | Blood Component              |
| KOVALTRY INJ 250UNIT      | Blood Component              |
| KOVALTRY INJ 3000UNIT     | Blood Component              |
| KOVALTRY INJ 500UNIT      | Blood Component              |
| K-PHOS TAB                | Unapproved Drug              |
| K-PHOS TAB NEUTRAL        | Unapproved Drug              |

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| Label Name                           | Reason                                |
|--------------------------------------|---------------------------------------|
| K-PHOS TAB NO 2                      | Unapproved Drug                       |
| K-PRIME TAB 25MEQ EF                 | Unapproved Drug                       |
| KRISGEL 100 GEL                      | Not properly listed with FDA          |
| KUTAR EMU 8-0.025%                   | Cosmetic                              |
| KUTARVIA EMU 8-0.025%                | Cosmetic                              |
| KUTARYAXM EMU                        | Cosmetic                              |
| KUTARYAXMPA EMU                      | Cosmetic                              |
| KUTEA EMU                            | Cosmetic                              |
| KUVARYA EMU                          | Cosmetic                              |
| KUVARYE EMU                          | Cosmetic                              |
| KUXM EMU                             | Cosmetic                              |
| KYBELLA INJ                          | Cosmetic                              |
| KYMRIAH SUS                          | Covered under Part B; Blood Component |
| L.E.T. GEL                           | Not properly listed with FDA          |
| LACTEROL CAP                         | Dietary Supplement                    |
| LACTIC ACID CRE E                    | Unapproved Drug                       |
| LACTIC ACID LOT 10%                  | Unapproved Drug                       |
| LAGEVRIO CAP 200MG                   | LIST                                  |
| LAMBS QUARTE INJ 1:20                | Diagnostic Agent                      |
| LANOLIN OIN                          | Unapproved Drug                       |
| LANOLIN ANHY OIN                     | Not properly listed with FDA          |
| LANSOPRAZOLE SUS 3MG/ML              | Bulk Ingredient                       |
| L-ARGININE INJ 200MG/ML              | Unapproved Drug                       |
| LATISSE SOL 0.03%                    | Cosmetic                              |
| LAVARE WOUND GEL WASH                | Not properly listed with FDA          |
| L-CARNITINE INJ 500MG/ML             | Unapproved Drug                       |
| LDL CARE POW                         | Not properly listed with FDA          |
| LDO PLUS GEL 4%                      | LIST                                  |
| LECITHIN GEL                         | Not properly listed with FDA          |
| LECITHIN GRA                         | Not properly listed with FDA          |
| LEFLUNICLO PAK 20MG-1%               | Unapproved Drug                       |
| LENSCALE INJ 1:20                    | Non-standardized allergenic           |
| LEQEMBI SOL 200/2ML                  | LIST                                  |
| LEQEMBI SOL 500/5ML                  | LIST                                  |
| LETS KIT                             | Unapproved Drug                       |
| LEVA PELVIC KIT HEALTH               | Not properly listed with FDA          |
| LEVA SET KIT 2.5-2.5%                | LIST                                  |
| LEVATIO PAD 0.3-5%                   | Unapproved Drug                       |
| LEVBID TAB 0.375 ER                  | Unapproved Drug                       |
| LEVICYN GEL                          | Not properly listed with FDA          |
| LEVICYN SOL DERMAL                   | Not properly listed with FDA          |
| LEVOMEFOLATE CAP ALGAL 15-90.314 MG  | Not properly listed with FDA          |
| LEVOMEFOLATE CAP ALGAL 7.5-90.314 MG | Not properly listed with FDA          |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| LEVOMEFOLATE CAP DHA      | Vitamin/Mineral              |
| LEVSIN INJ 0.5MG/ML       | Unapproved Drug              |
| LEVSIN TAB 0.125MG        | Unapproved Drug              |
| LEVSIN/SL SUB 0.125MG     | Unapproved Drug              |
| LEXISCAN INJ 0.4MG        | Diagnostic Agent             |
| LEXTOL PAK                | Unapproved Drug              |
| LIDO BDK KIT              | Not properly listed with FDA |
| LIDO/EPI INJ 0.5%         | Not properly listed with FDA |
| LIDO/EPI INJ 1.5%         | Not properly listed with FDA |
| LIDO/EPI INJ 2%           | Not properly listed with FDA |
| LIDO/EPI INJ 2%           | Not properly listed with FDA |
| LIDO/EPI 1%- INJ 1:100000 | Not properly listed with FDA |
| LIDO/EPI 2% INJ 1:200000  | Not properly listed with FDA |
| LIDO/MENTHOL SPR 5-3%     | Unapproved Drug              |
| LIDO/PRILOCN KIT 2.5-2.5% | Not properly listed with FDA |
| LIDO/RAC/TET GEL          | Not properly listed with FDA |
| LIDOCAIN/EPI INJ 2%       | LIST                         |
| LIDOCAINE CRE 10%         | Bulk Ingredient              |
| LIDOCAINE CRE 3%          | Unapproved Drug              |
| LIDOCAINE CRE 5%          | Bulk Ingredient              |
| LIDOCAINE LOT 3%          | Unapproved Drug              |
| LIDOCAINE HC CRE 4.12%    | Unapproved Drug              |
| LIDOCAINE/HC CRE 3%-0.5%  | Unapproved Drug              |
| LIDOCAINE/HC KIT 2-2%     | Unapproved Drug              |
| LIDOCAINE/HC KIT 3%-0.5%  | Unapproved Drug              |
| LIDOCAINE/HC KIT 3%-1%    | Unapproved Drug              |
| LIDOCAINE/HC KIT 3-2.5%   | Unapproved Drug              |
| LIDOCAINE/PH SOL 1-1.5%   | Unapproved Drug              |
| LIDOCORT CRE 3-0.5%       | Unapproved Drug              |
| LIDO-EP-TETR GEL          | Not properly listed with FDA |
| LIDO-EP-TETR SOL          | Unapproved Drug              |
| LIDOGEL GEL 2.8%          | LIST                         |
| LIDO-HYDRO GEL 2.8-0.55   | Unapproved Drug              |
| LIDOLITE KIT 5%           | LIST                         |
| LIDOLOG KIT               | LIST                         |
| LIDOMAR INJ               | Not properly listed with FDA |
| LIDOMARK 1/5 KIT          | LIST                         |
| LIDOMARK 2/5 KIT          | LIST                         |
| LIDOPAC KIT 5%            | Not properly listed with FDA |
| LIDO-PHENYL INJ 1-1.5%    | Unapproved Drug              |
| LIDOPIN CRE 3%            | Unapproved Drug              |
| LIDOPIN CRE 3.25%         | Unapproved Drug              |
| LIDOPRIL KIT 2.5-2.5%     | LIST                         |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| LIDOPRIL XR KIT 2.5-2.5%  | LIST                         |
| LIDOPURE KIT 5%           | LIST                         |
| LIDORX GEL 3%             | Not properly listed with FDA |
| LIDOSOL KIT 5%            | LIST                         |
| LIDOSOL-50 KIT 5%         | LIST                         |
| LIDO-SORB LOT 3%          | Unapproved Drug              |
| LIDOSTREAM KIT 5% & 10%   | LIST                         |
| LIDOTHOL GEL 4.5-5%       | Not properly listed with FDA |
| LIDOTHOL PAD 4.5-5%       | Unapproved Drug              |
| LIDOTRAL CRE 3.88%        | Unapproved Drug              |
| LIDOTRAN CRE 3.88%        | Not properly listed with FDA |
| LIDOTREX GEL 2%           | Not properly listed with FDA |
| LIDOVIX L KIT 5%          | LIST                         |
| LIDTOPIC MAX CRE 10%      | Not properly listed with FDA |
| LIFEMS NALOX INJ 2MG/2ML  | LIST                         |
| LIMBREL CAP 250MG         | Medical Food                 |
| LIMBREL CAP 500MG         | Medical Food                 |
| LIMBREL250 CAP 250-50MG   | Medical Food                 |
| LIMBREL500 CAP 500-50MG   | Medical Food                 |
| LIPIODOL INJ              | Diagnostic Agent             |
| LIPO INJ 50-50-25         | Unapproved Drug              |
| LIPO CREAM CRE BASE       | Not properly listed with FDA |
| LIPO-B INJ                | Vitamin/Mineral              |
| LIPO-C INJ                | Unapproved Drug              |
| LIPOCREAM CRE BASE        | Not properly listed with FDA |
| LIPOFOAM RX AER           | Not properly listed with FDA |
| LIPOLAYER CRE             | Not properly listed with FDA |
| LIPOPEN ABSO CRE ENHANCNG | Not properly listed with FDA |
| LIPOPEN ULTR CRE BASE     | Not properly listed with FDA |
| LIPOSOMAL CRE HEAVY       | Not properly listed with FDA |
| LIPOSOMAL CRE REGULAR     | Not properly listed with FDA |
| LIPOZYME CRE              | Not properly listed with FDA |
| LIQUIHEP KIT 500UNIT      | Diagnostic Agent             |
| LIQUIHEP II KIT 500UNIT   | Diagnostic Agent             |
| LIQUILIFT KIT TRACE       | Not properly listed with FDA |
| LITH HEPARIN KIT 100UNIT  | Diagnostic Agent             |
| LITH HEPARIN KIT 500UNIT  | Diagnostic Agent             |
| LITH HEPARIN KIT 70UNIT   | Diagnostic Agent             |
| LIVIXIL PAK KIT 2.5-2.5%  | LIST                         |
| L-LYSINE HCL INJ 100MG/ML | Unapproved Drug              |
| LM PLUS RELI PAD 3.5%-7%  | Unapproved Drug              |
| L-MESITRAN GEL SOFT       | Not properly listed with FDA |
| L-METHYL- TAB B6-B12      | Vitamin/Mineral              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| L-METHYLFOLA CAP ALGAL    | Not properly listed with FDA |
| L-METHYLFOLA CAP FORM 15  | Not properly listed with FDA |
| L-METHYLFOLA CAP FORM 7.5 | Not properly listed with FDA |
| L-METHYLFOLA CAP FORTE    | Not properly listed with FDA |
| L-METHYLFOLA CAP FORTE 15 | Not properly listed with FDA |
| L-METHYLFOLA TAB 15MG     | Medical Food                 |
| L-METHYLFOLA TAB 7.5MG    | Medical Food                 |
| L-METHYL-MC TAB           | Vitamin/Mineral              |
| L-METHYL-MC TAB NAC       | Unapproved Drug              |
| LMR PLUS KIT              | LIST                         |
| LMTHF/B6/B12 TAB          | Vitamin/Mineral              |
| LOBSTER EXT INJ 1:20      | Diagnostic Agent             |
| LOCAMETZ INJ 25MCG        | Diagnostic Agent             |
| LOMAIRA TAB 8MG           | Anorexic, Anti-obesity Agent |
| LOPROX KIT 0.77%          | LIST                         |
| LORMATE CAP               | Dietary Supplement           |
| LORVATUS KIT PHARMAPA     | LIST                         |
| LOUTREX CRE               | LIST                         |
| LOYON SOL                 | Not properly listed with FDA |
| LP LITE PAK KIT 2.5-2.5%  | Unapproved Drug              |
| LUCIRA KIT COVID-19       | Diagnostic Agent             |
| LUCIRA COVID KIT FLU TEST | Diagnostic Agent             |
| LUGOLS SOL IODINE         | Unapproved Drug              |
| LUKAID GLA EMU 1GM/ML     | Unapproved Drug              |
| LUMASON INJ 60.7-25       | Diagnostic Agent             |
| LUMINOPIA MIS             | Not properly listed with FDA |
| LURADROX GEL 0.1%         | Surgical Supply/Medical      |
| LUXAMEND CRE              | Not properly listed with FDA |
| LYDEXA CRE 4.12%          | Unapproved Drug              |
| LYFGENIA SUS              | LIST                         |
| LYMPHOSEEK INJ FOR PREP   | Diagnostic Agent             |
| LYRA DIRECT KIT COV-2     | Diagnostic Agent             |
| LYRA SARS KIT COV-2       | Diagnostic Agent             |
| LYSIPLEX TAB PLUS         | Vitamin/Mineral              |
| M.V.I PEDIAT INJ          | Vitamin/Mineral              |
| M.V.I. ADULT INJ          | Vitamin/Mineral              |
| MACRILEN PAK 60MG         | Diagnostic Agent             |
| MAGNESIUM CL INJ 20%      | Unapproved Drug              |
| MAHANA IBS MIS            | LIST                         |
| MAKENA INJ 250MG/ML       | LIST                         |
| MAKENA INJ 275MG          | LIST                         |
| MARBETA-25 KIT            | LIST                         |
| MARBETA-L KIT             | LIST                         |

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| Label Name                | Reason  |
|---------------------------|---|
| MARCAINE INJ SPINAL       | Not properly listed with FDA                          |
| MARCAINE/EPI INJ 0.25%    | LIST  |
| MARCAINE/EPI INJ 0.25%    | Not properly listed with FDA                          |
| MARCAINE/EPI INJ 0.5%     | LIST  |
| MARCAINE/EPI INJ 0.5%     | Not properly listed with FDA                          |
| MARDEX-25 KIT             | LIST  |
| MARLIDO KIT               | LIST  |
| MARLIDO-25 KIT            | LIST  |
| MARSH ELDER INJ 1:20      | Non-standardized allergenic                           |
| MARVONA KIT 0.5%          | LIST  |
| MAS CARE-PAK KIT 10MG/ML  | LIST  |
| MD-76 R INJ               | Diagnostic Agent                                      |
| ME/NAPHOS/MB TAB HYO 1    | Unapproved Drug                                       |
| MEADOW FESCU INJ 100000BA | Non-standardized allergenic                           |
| MEBOLIC TAB               | Vitamin/Mineral                                       |
| MEBROFENIN KIT 99M        | Diagnostic Agent                                      |
| MEDACTIV TAB              | Anorexic, Anti-obesity Agent                          |
| MEDCATED DNA KIT COLLECT  | Diagnostic Agent                                      |
| MEDCATED DNA KIT COLLECT2 | Diagnostic Agent                                      |
| MEDIDERM CRE              | Not properly listed with FDA                          |
| MEDIHOL BASE GEL          | Not properly listed with FDA                          |
| MEDIHONEY GEL WOUND       | Not properly listed with FDA                          |
| MEDIHONEY PAD 2"X2"       | Not properly listed with FDA                          |
| MEDIHONEY PAD 3/4"X12"    | Not properly listed with FDA                          |
| MEDIHONEY PAD 4"X5"       | Not properly listed with FDA                          |
| MEDIHONEY PST WOUND       | Not properly listed with FDA                          |
| MEDROLOAN KIT 40MG/ML     | LIST  |
| MEDROLOAN II KIT 40MG/ML  | LIST  |
| MEDRONATE KIT 99M         | Diagnostic Agent                                      |
| MELALEUCA INJ 1:20        | Non-standardized allergenic                           |
| MELPHALAN TAB 2MG         | Oral drug for cancer; infusion available under Part B |
| MENOPUR INJ 75UNIT        | Fertility Agent                                       |
| MEPHYTON TAB 5MG          | Vitamin/Mineral                                       |
| MEPILEX AG PAD 4"X4"      | Surgical Supply/Medical                               |
| MESQUITE SOL EXTRACT      | Non-standardized allergenic                           |
| METAFOLBIC TAB            | Vitamin/Mineral                                       |
| METAFOLBIC TAB PLUS       | Vitamin/Mineral                                       |
| METAFOLBIC TAB PLUS RF    | Vitamin/Mineral                                       |
| METANX CAP                | Vitamin/Mineral                                       |
| METAXALL CP KIT 0.025%    | Not properly listed with FDA                          |
| METHACHOLINE KIT CHLORIDE | Diagnostic Agent                                      |
| METHAVER CAP              | Unapproved Drug                                       |
| METHAZEL CAP              | Unapproved Drug                                       |



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| Label Name                 | Reason                       |
|----------------------------|------------------------------|
| METHENAM MAN TAB 1000MG    | Unapproved Drug              |
| METHENAM MAN TAB 1GM       | Unapproved Drug              |
| METHENAM MAN TAB 500MG     | Unapproved Drug              |
| METHIO/INOS/ INJ CHOL/B12  | Vitamin/Mineral              |
| METHOHEX SOD INJ 100/10ML  | General Anesthetic           |
| METHYL BLUE INJ 1%         | Unapproved Drug              |
| METHYL SALIC LIQ           | Not properly listed with FDA |
| METHYLCOBALA INJ 10000MCG  | Unapproved Drug              |
| METHYLCOBALA INJ 10MG/ML   | Vitamin/Mineral              |
| METHYLCOBALA INJ 1MG/ML    | Vitamin/Mineral              |
| METHYLCOBALA INJ 50000MCG  | Unapproved Drug              |
| METHYLCOBALA INJ 5MG/ML    | Vitamin/Mineral              |
| METHYLENE BL INJ 1%        | Unapproved Drug              |
| METHYLENE BL INJ 20MG/2ML  | Unapproved Drug              |
| METHYLFOL/CA TAB ME-CBL    | Vitamin/Mineral              |
| METHYLFOL/ME CAP CBL/P5P   | Vitamin/Mineral              |
| METOPIRONE CAP 250MG       | Diagnostic Agent             |
| METRONIDAZOL SUS 50MG/ML   | LIST                         |
| MICROCYN GEL               | Not properly listed with FDA |
| MICROCYN GEL SKIN/WOU      | Not properly listed with FDA |
| MICROCYN LIQ               | Not properly listed with FDA |
| MICROPLEGIA INJ MSA/MSG    | Not properly listed with FDA |
| MIDAZO/NAACL INJ 100/100   | General Anesthetic           |
| MIDAZOL NAACL SOL 30/30ML  | General Anesthetic           |
| MIDAZOL/NAACL INJ 50/50ML  | General anesthetic           |
| MIDAZOL/NAACL INJ 60/30ML  | General Anesthetic           |
| MIDAZOL/NAACL SOL 100/100  | General Anesthetic           |
| MIDAZOL/NAACL SOL 100/100  | General Anesthetic           |
| MIDAZOL/NAACL SOL 100MG    | General Anesthetic           |
| MIDAZOL/NAACL SOL 2MG/2ML  | General Anesthetic           |
| MIDAZOL/NAACL SOL 50/100ML | General Anesthetic           |
| MIDAZOL/NAACL SOL 50/50ML  | General Anesthetic           |
| MIDAZOL/NAACL SOL 55/55ML  | General Anesthetic           |
| MIDAZOL/NAACL SOL 5MG/5ML  | General Anesthetic           |
| MIDAZOLAM INJ 10/10ML      | General Anesthetic           |
| MIDAZOLAM INJ 10MG/2ML     | General Anesthetic           |
| MIDAZOLAM INJ 1MG/ML       | General Anesthetic           |
| MIDAZOLAM INJ 25MG/5ML     | General Anesthetic           |
| MIDAZOLAM INJ 2MG/2ML      | General Anesthetic           |
| MIDAZOLAM INJ 30MG/30ML    | General Anesthetic           |
| MIDAZOLAM INJ 50/10ML      | General Anesthetic           |
| MIDAZOLAM INJ 50/50ML      | General Anesthetic           |
| MIDAZOLAM INJ 50MG/10      | General Anesthetic           |

## MEDICARE PART D EXCLUDED DRUGS LIST 2024\_updated January 2024

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| MIDAZOLAM INJ 5MG/5ML    | General Anesthetic           |
| MIDAZOLAM INJ 5MG/ML     | General Anesthetic           |
| MIDAZOLAM INJ 5MG/ML     | General Anesthetic           |
| MIDAZOLAM INJ 5MG/ML     | General Anesthetic           |
| MIDAZOLAM INJ NACL       | General Anesthetic           |
| MIDAZOLAM SOL /NACL      | General Anesthetic           |
| MIDAZOLAM SOL 100MG      | General Anesthetic           |
| MIDAZOLAM SOL 2MG/2ML    | General Anesthetic           |
| MIDAZOLAM SOL 50/50      | General Anesthetic           |
| MIDAZOLAM SOL NACL       | General Anesthetic           |
| MIDAZOLAM SUS 1MG/ML     | General Anesthetic           |
| MIDAZOLAM SYP 10MG/5ML   | General Anesthetic           |
| MIDAZOLAM SYP 2MG/ML     | General Anesthetic           |
| MIDAZOLAM SYP 5/2.5ML    | General Anesthetic           |
| MIDAZOL-NACL INJ         | General anesthetic           |
| MIDAZOL-NACL INJ 100/100 | General Anesthetic           |
| MIGRANOW PAK             | LIST                         |
| MIMYX CRE                | Not properly listed with FDA |
| MINERAL OIL HEAVY        | Not properly listed with FDA |
| MITE SOL D.FARINA        | LIST                         |
| MITE SOL D.PTERON        | LIST                         |
| MITE SOL EXTRACT         | Non-standardized allergenic  |
| MITE SOL EXTRACT         | Non-standardized allergenic  |
| MITOMYCIN SOL 20MG       | Unapproved Drug              |
| MIXED SOL FEATHERS       | Non-standardized allergenic  |
| MIXED SOL RAGWEED        | Non-standardized allergenic  |
| MIXED VESPID INJ 1650MCG | Non-standardized allergenic  |
| MIXED VESPID INJ 3900MCG | Non-standardized allergenic  |
| MKO MELT PK TRO 3-25-2MG | General Anesthetic           |
| MLK F1 KIT               | LIST                         |
| MLK F2 KIT               | LIST                         |
| MLK F3 KIT               | LIST                         |
| MLK F4 KIT               | LIST                         |
| MLP A-2 KIT              | LIST                         |
| M-NATAL PLUS TAB         | Vitamin/Mineral              |
| MODERNA INJ 6MO-11Y      | LIST                         |
| MODERNA INJ BIVALENT     | Unapproved Drug              |
| MODERNA BIV INJ 6M-5Y    | Unapproved Drug              |
| MODERNA BIVA INJ BA4/BA5 | Unapproved Drug              |
| MODERNA VAC INJ 50/0.5ML | Unapproved Drug              |
| MODERNA VAC INJ COVID-19 | Unapproved Drug              |
| MODERNA VACC INJ 6-11Y   | Unapproved Drug              |
| MODERNA VACC INJ 6M-5Y   | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| MODIA MIS                 | Not properly listed with FDA |
| MOMETACURE PAK 0.1%-5%    | Unapproved Drug              |
| MONOFERRIC INJ 1000/10    | LIST                         |
| MONONINE INJ 1000UNIT     | Blood Component              |
| MONOVISC INJ 88MG/4ML     | Surgical Supply/Medical      |
| MONSELS FERR SOL SUBSULF  | Unapproved Drug              |
| MORCIN CRE                | Unapproved Drug              |
| MORGIDOX KIT 1X50MG       | LIST                         |
| MORPHINE SUL INJ 1MG/ML   | Unapproved Drug              |
| MORPHINE SUL INJ 50MG/ML  | Unapproved Drug              |
| MORPHINE SUL INJ 5MG/5ML  | Not properly listed with FDA |
| MORPHINE SUL SUP 10MG     | Not properly listed with FDA |
| MORPHINE SUL SUP 20MG     | Not properly listed with FDA |
| MORPHINE SUL SUP 30MG     | Not properly listed with FDA |
| MORPHINE SUL SUP 5MG      | Not properly listed with FDA |
| MOSQUITO INJ 1:100        | Non-standardized allergenic  |
| MOUNTAIN SOL CEDAR        | Non-standardized allergenic  |
| MOUNTAIN CED INJ 1:20     | Non-standardized allergenic  |
| MOUNTAIN CED INJ 1:20     | Diagnostic Agent             |
| MOUSE EPITHE INJ 1:20     | Non-standardized allergenic  |
| MOXICAINE KIT             | Unapproved Drug              |
| MOXIFLOXACIN INJ 0.1%     | Not properly listed with FDA |
| MOXIFLOXACIN INJ 0.3MG    | Unapproved Drug              |
| MOXIFLOXACIN INJ 1MG/ML   | Not properly listed with FDA |
| MOXIFLOXACIN SOL 1MG/ML   | Not properly listed with FDA |
| MOXIFLOXACIN SOL 5MG/ML   | Unapproved Drug              |
| MPM PAK MIS               | LIST                         |
| MSUD EASY TAB             | Not properly listed with FDA |
| MUCOR INJ 1:20            | LIST                         |
| MUCOSITISRX POW           | Not properly listed with FDA |
| MUGWORT SOL EXTRACT       | Non-standardized allergenic  |
| MULTI- KIT SPECIALT       | LIST                         |
| MULTI VIT/FL CHW 0.25MG   | Vitamin/Mineral              |
| MULTIBASE CRE             | Not properly listed with FDA |
| MULTIHANCE SOL            | Diagnostic Agent             |
| MULTI-MAC TAB             | Multi-vitamin w/ iron        |
| MULTI-PHASIC CRE CMPD     | Not properly listed with FDA |
| MULTIPRO CAP              | Multi-vitamin                |
| MULTITRACE-4 INJ CONC     | Unapproved Drug              |
| MULTITRACE-4 INJ NEONATAL | Unapproved Drug              |
| MULTITRACE-4 INJ PED      | Unapproved Drug              |
| MULTIV/FLUOR CHW 0.25-0.3 | Vitamin/Mineral              |
| MULTIV/FLUOR CHW 0.5-0.3  | Vitamin/Mineral              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| MULTIV/FLUOR CHW 1-0.3MG  | Vitamin/Mineral              |
| MULTIVIT/FL CHW 0.25MG    | Vitamin/Mineral              |
| MULTIVIT/FL CHW 0.5MG     | Vitamin/Mineral              |
| MULTIVIT/FL CHW 1MG       | Vitamin/Mineral              |
| MULTI-VIT/FL DRO /FE 0.25 | Vitamin/Mineral              |
| MULTI-VIT/FL DRO 0.25MG   | Vitamin/Mineral              |
| MULTI-VIT/FL DRO 0.5MG/ML | Vitamin/Mineral              |
| MULTI-VIT-FL CHW 0.25MG   | Multi-vitamin w/flouride     |
| MULTI-VIT-FL CHW 0.5MG    | Multi-vitamin w/flouride     |
| MULTI-VIT-FL CHW 1MG      | Multi-vitamin                |
| MULTRY5 INJ               | LIST                         |
| MUSE SUP 1000MCG          | Erectile Dysfunction         |
| MUSE SUP 250MCG           | Erectile Dysfunction         |
| MUSE SUP 500MCG           | Erectile Dysfunction         |
| MYCOZYL AL SOL 1%         | Unapproved Drug              |
| MYDRIACYL SOL 1% OP       | Diagnostic Agent             |
| MYLERAN TAB 2MG           | LIST                         |
| MYNATAL CAP               | Vitamin/Mineral              |
| MYNATAL PLUS TAB          | Vitamin/Mineral              |
| MYNATAL-Z TAB             | Vitamin/Mineral              |
| MYNEPHROCAPS CAP          | Vitamin/Mineral              |
| MYNEPHRON CAP             | Vitamin/Mineral              |
| MYOVIEW KIT               | Diagnostic Agent             |
| MYOVIEW KIT 30ML          | Diagnostic Agent             |
| NABI-HB INJ               | Hepatitis B Vaccine          |
| NACL/BACT INJ 0.9%BENZ    | LIST                         |
| NAFRINSE CHW 1MG F        | Unapproved Drug              |
| NAFRINSE DRO 0.125MG      | Unapproved Drug              |
| NAFRINSE SOL DAILY        | Unapproved Drug              |
| NAFRINSE DLY SOL /NEUTRAL | Unapproved Drug              |
| NAFRINSE WK SOL 0.2%      | Unapproved Drug              |
| NAPRO CRE 15%             | Not properly listed with FDA |
| NAPROTIN KIT              | Unapproved Drug              |
| NAPROXEN CRE              | Bulk Ingredient              |
| NAPROXEN CRE 10%          | Bulk Ingredient              |
| NAPROXEN KIT COMFORT      | LIST                         |
| NASCOBAL SPR 500MCG       | Vitamin/Mineral              |
| NATACHEW CHW              | Vitamin/Mineral              |
| NATACREAM CRE             | Not properly listed with FDA |
| NATAL PNV TAB             | Multi-vitamin w/ iron        |
| NATALVIT TAB 75-1MG       | Vitamin/Mineral              |
| NATELLE ONE CAP           | Vitamin/Mineral              |
| NATURAL CRE               | Not properly listed with FDA |

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| NEBUSAL NEB 3%           | Device                       |
| NEBUSAL NEB 6%           | Device                       |
| NEEVO DHA CAP 27-1.13    | Vitamin/Mineral              |
| NEOKE BHB POW            | Not properly listed with FDA |
| NEONATAL TAB COMPLTE     | Vitamin/Mineral              |
| NEONATAL 19 TAB          | Multi-vitamin                |
| NEONATAL FE TAB          | Multi-vitamin w/ iron        |
| NEONATAL PLS TAB 27-1MG  | Vitamin/Mineral              |
| NEONATAL/DHA MIS         | Multi-vitamin                |
| NEOSALUS AER             | Device                       |
| NEOSALUS CRE             | Device                       |
| NEOSALUS LOT             | Device                       |
| NEOSTIG METH INJ 2MG/2ML | Not properly listed with FDA |
| NEOSTIG METH INJ 4MG/4ML | Not properly listed with FDA |
| NEOSTIG METH INJ 5MG/5ML | Not properly listed with FDA |
| NEOSTIGMINE INJ 5MG/5ML  | LIST                         |
| NEO-SYNALAR KIT          | LIST                         |
| NEPHPLEX RX TAB          | Vitamin/Mineral              |
| NEPHRONEX TAB            | Vitamin/Mineral              |
| NESTABS TAB              | Vitamin/Mineral              |
| NESTABS DHA PAK          | Vitamin/Mineral              |
| NESTABS ONE CAP          | Vitamin/Mineral              |
| NETSPOT KIT              | Diagnostic Agent             |
| NETTLE INJ 1:40          | Non-standardized allergenic  |
| NETTLE INJ 1:40          | Diagnostic Agent             |
| NEUAC KIT 1.2-5%         | LIST                         |
| NEULUMEX SUS 0.1%        | Diagnostic Agent             |
| NEURACEQ INJ 1.4-135     | Diagnostic Agent             |
| NEURAPTINE CRE 10%       | Not properly listed with FDA |
| NEURIN-SL SUB            | Vitamin/Mineral              |
| NEUROLITE KIT            | Diagnostic Agent             |
| NEUTRASAL POW            | Not properly listed with FDA |
| NEXA PLUS CAP            | Vitamin/Mineral              |
| NEXAVIR INJ              | Unapproved Drug              |
| NICADAN TAB              | Vitamin/Mineral              |
| NICAPRIN TAB             | Vitamin/Mineral              |
| NICAZEL TAB              | Vitamin/Mineral              |
| NICAZEL TAB FORTE        | Vitamin/Mineral              |
| NICAZYME TAB             | Dietary Supplement           |
| NICOMIDE TAB             | Vitamin/Mineral              |
| NICOMIDE TAB             | Vitamin/Mineral              |
| NICOTINAMIDE TAB         | Multi-vitamin                |
| NIMBEX INJ 10MG/ML       | LIST                         |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| NIMBEX INJ 2MG/ML         | LIST                         |
| NIMBEX INJ 2MG/ML         | LIST                         |
| NITRIVIA CAP              | Multi-vitamin                |
| NITRO-TIME CAP 2.5MG CR   | Unapproved Drug              |
| NITRO-TIME CAP 6.5MG CR   | Unapproved Drug              |
| NITRO-TIME CAP 9MG CR     | Unapproved Drug              |
| NIVA THYROID TAB 120MG    | Unapproved Drug              |
| NIVA THYROID TAB 15MG     | Unapproved Drug              |
| NIVA THYROID TAB 30MG     | Unapproved Drug              |
| NIVA THYROID TAB 60MG     | Unapproved Drug              |
| NIVA THYROID TAB 90MG     | Unapproved Drug              |
| NIVA-FOL TAB              | Vitamin/Mineral              |
| NIVA-PLUS TAB             | Vitamin/Mineral              |
| NIVATOPIC CRE PLUS        | LIST                         |
| NOCLOT-50 SOL ACD-A       | Not properly listed with FDA |
| NORML SALINE INJ IV FLUSH | Not properly listed with FDA |
| NORMLGEL AG GEL           | Device                       |
| NOURILITE CRE             | Not properly listed with FDA |
| NOURIVAN CRE ANTIOX       | Not properly listed with FDA |
| NOVAVAX INJ 2023-24       | not properly listed with FDA |
| NOVAVAX VAC INJ COVID-19  | Unapproved Drug              |
| NOVITE CAP MULTIVIT       | Multi-vitamin                |
| NOVOEIGHT INJ 1000UNIT    | Blood Component              |
| NOVOEIGHT INJ 1500UNIT    | Blood Component              |
| NOVOEIGHT INJ 2000UNIT    | Blood Component              |
| NOVOEIGHT INJ 250UNIT     | Blood Component              |
| NOVOEIGHT INJ 3000UNIT    | Blood Component              |
| NOVOEIGHT INJ 500UNIT     | Blood Component              |
| NOVOSEVEN RT INJ 1MG      | Blood Component              |
| NOVOSEVEN RT INJ 2MG      | Blood Component              |
| NOVOSEVEN RT INJ 5MG      | Blood Component              |
| NOVOSEVEN RT INJ 8MG      | Blood Component              |
| NP THYROID TAB 120MG      | Unapproved Drug              |
| NP THYROID TAB 15MG       | Unapproved Drug              |
| NP THYROID TAB 30MG       | Unapproved Drug              |
| NP THYROID TAB 60MG       | Unapproved Drug              |
| NP THYROID TAB 90MG       | Unapproved Drug              |
| NUCARACLINPA KIT          | LIST                         |
| NUCARARXPAK KIT           | LIST                         |
| NUCORT LOT 2%             | Unapproved Drug              |
| NUDERMRXPAK PAK 120       | LIST                         |
| NUDERMRXPAK PAK 60        | LIST                         |
| NUDICLO PAK SOLUPAK       | LIST                         |

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| Label Name              | Reason                       |
|-------------------------|------------------------------|
| NUDICLO PAK TABPAK      | LIST                         |
| NUDROXIPAK KIT DSDR-50  | LIST                         |
| NUDROXIPAK KIT DSDR-75  | LIST                         |
| NUDROXIPAK KIT E-400    | LIST                         |
| NUDROXIPAK KIT I-800    | LIST                         |
| NUDROXIPAK KIT M-15     | LIST                         |
| NUDROXIPAK KIT N-500    | LIST                         |
| NUDROXIPAK PAK          | LIST                         |
| NUFOL TAB               | Vitamin/Mineral              |
| NUJU CRE 0.1%           | Not properly listed with FDA |
| NULEV TAB 0.125MG       | Unapproved Drug              |
| NUMOISYN LIQ            | Unapproved Drug              |
| NUMOISYN LOZ            | Unapproved Drug              |
| NUSURGEPAK KIT SURGICAL | LIST                         |
| NUTRASEB CRE            | Not properly listed with FDA |
| NUTRIARX KIT CREAMPAK   | LIST                         |
| NUTRICAP TAB            | Vitamin/Mineral              |
| NUTRIFAC ZX TAB         | Vitamin/Mineral              |
| NUTRIVIT LIQ 800-15-1   | Vitamin/Mineral              |
| NUVAIL SOL 16%          | Device                       |
| NUVAKAAN II KIT         | LIST                         |
| NUWIQ INJ 1000UNIT      | Blood Component              |
| NUWIQ INJ 1500UNIT      | Blood Component              |
| NUWIQ INJ 2000UNIT      | Blood Component              |
| NUWIQ INJ 2500UNIT      | Blood Component              |
| NUWIQ INJ 250UNIT       | Blood Component              |
| NUWIQ INJ 3000UNIT      | Blood Component              |
| NUWIQ INJ 4000UNIT      | Blood Component              |
| NUWIQ INJ 500UNIT       | Blood Component              |
| NUWIQ KIT 1000UNIT      | Blood Component              |
| NUWIQ KIT 1500UNIT      | Blood Component              |
| NUWIQ KIT 2000UNIT      | Blood Component              |
| NUWIQ KIT 2500UNIT      | Blood Component              |
| NUWIQ KIT 250UNIT       | Blood Component              |
| NUWIQ KIT 3000UNIT      | Blood Component              |
| NUWIQ KIT 4000UNIT      | Blood Component              |
| NUWIQ KIT 500UNIT       | Blood Component              |
| NYNUTEY CRE 23-7%       | Not properly listed with FDA |
| OAT INJ 1:20            | Diagnostic Agent             |
| OAT GRAIN INJ EXTRACT   | Diagnostic Agent             |
| OB COMPLETE CAP ONE     | Vitamin/Mineral              |
| OB COMPLETE CAP PETITE  | Vitamin/Mineral              |
| OB COMPLETE TAB         | Vitamin/Mineral              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| OB COMPLETE TAB PREMIER   | Vitamin/Mineral              |
| OB COMPLETE/ CAP DHA      | Vitamin/Mineral              |
| OBIZUR INJ 500 UNIT       | Blood Component              |
| OBSTETRIX EC TAB          | Vitamin/Mineral              |
| OBSTETRX ONE CAP 38-1-225 | Vitamin/Mineral              |
| O-CAL FA TAB              | Vitamin/Mineral              |
| OCCLUVAN OIN              | Not properly listed with FDA |
| OCTAPLAS INJ GROUP A      | Blood Component              |
| OCTAPLAS INJ GROUP AB     | Blood Component              |
| OCTAPLAS INJ GROUP B      | Blood Component              |
| OCTAPLAS INJ GROUP O      | Blood Component              |
| OLIVE TREE INJ 1:20       | Non-standardized allergenic  |
| OMEPRAZOLE + SUS SYRSPEND | Not properly listed with FDA |
| OMISIRGE SUS              | LIST                         |
| OMNIBASE CRE              | Not properly listed with FDA |
| OMNIFLEX DPR              | Device                       |
| OMNIPAQUE INJ 140MG/ML    | Diagnostic Agent             |
| OMNIPAQUE INJ 180MG/ML    | Diagnostic Agent             |
| OMNIPAQUE INJ 240MG/ML    | Diagnostic Agent             |
| OMNIPAQUE INJ 300MG/ML    | Diagnostic Agent             |
| OMNIPAQUE INJ 350MG/ML    | Diagnostic Agent             |
| OMNIPAQUE SOL 12MG/ML     | Diagnostic Agent             |
| OMNIPAQUE SOL 300MG/ML    | Diagnostic Agent             |
| OMNIPAQUE SOL 9MG/ML      | Diagnostic Agent             |
| OMNISCAN INJ 287MG/ML     | Diagnostic Agent             |
| OMNISCAN INJ 287MG/ML     | Diagnostic Agent             |
| OMNIVEX TAB               | Dietary Supplement           |
| ONE VITE TAB 1MG PLUS     | Multi-vitamin w/ iron        |
| ONYCHO-MED KIT 250MG-2%   | Unapproved Drug              |
| ONZDEAXIADEM GEL TAR      | Not properly listed with FDA |
| ONZDEAXIADEM GEL VAR      | Not properly listed with FDA |
| ONZDEAXIATAR GEL          | Not properly listed with FDA |
| ONZDEAXIAVAR GEL          | Not properly listed with FDA |
| ONZDEAXIAZAR GEL          | Not properly listed with FDA |
| ONZDEOXIA GEL 1-5-4%      | Not properly listed with FDA |
| OPIUM TIN 10MG/ML         | Unapproved Drug              |
| OPTISON INJ               | Diagnostic Agent             |
| ORA-BLEND SUS             | Not properly listed with FDA |
| ORA-BLEND SF SUS          | Not properly listed with FDA |
| ORABLOC INJ 4%-1:100000   | LIST                         |
| ORABLOC INJ 4%-1:200000   | LIST                         |
| ORACIT SOL                | Unapproved Drug              |
| ORAFATE PST 10%           | Not properly listed with FDA |



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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ORAGENOMIC KIT MEDICATE   | Diagnostic Agent             |
| ORANGE INJ EXTRACT        | Diagnostic Agent             |
| ORANGE EXT INJ 1:20       | Diagnostic Agent             |
| ORAPENN SD LIQ SWEET      | Not properly listed with FDA |
| ORAPEUTIC GEL             | Surgical Supply/Medical      |
| ORA-PLUS LIQ              | Not properly listed with FDA |
| ORA-SWEET SYP             | Not properly listed with FDA |
| ORA-SWEET SF SYP          | Not properly listed with FDA |
| ORCHARD GRAS INJ 100000BA | Non-standardized allergenic  |
| OREGON ASH INJ 1:20       | Non-standardized allergenic  |
| ORLISTAT CAP 120MG        | Anorexic, Anti-obesity Agent |
| ORMECA KIT                | Not properly listed with FDA |
| ORTHO DF CAP 1-3775IU     | Dietary Supplement           |
| ORTHOVISC INJ 15MG/ML     | Surgical Supply/Medical      |
| OSCIMIN SUB 0.125MG       | Unapproved Drug              |
| OSCIMIN TAB 0.125MG       | Unapproved Drug              |
| OSCIMIN TAB 0.125MG       | Unapproved Drug              |
| OSTACHOL TAB              | Dietary Supplement           |
| OVACE PLUS AER 9.8%       | Unapproved Drug              |
| OVACE PLUS CRE 10%        | Unapproved Drug              |
| OVACE PLUS GEL 10% WASH   | Unapproved Drug              |
| OVACE PLUS LIQ 10% WASH   | Unapproved Drug              |
| OVACE PLUS LOT 9.8%       | Unapproved Drug              |
| OVACE PLUS SHA 10%        | Unapproved Drug              |
| OVACE WASH LIQ 10%        | Unapproved Drug              |
| OVEEZA CAP                | Multi-vitamin                |
| OVIDREL INJ               | Fertility Agent              |
| OXIACHLO SOL 0.05-4%      | Not properly listed with FDA |
| OXIANUJO OIN 4-0.1%       | Not properly listed with FDA |
| OXIATAR CRE 4-0.025%      | Not properly listed with FDA |
| OXIAVAR CRE 4-0.05%       | Not properly listed with FDA |
| OXIAVARRY CRE 4-0.05%     | Not properly listed with FDA |
| OXIAVARY CRE 4-0.1%       | Not properly listed with FDA |
| OXIAZAR CRE 4-0.1%        | Not properly listed with FDA |
| OXOPID SOL 0.05-5%        | Not properly listed with FDA |
| OXYTOCIN INJ 10UNT/ML     | LIST                         |
| OYSTER EXT INJ 1:20       | Diagnostic Agent             |
| PAIN EASE AER MD STRM     | Not properly listed with FDA |
| PAIN EASE AER MIST        | Not properly listed with FDA |
| PAINGO KFT KIT            | LIST                         |
| PANATUSS DXP LIQ          | Cough/Cold                   |
| PANHEMATIN INJ 350MG      | Blood Component              |
| PAPAVERINE SOL 30MG/ML    | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| PAPAVERINE SOL 60MG/2ML   | Unapproved Drug              |
| PAREMYD SOL 1-0.25%       | Diagnostic Agent             |
| PB/BELLA ALK TAB 16.2MG   | Unapproved Drug              |
| P-CARE D80G KIT 40MG/ML   | LIST                         |
| P-CARE K40 KIT 40MG/ML    | LIST                         |
| P-CARE K40G KIT 40MG/ML   | LIST                         |
| P-CARE K40MX KIT          | LIST                         |
| P-CARE K80 KIT 40MG/ML    | LIST                         |
| P-CARE K80G KIT 40MG/ML   | LIST                         |
| P-CARE K80MX KIT          | LIST                         |
| PCCA ALADERM CRE BASE     | Not properly listed with FDA |
| PCCA COBASE OIN #1        | Not properly listed with FDA |
| PCCA COSMETI CRE HRT BASE | Not properly listed with FDA |
| PCCA CUSTOM CRE LIPO-MAX  | Not properly listed with FDA |
| PCCA ELLAGE CRE VAGINAL   | Not properly listed with FDA |
| PCCA LIPODER CRE BASE     | Not properly listed with FDA |
| PCCA LIPOSOM CRE DRY      | Not properly listed with FDA |
| PCCA LIPOSOM CRE NORMAL   | Not properly listed with FDA |
| PCCA LIPOSOM CRE OILY     | Not properly listed with FDA |
| PCCA LIPOSOM CRE SENSITIV | Not properly listed with FDA |
| PCCA MVC CRE BASE         | Not properly listed with FDA |
| PCCA SWEET SYP -SF        | Not properly listed with FDA |
| PCCA SYRUP SYP VEHICLE    | Not properly listed with FDA |
| PCCA VANISH CRE BASE      | Not properly listed with FDA |
| PCCA VANISHI CRE LIGHT    | Not properly listed with FDA |
| PCCA VANPEN CRE BASE      | Not properly listed with FDA |
| PCCA-PLUS SUS             | Not properly listed with FDA |
| PE/GUAIFENES DRO 1.5-20MG | Cough/Cold                   |
| PEANUT INJ EXTRACT        | Diagnostic Agent             |
| PEANUT EXT INJ 1:20       | Diagnostic Agent             |
| PECAN EXT INJ 1:20        | Diagnostic Agent             |
| PECAN NUT INJ EXTRACT     | Diagnostic Agent             |
| PECAN POLLEN INJ 1:20     | Non-standardized allergenic  |
| PEDIZOLPAK PAK 2%-2%      | Not properly listed with FDA |
| PEG BASE OIN              | Not properly listed with FDA |
| PENCREAM CRE              | Not properly listed with FDA |
| PENDERM CRE               | Not properly listed with FDA |
| PENLEN EMU SPRAY          | Device                       |
| PENSOMAL CRE              | Not properly listed with FDA |
| PERENNIAL INJ RYE GRAS    | Non-standardized allergenic  |
| PERENNIAL RY SOL 10000BAU | LIST                         |
| PETROL GAUZE MIS 3"X9"    | Not properly listed with FDA |
| PETROLATUM GEL WHITE      | LIST                         |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| PETROLATUM OIN WHITE      | Not properly listed with FDA |
| PFIZER 5-11Y INJ 2023-24  | LIST                         |
| PFIZER 6M-4Y INJ 2023-24  | LIST                         |
| PFIZER BIVAL INJ 5-11Y    | LIST                         |
| PFIZER BIVAL INJ 6M-4Y    | LIST                         |
| PFIZER BIVAL INJ BA4/BA5  | LIST                         |
| PFIZER VACC INJ COVID-19  | Unapproved Drug              |
| PH 12 STERIL SOL FLOLAN   | Not properly listed with FDA |
| PH STRIPS TES PH 0-14     | Diagnostic Agent             |
| PHARMABASE CRE COSMETIC   | Not properly listed with FDA |
| PHARMABASE CRE HEAVY      | Not properly listed with FDA |
| PHEDRAX SHA 2-2%          | Not properly listed with FDA |
| PHENAZO TAB 200MG         | Unapproved Drug              |
| PHENAZOPYRID TAB 100MG    | Unapproved Drug              |
| PHENAZOPYRID TAB 200MG    | Unapproved Drug              |
| PHENDIMETRAZ CAP 105MG ER | Anorexic, Anti-obesity Agent |
| PHENDIMETRAZ TAB 35MG     | Anorexic, Anti-obesity Agent |
| PHENO/BELLA ELX ALKALOID  | Unapproved Drug              |
| PHENOHYTRO ELX            | Unapproved Drug              |
| PHENOHYTRO TAB            | Unapproved Drug              |
| PHENOL INJ 6%             | Not properly listed with FDA |
| PENTERMINE CAP 15MG       | Anorexic, Anti-obesity Agent |
| PENTERMINE CAP 30MG       | Anorexic, Anti-obesity Agent |
| PENTERMINE CAP 37.5MG     | Anorexic, Anti-obesity Agent |
| PENTERMINE TAB 37.5MG     | Anorexic, Anti-obesity Agent |
| PHENYLD GMP POW DHA/FIBR  | Not properly listed with FDA |
| PHENYLEP HCL INJ 0.8/10ML | Unapproved Drug              |
| PHENYLEP HCL INJ 1MG/10ML | Unapproved Drug              |
| PHENYLEPHRIN INJ 0.4/10ML | Unapproved Drug              |
| PHENYLEPHRIN INJ 0.5/5ML  | Not properly listed with FDA |
| PHENYLEPHRIN INJ 1MG/1ML  | Erectile Dysfunction         |
| PHEODOYO CRE              | Not properly listed with FDA |
| PHEXXI GEL                | Contraceptives               |
| PHEYO CRE                 | Not properly listed with FDA |
| PHLAG SPR                 | Not properly listed with FDA |
| PHOSPHA 250 TAB NEUTRAL   | Unapproved Drug              |
| PHOSPHASAL TAB            | Unapproved Drug              |
| PHOSPHOROUS TAB           | Not properly listed with FDA |
| PHOSPHO-TRIN TAB 250 NEUT | Medical Food                 |
| PHOSPHO-TRIN TAB K500     | Not properly listed with FDA |
| PHYS EZ USE KIT J/T/T 2   | Unapproved Drug              |
| PHYS EZ USE KIT M-PRED    | LIST                         |
| PHYTOBASE CRE             | Bulk Ingredient              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| PHYTONADIONE INJ 10MG/ML  | Vitamin/Mineral              |
| PHYTONADIONE INJ 1MG/0.5  | Vitamin/Mineral              |
| PHYTONADIONE TAB 5MG      | Vitamin/Mineral              |
| PINEAPPLE INJ 1:20        | Diagnostic Agent             |
| PISTACHIO INJ EXTRACT     | Diagnostic Agent             |
| PITOCIN INJ 10UNT/ML      | LIST                         |
| PKU EASY TAB              | Not properly listed with FDA |
| PKU EASY TAB MICROTAB     | Not properly listed with FDA |
| PKU EXPRESS PAK 15+ LEMO  | Not properly listed with FDA |
| PKU EXPRESS PAK 15+ ORAN  | Not properly listed with FDA |
| PKU EXPRESS PAK 15+ RASP  | Not properly listed with FDA |
| PKU EXPRESS PAK 15+ TROP  | Not properly listed with FDA |
| PKU EXPRESS PAK 15+ UNFL  | Not properly listed with FDA |
| PKU EXPRESS PAK 20+ RASP  | Not properly listed with FDA |
| PKU EXPRESS PAK 20+ TROP  | Not properly listed with FDA |
| PKU EXPRESS PAK 20+ UNFL  | Not properly listed with FDA |
| PKU EXPRESS PAK 20+LEMON  | Not properly listed with FDA |
| PKU EXPRESS PAK 20+ORANG  | Not properly listed with FDA |
| PKU GO POW                | Not properly listed with FDA |
| PLASBUMIN-25 INJ 25%      | Blood Component              |
| PLASBUMIN-5 INJ 5%        | Blood Component              |
| PLEGISOL SOL              | Not properly listed with FDA |
| PLENITY CAP               | Not properly listed with FDA |
| PLENITY CAP WELCOME       | Not properly listed with FDA |
| PLEXION CRE 9.8-4.8%      | Unapproved Drug              |
| PLEXION LIQ 9.8-4.8%      | Unapproved Drug              |
| PLEXION LOT 9.8-4.8%      | Unapproved Drug              |
| PLEXION CLTH PAD 9.8-4.8% | Unapproved Drug              |
| PLIAGLIS KIT 7-7%         | LIST                         |
| PLO GEL MEDIFLO           | Not properly listed with FDA |
| PLO MEDIFLO GEL 30        | Not properly listed with FDA |
| PLO MEDIFLO KIT 30 KIT    | Not properly listed with FDA |
| PLO MEDIFLO KIT KIT       | Not properly listed with FDA |
| PLO TRANSDER CRE          | Not properly listed with FDA |
| PLO20 GEL FLOWABLE        | Not properly listed with FDA |
| PLO20 GEL NON-FLOW        | Not properly listed with FDA |
| PNEUMOVAX 23 INJ 25/0.5   | Pneumococcal Vaccine         |
| PNV TAB 20-1 TAB          | Multi-vitamin w/ iron        |
| PNV TABS TAB 29-1MG       | Vitamin/Mineral              |
| PNV-DHA CAP               | Vitamin/Mineral              |
| PNV-DHA CAP DOCUSATE      | Vitamin/Mineral              |
| PNV-OMEGA CAP             | Vitamin/Mineral              |
| PNV-SELECT TAB            | Vitamin/Mineral              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| POD-CARE 100 KIT 30MG/5ML | Not properly listed with FDA |
| POD-CARE 100 KIT 40MG/ML  | Not properly listed with FDA |
| POD-CARE 100 KIT 40MG/ML  | Not properly listed with FDA |
| POD-CARE 100 KIT CMX      | Not properly listed with FDA |
| POD-CARE 100 KIT KMX      | Not properly listed with FDA |
| POD-CARE100C INJ 30MG/5ML | Not properly listed with FDA |
| PODIAPN CAP               | Vitamin/Mineral              |
| PODIATROLE PAK 2-20%      | Unapproved Drug              |
| PODOCON-25 SOL            | Unapproved Drug              |
| PODPROG SOL 7-0.1%        | Not properly listed with FDA |
| PODPROGTAR SOL            | Not properly listed with FDA |
| POINT OF KIT CARE KM      | LIST                         |
| POINT OF KIT CARE L.2     | LIST                         |
| POINT OF KIT CARE L.5     | LIST                         |
| POINT OF CAR KIT LM DEP 2 | LIST                         |
| POINT OF CAR KIT LM-2.2   | LIST                         |
| POINT OF CAR KIT LM-2.5   | LIST                         |
| POLIBAR PLUS SUS 105%     | Diagnostic Agent             |
| POLYOX LAURY INJ 5%       | Not properly listed with FDA |
| POLYPEG OIN BASE          | Not properly listed with FDA |
| POLY-VI-FLOR CHW 0.25MG   | Vitamin/Mineral              |
| POLY-VI-FLOR CHW 0.5MG    | Vitamin/Mineral              |
| POLY-VI-FLOR CHW 1MG      | Vitamin/Mineral              |
| POLY-VI-FLOR CHW W/IRON   | Vitamin/Mineral              |
| POLY-VI-FLOR SUS /IRON    | Vitamin/Mineral              |
| POLY-VI-FLOR SUS 0.25/ML  | Vitamin/Mineral              |
| PORK EXTRACT INJ 1:10     | Diagnostic Agent             |
| PORK EXTRACT INJ 1:20     | Diagnostic Agent             |
| POSLUMA SOL               | Diagnostic Agent             |
| POT CITRATE- PAK CIT ACID | Unapproved Drug              |
| POT IODIDE SOL 1GM/ML     | Unapproved Drug              |
| POTABA CAP 500MG          | Not properly listed with FDA |
| PR BENZOYL LIQ 7% WASH    | Unapproved Drug              |
| PR CREAM KIT              | Unapproved Drug              |
| PRACASIL TM- CRE PLUS     | Not properly listed with FDA |
| PRAMOSONE CRE 1-1%        | LIST                         |
| PRAMOSONE LOT 1%          | LIST                         |
| PRAMOSONE LOT 2.5%        | LIST                         |
| PRAMOSONE OIN 1%          | Unapproved Drug              |
| PRAMOSONE OIN 2.5%        | Unapproved Drug              |
| PRAMOSONE E CRE 1-2.5%    | Unapproved Drug              |
| PRAMOTIC DRO 1-0.1%       | Unapproved Drug              |
| PRAMOX GEL 1%             | Not properly listed with FDA |

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| Label Name                | Reason                |
|---------------------------|-----------------------|
| PRASTERA KIT              | Unapproved Drug       |
| PRE & POST MIS SX POUCH   | LIST                  |
| PRED-GAT-BRO INJ          | Unapproved Drug       |
| PRED-GATI SUS 1-0.5%      | Unapproved Drug       |
| PRED-GATIFL- SUS BROMFENA | Unapproved Drug       |
| PREDNIS/BROM SUS 1-0.075% | Unapproved Drug       |
| PRE-FOLIC TAB 1-100MG     | Vitamin/Mineral       |
| PREGEN DHA CAP            | Multi-vitamin w/ iron |
| PREGENNA TAB              | Vitamin/Mineral       |
| PREMESISRX TAB            | Vitamin/Mineral       |
| PRENA 1 TRUE MIS          | Vitamin/Mineral       |
| PRENA1 CHW                | Vitamin/Mineral       |
| PRENA1 PEARL CAP          | Vitamin/Mineral       |
| PRENAISSANCE CAP          | Vitamin/Mineral       |
| PRENAISSANCE CAP PLUS     | Vitamin/Mineral       |
| PRENARA CAP PRENATAL      | Vitamin/Mineral       |
| PRENATAL TAB 27-1MG       | Vitamin/Mineral       |
| PRENATAL TAB PLUS         | Multi-vitamin w/ iron |
| PRENATAL 19 CHW 29-1MG    | Vitamin/Mineral       |
| PRENATAL 19 CHW TAB       | Vitamin/Mineral       |
| PRENATAL 19 TAB 29-1MG    | Vitamin/Mineral       |
| PRENATAL PLS MIS MV + DHA | Multi-vitamin w/ iron |
| PRENATAL VIT TAB LOW IRON | Vitamin/Mineral       |
| PRENATAL-U CAP 106.5-1    | Vitamin/Mineral       |
| PRENATE CAP ENHANCE       | Vitamin/Mineral       |
| PRENATE CAP ESSENT        | Vitamin/Mineral       |
| PRENATE CAP ESSENTIA      | Vitamin/Mineral       |
| PRENATE CAP PIXIE         | Vitamin/Mineral       |
| PRENATE CAP RESTORE       | Vitamin/Mineral       |
| PRENATE CHW 0.6-0.4       | Vitamin/Mineral       |
| PRENATE TAB ELITE         | Vitamin/Mineral       |
| PRENATE TAB ELITE         | Vitamin/Mineral       |
| PRENATE AM TAB 1MG        | Vitamin/Mineral       |
| PRENATE DHA CAP           | Vitamin/Mineral       |
| PRENATE DHA CAP           | Vitamin/Mineral       |
| PRENATE MINI CAP          | Vitamin/Mineral       |
| PRENATE MINI CAP          | Vitamin/Mineral       |
| PRENATRIX TAB             | Vitamin/Mineral       |
| PRENATRYL TAB             | Multi-vitamin w/ iron |
| PRENATVITE TAB COMPLETE   | Vitamin/Mineral       |
| PRENATVITE TAB PLUS       | Vitamin/Mineral       |
| PRENATVITE TAB RX         | Vitamin/Mineral       |
| PRENIS-BROMF SOL 1-0.075% | Unapproved Drug       |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| PRE-PEN INJ               | Diagnostic Agent             |
| PREPIV SUPPL KIT          | Not properly listed with FDA |
| PREPLUS TAB 27-1MG        | Vitamin/Mineral              |
| PRESERA AER               | Not properly listed with FDA |
| PRETAB TAB 29-1MG         | Vitamin/Mineral              |
| PREVDNT 5000 PST 1.1%     | Unapproved Drug              |
| PREVDNT 5000 PST 1.1-5%   | Unapproved Drug              |
| PREVIDENT CRE 5000 PLS    | Unapproved Drug              |
| PREVIDENT GEL 1.1%        | Unapproved Drug              |
| PREVIDENT GEL 1.1% BER    | Unapproved Drug              |
| PREVIDENT GEL 1.1% MIN    | Unapproved Drug              |
| PREVIDENT PST 1.1%        | Not properly listed with FDA |
| PREVIDENT SOL 0.2%        | Unapproved Drug              |
| PREVIDOLRX PAK ANALGESI   | LIST                         |
| PREVIDOLRX PAK PLUS       | LIST                         |
| PREVNAR 13 INJ            | Pneumococcal Vaccine         |
| PREVNAR 20 INJ            | Pneumococcal vaccine         |
| PRILO PATCH KIT           | LIST                         |
| PRILO PATCH KIT II        | LIST                         |
| PRILOHEAL KIT 2.5-2.5%    | Unapproved Drug              |
| PRILOLID KIT 2.5-2.5%     | LIST                         |
| PRILOVIX KIT 2.5-2.5%     | Unapproved Drug              |
| PRILOVIX LIT KIT 2.5-2.5% | Unapproved Drug              |
| PRILOVIXIL KIT            | Unapproved Drug              |
| PRILOXX LP KIT 2.5-2.5%   | Not properly listed with FDA |
| PRIMACARE CAP             | Vitamin/Mineral              |
| PRIVET EXT INJ 1:20       | Non-standardized allergenic  |
| PRIZOPAK II KIT 2.5-2.5%  | LIST                         |
| PRIZOTRAL II KIT          | LIST                         |
| PRO DNA KIT KIT           | Diagnostic Agent             |
| PRO HERS RX CAP           | Multi-vitamin                |
| PRO HIS RX CAP            | Multi-vitamin                |
| PRO PCOS RX CAP           | Multi-vitamin                |
| PROBICHEW CHW             | Dietary Supplement           |
| PRO-C-DURE 5 KIT 40MG/ML  | LIST                         |
| PRO-C-DURE 6 KIT 40MG/ML  | LIST                         |
| PROCORT CRE               | Unapproved Drug              |
| PRO-CRITIC POW            | Not properly listed with FDA |
| PROCTOCORT SUP 30MG       | Unapproved Drug              |
| PRODIGEN CAP              | Dietary Supplement           |
| PRODRIN TAB               | Unapproved Drug              |
| PROFILNINE INJ 1000UNIT   | Blood Component              |
| PROFILNINE INJ 1500UNIT   | Blood Component              |

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| PROFILNINE INJ 500UNIT   | Blood Component              |
| PROFINAC PAK 1.5%        | LIST                         |
| PROFOLA TAB              | Vitamin/Mineral              |
| PROGESTERONE CRE 10% KIT | Bulk Ingredient              |
| PROGESTERONE SUP VGS 100 | Not properly listed with FDA |
| PROGESTERONE SUP VGS 200 | Not properly listed with FDA |
| PROHANCE INJ 279.3/ML    | Diagnostic Agent             |
| PROLEEVA CAP             | Not properly listed with FDA |
| PROLEVA TAB              | Not properly listed with FDA |
| PROMELLA CAP PREBIOTI    | Dietary Supplement           |
| PROMETH VC/ SYP CODEINE  | Not properly listed with FDA |
| PROMETH/COD SOL 6.25-10  | Cough/Cold                   |
| PROMETH/COD SYP 6.25-10  | Cough/Cold                   |
| PROMETH/PE/ SYP CODEINE  | Cough/Cold                   |
| PROMETHAZINE SOL DM      | Cough/Cold                   |
| PROMETHAZINE SYP DM      | Cough/Cold                   |
| PROMISEB CRE             | Unapproved Drug              |
| PRONAL GEL 40-10%        | Not properly listed with FDA |
| PROOXIA CRE 10-4%        | Not properly listed with FDA |
| PROPECIA TAB 1MG         | Cosmetic                     |
| PROPOFOL INJ             | General Anesthetic           |
| PROPOFOL INJ 1000MG      | General Anesthetic           |
| PROPOFOL INJ 200/20ML    | General Anesthetic           |
| PROPOFOL INJ 500/50ML    | General Anesthetic           |
| PROPOVEN EMU 2%          | General anesthetic           |
| PROPOVEN INJ             | General Anesthetic           |
| PROPOVEN INJ 200/20ML    | General Anesthetic           |
| PROPOVEN INJ 500/50ML    | General Anesthetic           |
| PROSILK GEL              | Device                       |
| PROSTIN VR INJ 500MCG    | Not properly listed with FDA |
| PROTEOLIN TAB            | Not properly listed with FDA |
| PROTEXA CRE 42%          | Unapproved Drug              |
| PROTHELIAL PST 10%       | Not properly listed with FDA |
| PROTYL AG GEL            | Device                       |
| PROVAD CAP               | Dietary Supplement           |
| PROVENGE INJ             | LIST                         |
| PROVIDA OB CAP           | Vitamin/Mineral              |
| PROVOCHOLINE KIT         | Diagnostic Agent             |
| PROVOCHOLINE SOL 100MG   | Diagnostic Agent             |
| PROXIVOL GEL 2%          | LIST                         |
| PRUCLAIR CRE             | LIST                         |
| PRUMYX CRE               | LIST                         |
| P-SILOXAN DS CRE         | Not properly listed with FDA |



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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| PSORIZIDE TAB FORTE       | Unapproved Drug              |
| PSORIZIDE TAB ULTRA       | Unapproved Drug              |
| PUDEND/LOCAL KIT 1% LIDO  | Not properly listed with FDA |
| PULMOSAL NEB 7%           | Device                       |
| PUREFOLIX TAB 1-5000      | Unapproved Drug              |
| PURIFIED LIQ WATER        | OTC Product                  |
| PYLARIFY INJ              | Diagnostic agent             |
| PYRIDIDIUM TAB 100MG      | Unapproved Drug              |
| PYRIDIDIUM TAB 200MG      | Unapproved Drug              |
| PYRIDOXAL-5- INJ PHOSPHAT | Vitamin/Mineral              |
| PYRIDOXINE INJ 100MG/ML   | Vitamin/Mineral              |
| PYROPHOSPHAT KIT 99M      | Diagnostic Agent             |
| QBREXZA PAD 2.4%          | LIST                         |
| QSYMIA CAP 11.25-69       | Anorexic, Anti-obesity Agent |
| QSYMIA CAP 15-92MG        | Anorexic, Anti-obesity Agent |
| QSYMIA CAP 3.75-23        | Anorexic, Anti-obesity Agent |
| QSYMIA CAP 7.5-46MG       | Anorexic, Anti-obesity Agent |
| QUAD-MIX INJ              | Erectile Dysfunction         |
| QUEEN PALM SOL EXTRACT    | Non-standardized allergenic  |
| QUELICIN INJ 20MG/ML      | LIST                         |
| QUFLORA CHW               | Vitamin/Mineral              |
| QUFLORA FE CHW            | Vitamin/Mineral              |
| QUFLORA FE DRO 0.25-9.5   | Vitamin/Mineral              |
| QUFLORA PED CHW 0.25MG    | Vitamin/Mineral              |
| QUFLORA PED CHW 0.5MG     | Vitamin/Mineral              |
| QUFLORA PED CHW 1MG       | Vitamin/Mineral              |
| QUFLORA PED DRO 0.25MG    | Vitamin/Mineral              |
| QUFLORA PED DRO 0.5MG/ML  | Vitamin/Mineral              |
| QUICKVUE KIT SARS ANT     | Diagnostic Agent             |
| QUICKVUE KIT STREP A      | Diagnostic Agent             |
| QUICKVUE + KIT STREP A    | Diagnostic Agent             |
| QUICKVUE A+B KIT INFLUENZ | Diagnostic Agent             |
| QUICKVUE INL KIT STREP A  | Diagnostic Agent             |
| QUIDROXZAR GEL 5-30-0.1   | Not properly listed with FDA |
| QUIHOXAXIA GEL 5-1-2%     | Not properly listed with FDA |
| QUIHOXVAR GEL             | Not properly listed with FDA |
| QUINIXIL PAK 0.1%-5%      | LIST                         |
| RABBIT INJ EPITHELI       | Non-standardized allergenic  |
| RABBIT EPITH INJ 1:20     | Non-standardized allergenic  |
| RADIAPLEXRX GEL           | Not properly listed with FDA |
| RADIAURA CRE 3-0.5%       | Unapproved Drug              |
| RAPPORT RLS KIT           | Erectile Dysfunction         |
| RAPPORT VTD KIT           | Erectile Dysfunction         |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| RASPBERRY SYP             | Bulk Ingredient              |
| RAYASAL CRE 5.9%          | Unapproved Drug              |
| RAYASORE KIT 1-10%        | Not properly listed with FDA |
| REA LO 39 CRE 39%         | Unapproved Drug              |
| READI-CAT 2 SUS           | Diagnostic Agent             |
| READI-CAT 2 SUS BANANA    | Diagnostic Agent             |
| READI-CAT 2 SUS BERRY     | Diagnostic Agent             |
| READI-CAT 2 SUS MOCHACCI  | Diagnostic Agent             |
| READI-CAT 2 SUS ORANGE    | Diagnostic Agent             |
| READI-CAT 2 SUS VANILLA   | Diagnostic Agent             |
| READY BETAME KIT 30MG/5ML | LIST                         |
| READY DEXAME KIT 10MG/ML  | LIST                         |
| READY LIDOCA KIT 1%       | LIST                         |
| READYSHARP + KIT BETAMETH | LIST                         |
| READYSHARP + KIT DEXAMETH | LIST                         |
| READYSHARP + KIT KETOROLA | LIST                         |
| READYSHARP + KIT METHYLPR | LIST                         |
| READYSHARP-A KIT 1%/0.5%  | LIST                         |
| REAL HEAL-I KIT 2.5-2.5%  | Unapproved Drug              |
| REBINYN INJ 3000UNIT      | Blood Component              |
| REBINYN SOL 1000UNIT      | Blood Component              |
| REBINYN SOL 2000UNIT      | Blood Component              |
| REBINYN SOL 500UNIT       | Blood Component              |
| RECEDO GEL                | Not properly listed with FDA |
| RECOMBINATE INJ           | Blood Component              |
| RECOMBINATE INJ           | Blood Component              |
| RECOMBINATE INJ 220-400   | Blood Component              |
| RECOMBINATE INJ 401-800   | Blood Component              |
| RECOMBINATE INJ 801-1240  | Blood Component              |
| RED ALDER INJ 1:20        | Non-standardized allergenic  |
| RED CEDAR INJ 1:20        | Non-standardized allergenic  |
| RED MAPLE INJ 1:20        | Non-standardized allergenic  |
| RED MULBERRY INJ 1:20     | Non-standardized allergenic  |
| RED OAK INJ 1:20          | Non-standardized allergenic  |
| RED TOP GRAS INJ 100000BA | Non-standardized allergenic  |
| REDICHEW RX CHW           | Vitamin/Mineral              |
| REFISSA CRE 0.05%         | Cosmetic                     |
| REGADENOSON SOL 0.4/5ML   | Diagnostic Agent             |
| REGENECARE GEL            | OTC Product                  |
| REGIOCIT SOL              | Unapproved Drug              |
| RELADOR PAK KIT 2.5-2.5%  | LIST                         |
| RELADOR PAK KIT PLUS      | LIST                         |
| RELNATE DHA CAP           | Vitamin/Mineral              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| REMIGEN CREA CRE          | Not properly listed with FDA |
| RENAL CAP                 | Vitamin/Mineral              |
| RENATABS MIS IRON         | Vitamin/Mineral              |
| RENATABS TAB              | Vitamin/Mineral              |
| RENO CAP                  | Vitamin/Mineral              |
| RENOVA CRE 0.02%          | Cosmetic                     |
| RENOVA PUMP CRE 0.02%     | Cosmetic                     |
| RESET MIS                 | Not properly listed with FDA |
| RESET MIS IOS APP         | Not properly listed with FDA |
| RESET APP MIS ANDROID     | Not properly listed with FDA |
| RESET APP MIS IOS/ANDR    | Not properly listed with FDA |
| RESET NONMON MIS CM       | Not properly listed with FDA |
| RESET-O MIS               | Not properly listed with FDA |
| RESET-O MIS IOS APP       | Not properly listed with FDA |
| RESET-O MIS IOS/ANDR      | Not properly listed with FDA |
| RESET-O APP MIS ANDROID   | Not properly listed with FDA |
| RESET-O NON MIS -MON CM   | Not properly listed with FDA |
| RESTORA RX CAP 60-1.25    | Not properly listed with FDA |
| RESTORE SILV PAD 2"X2"    | Not properly listed with FDA |
| RESTORE SILV PAD 4"X4"    | Not properly listed with FDA |
| RESTORE SILV PAD 4"X4.75" | Not properly listed with FDA |
| RESTORE SILV PAD 4"X5"    | Not properly listed with FDA |
| RESTORE SILV PAD 6"X8"    | Not properly listed with FDA |
| REVESTA CAP 1MG-5750      | Not properly listed with FDA |
| REXASIL KIT               | Not properly listed with FDA |
| R-GENE 10 INJ 10%         | Diagnostic Agent             |
| RGH PIGWEED SOL 1:20      | Non-standardized allergenic  |
| RHEOSPRAY LIQ             | Not properly listed with FDA |
| RHEUMATE CAP              | Medical Food                 |
| RIASTAP SOL 1GM           | Blood Component              |
| RIASTAP SOL 1GM           | Blood Component              |
| RIBOZEL CAP               | Not properly listed with FDA |
| RICE EXTRACT INJ 1:10     | Diagnostic Agent             |
| RICE EXTRACT INJ 1:20     | Diagnostic Agent             |
| RIFAMPIN SUS 25MG/ML      | Not properly listed with FDA |
| RIVER BIRCH INJ 1:20      | Non-standardized allergenic  |
| RIXUBIS INJ 1000UNIT      | Blood Component              |
| RIXUBIS INJ 2000UNIT      | Blood Component              |
| RIXUBIS INJ 250 UNIT      | Blood Component              |
| RIXUBIS INJ 3000UNIT      | Blood Component              |
| RIXUBIS INJ 500UNIT       | Blood Component              |
| ROCURON BROM INJ 50MG/5ML | Not properly listed with FDA |
| ROCURONIUM INJ 100/10ML   | LIST                         |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| ROCURONIUM INJ 100MG/10   | LIST                         |
| ROCURONIUM INJ 10MG/ML    | LIST                         |
| ROCURONIUM INJ 10MG/ML    | LIST                         |
| ROCURONIUM INJ 50MG/5ML   | LIST                         |
| ROP-CLON-KET INJ 15/50ML  | Not properly listed with FDA |
| ROPIDEX KIT               | Unapproved Drug              |
| ROPIVAC/NACL INJ 0.2-0.9% | Not properly listed with FDA |
| ROPIVAC/NACL INJ 2MG/ML   | Not properly listed with FDA |
| ROSADAN KIT 0.75%         | LIST                         |
| ROSADAN KIT 0.75%         | LIST                         |
| RUSS THISTLE SOL EXTRACT  | Non-standardized allergenic  |
| RUZURGI TAB 10MG          | LIST                         |
| RX-SPECIMEN KIT COLLECTI  | Diagnostic Agent             |
| SA3 DERM CRE              | Not properly listed with FDA |
| SACCHARIN POW SODIUM      | Bulk Ingredient              |
| SACCHAROMYCE INJ 1:20     | Diagnostic Agent             |
| SAGEBRUSH INJ 1:20        | Non-standardized allergenic  |
| SAGEBRUSH INJ 1:20        | Diagnostic Agent             |
| SALEX SHA 6%              | Unapproved Drug              |
| SALICATE LIQ 10%          | Unapproved Drug              |
| SALICYLIC AER 6%          | Unapproved Drug              |
| SALICYLIC AC GEL 6%       | Unapproved Drug              |
| SALICYLIC AC KIT 6%       | Unapproved Drug              |
| SALICYLIC AC LIQ 27.5%    | Unapproved Drug              |
| SALICYLIC AC OIN 3%       | Unapproved Drug              |
| SALICYLIC AC SHA 6%       | Unapproved Drug              |
| SALICYLIC AC SOL 26%      | Unapproved Drug              |
| SALICYLIC AC SOL 28.5% ER | Unapproved Drug              |
| SALIMEZ CRE 6%            | Not properly listed with FDA |
| SALIMEZ FORT CRE 10%      | Not properly listed with FDA |
| SALINE/PHENO SOL          | LIST                         |
| SALIVAMAX POW             | LIST                         |
| SALMON EXT INJ 1:20       | Diagnostic Agent             |
| SALSALATE TAB 500MG       | Unapproved Drug              |
| SALSALATE TAB 750MG       | Unapproved Drug              |
| SALT DURABLE CRE          | Not properly listed with FDA |
| SALT STABLE CRE LS ADV    | Not properly listed with FDA |
| SALTSTABLE CRE            | Not properly listed with FDA |
| SALVAX AER 6%             | Unapproved Drug              |
| SALVAX DUO KIT PLUS       | Unapproved Drug              |
| SALYCIM CRE 6%            | Unapproved Drug              |
| SANADERMRX KIT SKIN REP   | LIST                         |
| SANARE CRE ADVANCED       | Not properly listed with FDA |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| SANARE SCAR CRE THERAPY   | Not properly listed with FDA |
| SANOVI VACC EMU 5/0.5ML   | Unapproved Drug              |
| SAROXIA CRE 4-0.05%       | Not properly listed with FDA |
| SASH KIT 100/ML           | Not properly listed with FDA |
| SAXENDA INJ 18MG/3ML      | Anorexic, Anti-obesity Agent |
| SCAR MANAGE GEL           | Not properly listed with FDA |
| SCAR PATCH PAD PREMIUM    | Unapproved Drug              |
| SCARCARE KIT LARGE        | Not properly listed with FDA |
| SCARCIN GEL               | Device                       |
| SCARCIN LIQ ROLL-ON       | Device                       |
| SCARSILK GEL              | Device                       |
| SCARZEN SKIN KIT REPAIR   | LIST                         |
| SCLEROSOL AER INTRAPLE    | LIST                         |
| SEA SCALLOPS INJ 1:20     | Diagnostic Agent             |
| SEBUDERM GEL              | Not properly listed with FDA |
| SECREFLO INJ 16MCG        | Diagnostic Agent             |
| SELECT-OB CHW             | Vitamin/Mineral              |
| SELECT-OB CHW             | Vitamin/Mineral              |
| SELECT-OB+ PAK DHA        | Vitamin/Mineral              |
| SELENIUM SUL SHA 2.25%    | Unapproved Drug              |
| SELENIUM SUL SHA 2.3%     | Unapproved Drug              |
| SE-NATAL 19 CHW           | Vitamin/Mineral              |
| SE-NATAL 19 TAB           | Vitamin/Mineral              |
| SENSORCAINE INJ -MPF/EPI  | LIST                         |
| SENSORCAINE INJ -MPF/EPI  | LIST                         |
| SENSORCAINE INJ -MPF/EPI  | LIST                         |
| SENSORCAINE/ INJ EPI 0.25 | LIST                         |
| SENSORCAINE/ INJ EPI 0.5% | LIST                         |
| SERAQUA LIQ               | Not properly listed with FDA |
| SESAME SEED INJ 1:20      | Diagnostic Agent             |
| SESAME SEED INJ EXTRACT   | Diagnostic Agent             |
| SESTAMIBI KIT TC99M       | Diagnostic Agent             |
| SEVENFACT INJ 1MG         | Blood Component              |
| SEVENFACT INJ 5MG         | Blood Component              |
| SEVOFLURANE SOL           | General Anesthetic           |
| SF GEL 1.1%               | Unapproved Drug              |
| SF 5000 PLUS CRE 1.1%     | Unapproved Drug              |
| SG RAGWEED INJ 1:20       | Non-standardized allergenic  |
| SG RAGWEED INJ 1:20       | Non-standardized allergenic  |
| SHAGBARK HCK SOL EXTRACT  | Non-standardized allergenic  |
| SHEEP SORREL INJ 1:20     | Non-standardized allergenic  |
| SHELLGEL SOL              | Device                       |
| SHORT RAGWEE INJ 1:20     | Non-standardized allergenic  |

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| Label Name                  | Reason                       |
|-----------------------------|------------------------------|
| SHRIMP INJ EXTRACT          | Diagnostic Agent             |
| SIDEROL TAB                 | Vitamin/Mineral              |
| SILA III PAK                | LIST                         |
| SILATRIX GEL 10%            | LIST                         |
| SILDENAFIL TAB 100MG        | Sexual Dysfunction Agent     |
| SILDENAFIL TAB 25MG         | Sexual Dysfunction Agent     |
| SILDENAFIL TAB 50MG         | Sexual Dysfunction Agent     |
| SILIGENTLE PAD 2"X2"        | Surgical Supply/Medical      |
| SILIGENTLE PAD 4"X5"        | Surgical Supply/Medical      |
| SILIGENTLE PAD 6"X6"        | Surgical Supply/Medical      |
| SILIGENTLE PAD AG 2"X2"     | Surgical Supply/Medical      |
| SILIGENTLE PAD AG 4"X4"     | Surgical Supply/Medical      |
| SILIPAC KIT                 | Device                       |
| SILPROTEX CRE PLUS          | Not properly listed with FDA |
| SILVER NITRA SOL 0.5%       | Unapproved Drug              |
| SILVRSTAT GEL DRESSING      | Surgical Supply/Medical      |
| SIMPLE SYP                  | Bulk Ingredient              |
| SINCALIDE INJ 5MCG          | Diagnostic Agent             |
| SINOGRAPHIN INJ             | Diagnostic Agent             |
| SITZMARKS CAP               | Diagnostic Agent             |
| SITZMARKS CAP COMBO PACKAGE | Diagnostic Agent             |
| SKIN BLEACH CRE 4%          | Cosmetic                     |
| SKIN BLEACH CRE SUNSCREE    | Cosmetic                     |
| SKYADERM-LP KIT             | Unapproved Drug              |
| SKYSONA INJ                 | Not properly listed with FDA |
| SKYY DERM CRE               | Not properly listed with FDA |
| SOD BICARB SOL D5W          | Unapproved Drug              |
| SOD CHLORIDE INJ 0.9%       | LIST                         |
| SOD CHLORIDE INJ 0.9%       | LIST                         |
| SOD CHLORIDE INJ 0.9%BACT   | LIST                         |
| SOD CHLORIDE NEB 0.9%       | Not properly listed with FDA |
| SOD CIT-GENT INJ 4%-320     | Unapproved Drug              |
| SOD CITRATE SOL CITR ACD    | Unapproved Drug              |
| SOD FLUORIDE CHW 0.25MG F   | Unapproved Drug              |
| SOD FLUORIDE CHW 0.5MG F    | Unapproved Drug              |
| SOD FLUORIDE CHW 1.1MG      | Unapproved Drug              |
| SOD FLUORIDE CHW 1MG F      | Unapproved Drug              |
| SOD FLUORIDE CHW 2.2MG      | Unapproved Drug              |
| SOD FLUORIDE DRO 0.5MG/ML   | Unapproved Drug              |
| SOD FLUORIDE PST 1.1%       | Unapproved Drug              |
| SOD FLUORIDE PST 1.1%       | Unapproved Drug              |
| SOD FLUORIDE PST 1.1-5%     | Unapproved Drug              |
| SOD FLUORIDE SOL 0.2%MINT   | Unapproved Drug              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| SOD FLUORIDE TAB 0.5MG F  | Unapproved Drug              |
| SOD FLUORIDE TAB 1MG F    | Unapproved Drug              |
| SOD NITRITE INJ 30MG/ML   | LIST                         |
| SOD SACCHARI GRA          | Not properly listed with FDA |
| SOD SUL/SULF CRE 10-2%    | Unapproved Drug              |
| SOD SUL/SULF CRE 10-5%    | Unapproved Drug              |
| SOD SUL/SULF CRE 9.8-4.8% | Unapproved Drug              |
| SOD SUL/SULF EMU 10-5%    | Unapproved Drug              |
| SOD SUL/SULF EMU 10-5%    | Unapproved Drug              |
| SOD SUL/SULF LIQ 10-2%    | Unapproved Drug              |
| SOD SUL/SULF LIQ 9.8-4.8% | Unapproved Drug              |
| SOD SUL/SULF LIQ 9-4.5%   | Unapproved Drug              |
| SOD SUL/SULF LIQ WASH     | Unapproved Drug              |
| SOD SUL/SULF LOT 10-5%    | Unapproved Drug              |
| SOD SUL/SULF LOT 9.8-4.8% | Unapproved Drug              |
| SOD SUL/SULF PAD 10-4%    | Unapproved Drug              |
| SOD SUL/SULF SUS 10-5%    | Unapproved Drug              |
| SOD SUL/SULF SUS 8-4%     | Unapproved Drug              |
| SOD SULF/SUL EMU 10-5%    | Unapproved Drug              |
| SOD SULFACET GEL 10%      | Unapproved Drug              |
| SOD SULFACET SHA 10%      | Unapproved Drug              |
| SOD THIOSULF INJ 25%      | Unapproved Drug              |
| SODIUM POW BICARBON       | Bulk Ingredient              |
| SODIUM CHLOR NEB 10%      | Unapproved Drug              |
| SODIUM CHLOR NEB 3%       | Unapproved Drug              |
| SODIUM CHLOR NEB 7%       | Unapproved Drug              |
| SODIUM CITRA SOL 4%       | Not properly listed with FDA |
| SODIUM FLUOR CRE 1.1      | Unapproved Drug              |
| SODIUM FLUOR CRE 5000 PLS | Unapproved Drug              |
| SODIUM FLUOR CRE 5000 PPM | Unapproved Drug              |
| SODIUM FLUOR GEL 1.1%     | Unapproved Drug              |
| SODIUM IODID CAP I-123    | Diagnostic Agent             |
| SODIUM IODID CAP I-123    | Diagnostic Agent             |
| SODIUM SULFA LIQ 10% WASH | Unapproved Drug              |
| SODIUM SULFA SUS 9-4.25%  | Unapproved Drug              |
| SOFIA KIT STREP A         | Diagnostic Agent             |
| SOFIA KIT STREP A+        | Diagnostic Agent             |
| SOFIA 2 SARS KIT ANTIGEN  | Diagnostic Agent             |
| SOFIA A+B KIT INFLUENZ    | Diagnostic Agent             |
| SOFIA SARS KIT ANTIGEN    | Diagnostic Agent             |
| SOFIA2 FLU/ KIT SARS FIA  | Diagnostic Agent             |
| SOLARAVIX PAK 3%          | Unapproved Drug              |
| SOLOX GEL                 | Device                       |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| SOLYDRA LIQ               | Not properly listed with FDA |
| SOMRYST MIS               | LIST                         |
| SONAFINE EMU              | Surgical Supply/Medical      |
| SOOTHEE PAD               | Unapproved Drug              |
| SORBITOL SOL 3% IRR       | LIST                         |
| SORBITOL-MAN SOL          | LIST                         |
| SORREL/DOCK INJ EXTRACT   | Non-standardized allergenic  |
| SOYBEAN INJ EXTRACT       | Diagnostic Agent             |
| SOYBEAN EXT INJ 1:40      | Diagnostic Agent             |
| SPECTRAGEL GEL            | Not properly listed with FDA |
| SPEEDGEL RX GEL           | Unapproved Drug              |
| SPHERUSOL INJ             | Diagnostic Agent             |
| SPIKEVAX INJ 50/0.5ML     | LIST                         |
| SPIKEVAX INJ 50/0.5ML     | LIST                         |
| SPIKEVAX INJ COVID-19     | LIST                         |
| SPINAL/EPIDU KIT CL CATH  | Not properly listed with FDA |
| SPINAL/EPIDU KIT OPN CATH | Not properly listed with FDA |
| SPINY SOL PIGWEED         | Non-standardized allergenic  |
| SPRING BIRCH INJ 1:20     | Non-standardized allergenic  |
| SPY-MIS SOL KIT           | Diagnostic Agent             |
| SPY-PHI KIT INJ 25MG      | Diagnostic Agent             |
| SSKI SOL 1GM/ML           | Vitamin/Mineral              |
| SSS CRE 10%-5%            | Unapproved Drug              |
| SSS 10-5 AER 10-5%        | Unapproved Drug              |
| STANDARDIZED SOL MITE     | Non-standardized allergenic  |
| STANDARDIZED SOL MITE MIX | LIST                         |
| STENDRA TAB 100MG         | Erectile Dysfunction         |
| STENDRA TAB 200MG         | Erectile Dysfunction         |
| STENDRA TAB 50MG          | Erectile Dysfunction         |
| STERIL TALC SUS 5GM       | LIST                         |
| STERIL WATER INJ          | LIST                         |
| STERIL WATER INJ          | LIST                         |
| STERILE INJ WATER         | Not properly listed with FDA |
| STERILE DILU SOL EPOPROS  | LIST                         |
| STERILE DILU SOL FLOLAN   | LIST                         |
| STERILE DILU SOL REMODULI | LIST                         |
| STERILE DILU SOL TREPROST | LIST                         |
| STERILE TOPI GEL L.E.T.   | Not properly listed with FDA |
| STRATA CTX GEL            | Device                       |
| STRATA GRT GEL            | Device                       |
| STRATA MARK GEL           | Device                       |
| STRATA TRIZ GEL           | Device                       |
| STRATA XRT GEL            | Device                       |



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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| STRAWBERRY INJ 1:40       | Diagnostic Agent             |
| STRAWBERRY INJ EXTRACT    | Diagnostic Agent             |
| STROVITE FOR TAB          | Vitamin/Mineral              |
| STROVITE ONE TAB          | Vitamin/Mineral              |
| SUCCINYL CHO INJ 100/5ML  | Not properly listed with FDA |
| SUCCINYL CHO INJ 140/7ML  | Not properly listed with FDA |
| SUCCINYL CHO INJ 200/10ML | Not properly listed with FDA |
| SUCCINYLCHOL INJ 100/5ML  | Not properly listed with FDA |
| SUCCINYLCHOL INJ 140/7ML  | Not properly listed with FDA |
| SUCCINYLCHOL INJ 200/10ML | Not properly listed with FDA |
| SUCCINYLCHOL INJ 20MG/ML  | Not properly listed with FDA |
| SUFENTANIL INJ 100/2ML    | General Anesthetic           |
| SUFENTANIL INJ 250/5ML    | General Anesthetic           |
| SUFENTANIL INJ 50MCG/ML   | General Anesthetic           |
| SULFAC SULFR PAD 9.8-4.8% | Unapproved Drug              |
| SULFACLEANSE SUS 8-4%     | Unapproved Drug              |
| SULFAMEZ EMU 10-1%        | Not properly listed with FDA |
| SULFUR COLLO KIT 99M      | Diagnostic Agent             |
| SULFUR/RESOR LOT 5-2%     | Not properly listed with FDA |
| SUMADAN KIT               | Unapproved Drug              |
| SUMADAN WASH LIQ 9-4.5%   | Unapproved Drug              |
| SUMADAN XLT KIT 9-4.5%    | Unapproved Drug              |
| SUMANSETRON PAK           | Unapproved Drug              |
| SUMAXIN PAD 10-4%         | Unapproved Drug              |
| SUMAXIN CP KIT            | Unapproved Drug              |
| SUPARTZ FX INJ 25/2.5ML   | Surgical Supply/Medical      |
| SUPER INJ QUAD-MIX        | Erectile Dysfunction         |
| SUPER INJ TRI-MIX         | Erectile Dysfunction         |
| SUPER BI-MIX INJ 150-10MG | Erectile Dysfunction         |
| SUPERVITE LIQ             | Vitamin/Mineral              |
| SUPPORT LIQ               | Vitamin/Mineral              |
| SUPRANE INH               | General Anesthetic           |
| SUPRANE SOL               | General Anesthetic           |
| SUPREME CRE               | Not properly listed with FDA |
| SURE RESULT KIT O3D3 SYS  | LIST                         |
| SURE RESULT MIS DSS PACK  | LIST                         |
| SUSPENDRX SUS SWEET       | Not properly listed with FDA |
| SUSPENDRX SUS UNSWEET     | Not properly listed with FDA |
| SUSPENSION SUS VEHICLE    | Not properly listed with FDA |
| SUVICORT EMU              | Device                       |
| SWEET CHERRY INJ 1:20     | Diagnostic Agent             |
| SWEET CORN INJ EXTRACT    | Diagnostic Agent             |
| SWEET GUM INJ 1:20        | Non-standardized allergenic  |
| SWEET VERNAL INJ GRASS PO | Non-standardized allergenic  |

## MEDICARE PART D EXCLUDED DRUGS LIST 2024\_updated January 2024

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| Label Name  | Reason   |
|---|--|
| SX1 POST-OP KIT MEDICATE  | LIST   |
| SYNALAR KIT 0.025%  | LIST   |
| SYNALAR KIT 0.025%  | LIST   |
| SYNALAR TS KIT 0.01%  | LIST   |
| SYNAPRYN SUS 10MG/ML  | Unapproved Drug  |
| SYNERDERM EMU   | Not properly listed with FDA   |
| SYNOJOYNT INJ 20MG/2ML  | Surgical Supply/Medical  |
| SYNVISC INJ 8MG/ML  | Surgical Supply/Medical  |
| SYNVISC ONE INJ 8MG/ML  | Surgical Supply/Medical  |
| SYRPALTA SYP  | Not properly listed with FDA   |
| SYRSPEND SF LIQ   | Bulk Ingredient  |
| SYRUP SYP VEHICLE   | Not properly listed with FDA   |
| SYRUP SF SYP VEHICLE  | Not properly listed with FDA   |
| T.R.U.E. TES TEST   | Diagnostic agent   |
| TABRADOL SUS 1MG/ML   | Unapproved Drug  |
| TABRADOL SUS RAPIDPAQ   | Unapproved Drug  |
| TADALAFIL TAB 10MG  | Erectile Dysfunction   |
| TADALAFIL TAB 2.5MG* [Coverable for Benign Prostatic Hyperplasia (BPH) diagnosis only.]   | Erectile Dysfunction [only coverable for diagnosis of Benign Prostatic Hyperplasia (BPH)]    |
| TADALAFIL TAB 20MG* [Coverable for Pulmonary Arterial Hypertension (PAH) diagnosis only.] | Erectile Dysfunction [only coverable for diagnosis of Pulmonary Arterial Hypertension (PAH)] |
| TADALAFIL TAB 5MG* [Coverable for Benign Prostatic Hyperplasia (BPH) diagnosis only.]     | Erectile Dysfunction [only coverable for diagnosis of Benign Prostatic Hyperplasia (BPH)]    |
| TAGITOL V SUS 40%   | Diagnostic Agent   |
| TALIVA CAP  | Vitamin/Mineral  |
| TALL RAGWEED SOL 1:20   | Non-standardized allergenic  |
| TARDEOXIA CRE   | Not properly listed with FDA   |
| TARDIMAXIA GEL  | Not properly listed with FDA   |
| TARON-BC MIS  | Vitamin/Mineral  |
| TARON-C DHA CAP   | Vitamin/Mineral  |
| TARON-PREX CAP  | Vitamin/Mineral  |
| TAROXIA CRE   | Not properly listed with FDA   |
| TAROXIA GEL   | Not properly listed with FDA   |
| TASOPROL KIT  | LIST   |
| TAURINE INJ 50MG/ML   | Unapproved Drug  |
| TAUVID SOL  | Diagnostic Agent   |
| TDC MAX CRE   | Not properly listed with FDA   |
| TECARTUS SUS  | LIST   |
| TECHNELITE KIT HEU  | Diagnostic Agent   |
| TECHNELITE KIT LEU  | Diagnostic Agent   |
| TEGADERM AG PAD 2"X2"   | Not properly listed with FDA   |
| TEGADERM AG PAD 4"X5"   | Not properly listed with FDA   |
| TEGADERM AG PAD 4"X8"   | Not properly listed with FDA   |
| TEGADERM AG PAD 8"X8"   | Not properly listed with FDA   |
| TELFA ISLAND PAD 4"X5"  | Not properly listed with FDA   |
| TELFA ISLAND PAD 4"X8"  | Not properly listed with FDA   |
| TEMODAR CAP 100MG   | Oral drug for cancer; infusion available under Part B  |
| TEMODAR CAP 140MG   | Oral drug for cancer; infusion available under Part B  |

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| Label Name   | Reason  |
|--|---|
| TEMODAR CAP 180MG  | Oral drug for cancer; infusion available under Part B |
| TEMODAR CAP 250MG  | Oral drug for cancer; infusion available under Part B |
| TEMOZOLOMIDE CAP 100MG                                       | Oral drug for cancer; infusion available under Part B |
| TEMOZOLOMIDE CAP 140MG                                       | Oral drug for cancer; infusion available under Part B |
| TEMOZOLOMIDE CAP 180MG                                       | Oral drug for cancer; infusion available under Part B |
| TEMOZOLOMIDE CAP 20MG  | Oral drug for cancer; infusion available under Part B |
| TEMOZOLOMIDE CAP 250MG                                       | Oral drug for cancer; infusion available under Part B |
| TEMOZOLOMIDE CAP 5MG   | Oral drug for cancer; infusion available under Part B |
| TERODERM CRE   | Not properly listed with FDA                          |
| TERODERM CRE PLUS  | Not properly listed with FDA                          |
| TERRELL SOL  | General Anesthetic                                    |
| TESTONE CIK KIT 200MG/ML                                     | LIST  |
| TESTOST CYP INJ 200MG/ML                                     | Not properly listed with FDA                          |
| TESTOSTERONE INJ 100MG/ML (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE INJ 150MG/ML (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE INJ 200MG/ML (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE INJ CYP/PROP (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE INJ CYPIONAT (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE INJ CYPIONAT (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE INJ CYPIONAT (MANUFACTURED BY EMPOWER PHARMACY) | Unapproved Drug                                       |
| TESTOSTERONE MIS 100MG (MANUFACTURED BY EMPOWER PHARMACY)    | Unapproved Drug                                       |
| TESTOSTERONE MIS 200MG (MANUFACTURED BY EMPOWER PHARMACY)    | Unapproved Drug                                       |
| TESTOSTERONE MIS 25MG (MANUFACTURED BY EMPOWER PHARMACY)     | Unapproved Drug                                       |
| TESTOSTERONE MIS 50MG (MANUFACTURED BY EMPOWER PHARMACY)     | Unapproved Drug                                       |
| TETOXIA CRE 0.01-4%  | Not properly listed with FDA                          |
| TETRACAINE INJ 1%  | Unapproved Drug                                       |
| TETRIX CRE   | Not properly listed with FDA                          |
| TEXAVITE LQ LIQ  | Vitamin/Mineral                                       |
| THIAMINE HCL INJ 100MG/ML                                    | Vitamin/Mineral                                       |
| THIAMINE HCL INJ 200/2ML                                     | LIST  |
| THIAMINE HCL INJ 200MG/2M                                    | LIST  |
| THRIVACIN LIQ DETOX  | Vitamin/Mineral                                       |
| THRIVACIN 30 LIQ   | Vitamin/Mineral                                       |
| THRIVITE RX TAB 29-1MG                                       | Vitamin/Mineral                                       |
| THROMBIN KIT 5000UNIT  | Blood Component                                       |
| THROMBIN-JMI KIT 20000UNT                                    | Blood Component                                       |
| THROMBIN-JMI KIT 5000UNIT                                    | Blood Component                                       |
| THROMBIN-JMI SOL 20000UNT                                    | Blood Component                                       |
| THROMBIN-JMI SOL 5000UNIT                                    | Blood Component                                       |
| THYROID TAB 120MG  | Unapproved Drug                                       |
| THYROID TAB 15MG   | Unapproved Drug                                       |
| THYROID TAB 30MG   | Unapproved Drug                                       |
| THYROID TAB 60MG   | Unapproved Drug                                       |
| THYROID TAB 90MG   | Unapproved Drug                                       |

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| Label Name               | Reason                       |
|--------------------------|------------------------------|
| TIGHTENING CRE BASE      | Not properly listed with FDA |
| TIMOTHY SOL GRASS        | Non-standardized allergenic  |
| TIMOTHY GRAS INJ POLLEN  | LIST                         |
| TISSEEL KIT 2ML          | Not properly listed with FDA |
| TIZANIDINE KIT COMFORT   | LIST                         |
| TL FOLATE TAB            | Vitamin/Mineral              |
| TL G-FOL OS TAB          | Vitamin/Mineral              |
| TL ICON CAP              | Vitamin/Mineral              |
| TL-CARE DHA CAP 27-1-500 | Vitamin/Mineral              |
| TL-FLUORIVIT CHW         | Vitamin/Mineral              |
| TL-HEM 150 TAB           | Vitamin/Mineral              |
| TL-SELECT CAP            | Vitamin/Mineral              |
| TM-VITE RX TAB           | Multi-vitamin                |
| TOBAIKIENT CAP           | Dietary Supplement           |
| TOMATO INJ EXTRACT       | Diagnostic Agent             |
| TOMATO EXT INJ 1:40      | Diagnostic Agent             |
| TOPICAL GEL L.E.T        | Not properly listed with FDA |
| TOPIDEX KIT 10MG/1ML     | LIST                         |
| TORONOVA KIT 30MG/ML     | LIST                         |
| TORONOVA II KIT 30MG/ML  | LIST                         |
| TOTALVISC INJ 1%-2.5%    | Not properly listed with FDA |
| TOVET KIT KIT 0.05%      | LIST                         |
| TOXICOLOGY KIT MEDICATE  | Diagnostic Agent             |
| TRACE ELEM 4 INJ PED     | Unapproved Drug              |
| TRALEMENT INJ            | LIST                         |
| TRAMADOL CRE 5%          | Bulk Ingredient              |
| TRANSDERMAL CRE PAIN BAS | Not properly listed with FDA |
| TRANZGEL GEL             | Unapproved Drug              |
| TREE MIX SOL 9           | LIST                         |
| TRETTEN INJ              | Blood Component              |
| TRIADIME KIT 0.1-0.5%    | Unapproved Drug              |
| TRIADIME-80 KIT 0.1-5%   | Unapproved Drug              |
| TRIAM/MOXI SUS 15-1      | Unapproved Drug              |
| TRI-AMINO INJ            | Unapproved Drug              |
| TRIASIL PAK              | Unapproved Drug              |
| TRICARE TAB PRENATAL     | Vitamin/Mineral              |
| TRICHOPHYTON INJ 1:200   | Diagnostic Agent             |
| TRICHOSOL SOL            | Not properly listed with FDA |
| TRICITRASOL CON          | LIST                         |
| TRICITRATES SOL          | Unapproved Drug              |
| TRICON CAP               | Vitamin/Mineral              |
| TRICOPHYTON SOL MENTAGRO | LIST                         |
| TRIFERIC POW 272MG       | Vitamin/Mineral              |
| TRIFERIC SOL 27.2/5ML    | LIST                         |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| TRIHEAL-80 KIT 0.1-5%     | Unapproved Drug              |
| TRILOAN II KIT 40MG/ML    | LIST                         |
| TRILOAN SUIK KIT 40MG/ML  | LIST                         |
| TRILOCICLO KIT 0.1-8%     | Unapproved Drug              |
| TRI-LUMA CRE              | Cosmetic                     |
| TRILURON INJ 20MG/2ML     | Surgical Supply/Medical      |
| TRI-MIX INJ               | Erectile Dysfunction         |
| TRIMO-SAN GEL             | Unapproved Drug              |
| TRIMOXI+ INJ              | Not properly listed with FDA |
| TRINATAL RX TAB 1         | Vitamin/Mineral              |
| TRINATE TAB               | Vitamin/Mineral              |
| TRIONEX PAK               | Unapproved Drug              |
| TRIPHROCAPS CAP           | Vitamin/Mineral              |
| TRIPLE COMPL CRE 3 KIT    | Not properly listed with FDA |
| TRIPLE PMB SOL            | Not properly listed with FDA |
| TRIPLE PMK SOL            | Not properly listed with FDA |
| TRISTART CAP FREE         | Multi-vitamin w/ iron        |
| TRISTART DHA CAP          | Vitamin/Mineral              |
| TRISTART ONE CAP 35-1-215 | Vitamin/Mineral              |
| TRI-VI-FLOR SUS 0.25/ML   | Vitamin/Mineral              |
| TRI-VI-FLOR SUS 0.5MG/ML  | Vitamin/Mineral              |
| TRI-VI-FLORO SUS 0.25/ML  | Vitamin/Mineral              |
| TRI-VI-FLORO SUS 0.5MG/ML | Vitamin/Mineral              |
| TRIVISC INJ 25/2.5ML      | Surgical Supply/Medical      |
| TRI-VIT/FLUO DRO 0.25MG   | Vitamin/Mineral              |
| TRI-VIT/FLUO DRO 0.5MG    | Vitamin/Mineral              |
| TRIVIX KIT                | Unapproved Drug              |
| TRONVITE TAB              | Vitamin/Mineral              |
| TROP-CYC-PE DRO 1-1-2.5   | Unapproved Drug              |
| TROPICAMIDE SOL 0.5% OP   | Diagnostic Agent             |
| TROPICAMIDE SOL 1% OP     | Diagnostic Agent             |
| TROP-PROP-PE DRO KETO     | Unapproved Drug              |
| TRUBREXA PAD              | Unapproved Drug              |
| TUBERSOL INJ 5/0.1ML      | Diagnostic Agent             |
| TULIVITE TAB 35-1MG       | Dietary Supplement           |
| TUSSICAPS CAP 10-8MG      | Cough/Cold                   |
| TUXARIN ER TAB 54.3-8MG   | LIST                         |
| TUZISTRA XR SUS           | Cough/Cold                   |
| TYLACTIN LIQ REST 10      | Not properly listed with FDA |
| TYLACTIN LIQ RTD 15       | Not properly listed with FDA |
| TYLACTIN POW BLD 20PE     | Not properly listed with FDA |
| TYLACTIN POW RESTOR5      | Not properly listed with FDA |
| TYLACTIN COM BAR 15 PE    | Not properly listed with FDA |
| TYLACTIN RTD LIQ 15 CHOC  | Not properly listed with FDA |
| TYR EASY TAB              | Not properly listed with FDA |

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| Label Name                | Reason                                   |
|---------------------------|--|
| TYR EXPRESS PAK 15+ UNFL  | Not properly listed with FDA             |
| TYR EXPRESS PAK 20+ UNFL  | Not properly listed with FDA             |
| UDSX MEDICAT KIT SYSTEM   | LIST                                     |
| UDSXMP MEDIC KIT SYSTEM   | LIST                                     |
| ULTANE SOL                | General Anesthetic                       |
| ULTIMATECARE CAP ONE      | Vitamin/Mineral                          |
| ULTRA HERS CAP RX         | Dietary Supplement                       |
| ULTRA HIS CAP             | Dietary Supplement                       |
| ULTRA PCOS CAP            | Dietary Supplement                       |
| ULTRABAG/ SOL DIANEAL     | Dialysis covered by ESRD bundled payment |
| ULTRABAG/ SOL DIANEAL     | Dialysis covered by ESRD bundled payment |
| ULTRABAG/PD2 SOL DIANEAL  | Dialysis covered by ESRD bundled payment |
| ULTRABAG/PD2 SOL DIANEAL  | Dialysis covered by ESRD bundled payment |
| ULTRABAG/PD2 SOL DIANEAL  | Dialysis covered by ESRD bundled payment |
| ULTRASAL-ER SOL 28.5%     | Unapproved Drug                          |
| ULTRASOUND GEL BLUE       | Diagnostic Agent                         |
| ULTRASOUND GEL CLEAR      | Diagnostic Agent                         |
| ULTRAVIST INJ 300MG/ML    | Diagnostic Agent                         |
| ULTRAVIST INJ 370MG/ML    | Diagnostic Agent                         |
| UMECTA MOUSS AER 40%      | Unapproved Drug                          |
| U-MILD SHA                | Not properly listed with FDA             |
| UNISPEND ANH SUS SWEETENE | Not properly listed with FDA             |
| UNIVERSAL GEL WATER       | Not properly listed with FDA             |
| URAMAXIN GEL 45%          | Unapproved Drug                          |
| URAMIT MB CAP 118MG       | Unapproved Drug                          |
| UREA AER 35%              | Not properly listed with FDA             |
| UREA CRE 39%              | Unapproved Drug                          |
| UREA CRE 39.5%            | Unapproved Drug                          |
| UREA CRE 40%              | Unapproved Drug                          |
| UREA CRE 41%              | Unapproved Drug                          |
| UREA CRE 45%              | Unapproved Drug                          |
| UREA CRE 47%              | Unapproved Drug                          |
| UREA EMU 50%              | Unapproved Drug                          |
| UREA GEL 40%              | Unapproved Drug                          |
| UREA LOT 40%              | Unapproved Drug                          |
| UREA LOT 45%              | Unapproved Drug                          |
| UREA HYDRATI AER 35%      | Unapproved Drug                          |
| UREA NAIL GEL 45%         | Unapproved Drug                          |
| UREA/SALICY CRE 39.5-2%   | Unapproved Drug                          |
| UREDEB CRE 39%            | Not properly listed with FDA             |
| URELLE TAB                | Unapproved Drug                          |
| UREMEZ-40 CRE 40%         | Not properly listed with FDA             |
| URESOL CRE 42.5%          | Not properly listed with FDA             |
| URESTA START MIS KIT      | Not properly listed with FDA             |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| URETRON D/S TAB           | Unapproved Drug              |
| URETRON D/S TAB           | Unapproved Drug              |
| URIBEL CAP 118MG          | Unapproved Drug              |
| URIBEL TAB 81.6MG         | Unapproved Drug              |
| URIMAR-T CAP              | Unapproved Drug              |
| URIMAR-T TAB              | Unapproved Drug              |
| URIN D/S TAB              | Unapproved Drug              |
| URNEVA CAP                | Unapproved Drug              |
| URO-458 TAB               | Unapproved Drug              |
| UROGESIC- TAB BLUE        | Unapproved Drug              |
| URO-MP CAP 118MG          | Unapproved Drug              |
| UROPHEN MB TAB 81.6MG     | Unapproved Drug              |
| UROSEX TAB                | Vitamin/Mineral              |
| URO-SP CAP 118MG          | Unapproved Drug              |
| URSODIOL SUS 30MG/ML      | Not properly listed with FDA |
| USTELL CAP                | Unapproved Drug              |
| UTIRA-C TAB               | Unapproved Drug              |
| VANCOMYC/D5W INJ 1.25/250 | Not properly listed with FDA |
| VANCOMYC/D5W INJ 1.5/250  | Not properly listed with FDA |
| VANCOMYCIN SUS +SYRSPEN   | Not properly listed with FDA |
| VANILLA SILQ SUS          | Diagnostic Agent             |
| VANIQA CRE 13.9%          | Cosmetic                     |
| VANISH LIQ 5%             | LIST                         |
| VANISHING CRE             | Not properly listed with FDA |
| VANISHING CRE BOTANCAL    | Not properly listed with FDA |
| VANISH-PEN CRE            | Not properly listed with FDA |
| VANOXIDE-HC LOT 5-0.5%    | Unapproved Drug              |
| VARDENAFIL TAB 10MG       | Erectile Dysfunction         |
| VARDENAFIL TAB 10MG ODT   | Erectile Dysfunction         |
| VARDENAFIL TAB 2.5MG      | Erectile Dysfunction         |
| VARDENAFIL TAB 20MG       | Erectile Dysfunction         |
| VARDENAFIL TAB 5MG        | Erectile Dysfunction         |
| VARDIMAXIA GEL            | Not properly listed with FDA |
| VARIBAR THIN SUS LIQUID   | Diagnostic Agent             |
| VARIBER SUS NECTAR        | Diagnostic agent             |
| VARITHENA AER 10MG/ML     | LIST                         |
| VAROPHEN KIT 1.5%         | LIST                         |
| VAROXIA CRE               | Not properly listed with FDA |
| VAROXIA GEL               | Not properly listed with FDA |
| VASCAZEN CAP 1GM          | Not properly listed with FDA |
| VASCULERA TAB             | Medical Food                 |
| VASELINE GEL              | LIST                         |
| VASHE CLEANS SOL          | Not properly listed with FDA |
| VASHE WOUND SOL           | Not properly listed with FDA |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| VASHE WOUND SOL THERAPY   | Not properly listed with FDA |
| VAXNEUVANCE INJ           | Pneumococcal vaccine         |
| VB6 P5P POW               | Not properly listed with FDA |
| V-C FORTE CAP             | Vitamin/Mineral              |
| VECURONIUM INJ 10MG       | LIST                         |
| VECURONIUM INJ 20MG       | LIST                         |
| VEG CAPSULE CAP #0 WHITE  | Unapproved Drug              |
| VEG CAPSULE CAP #00 CLEA  | Not properly listed with FDA |
| VEG CAPSULE CAP #00 WHIT  | Unapproved Drug              |
| VEG CAPSULE CAP #1 GREEN  | Unapproved Drug              |
| VEG CAPSULE CAP #1 WHITE  | Unapproved Drug              |
| VEG CAPSULE CAP #2 WHITE  | Unapproved Drug              |
| VEG CAPSULE CAP #3 WHITE  | Unapproved Drug              |
| VEG CAPSULE CAP #4 WHITE  | Unapproved Drug              |
| VENA-BAL MIS DHA          | Vitamin/Mineral              |
| VENELEX OIN               | Device                       |
| VENEXA TAB                | Multi-vitamin                |
| VENEXA FE TAB             | Multi-vitamin                |
| VENIPUNCTURE KIT PHLEBOTO | Not properly listed with FDA |
| VENNGEL ONE KIT 1%        | LIST                         |
| VENOFER INJ 20MG/ML       | Vitamin/Mineral              |
| VENOMIL KIT HONEYBEE      | Non-standardized allergenic  |
| VENOMIL KIT HONEYBEE      | Non-standardized allergenic  |
| VENOMIL KIT WASP          | Non-standardized allergenic  |
| VENOMIL KIT WHT HORN      | Non-standardized allergenic  |
| VENOMIL KIT WHT HORN      | Non-standardized allergenic  |
| VENOMIL KIT YEL HORN      | Non-standardized allergenic  |
| VENOMIL KIT YEL HORN      | Non-standardized allergenic  |
| VENOMIL KIT YEL JACK      | Non-standardized allergenic  |
| VENOMIL KIT YEL JACK      | Non-standardized allergenic  |
| VENOMIL MIX INJ VESPID    | Non-standardized allergenic  |
| VENTRIXYL FE TAB          | Vitamin/Mineral              |
| VERSAFREE SYP             | Not properly listed with FDA |
| VERSAPLUS SYP             | Not properly listed with FDA |
| VERSAPRO AER              | Not properly listed with FDA |
| VERSAPRO CRE              | Bulk Ingredient              |
| VERSAPRO SHA              | Not properly listed with FDA |
| VERSATILE CRE BASE        | Bulk Ingredient              |
| VERSATILE CRE RICH BSE    | Bulk Ingredient              |
| VEXASYN GEL               | Not properly listed with FDA |
| VEXATROL KIT 2.5-2.5%     | Not properly listed with FDA |
| VIAGRA TAB 100MG          | Erectile Dysfunction         |
| VIAGRA TAB 25MG           | Erectile Dysfunction         |
| VIAGRA TAB 50MG           | Erectile Dysfunction         |
| VIC-FORTE CAP             | Vitamin/Mineral              |



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| Label Name              | Reason                       |
|-------------------------|------------------------------|
| VILACTIN AA LIQ PLUS    | Not properly listed with FDA |
| VILACTIN AA POW PLUS    | Not properly listed with FDA |
| VILAMIT MB CAP 118MG    | Unapproved Drug              |
| VILEVEV MB TAB 81MG     | Unapproved Drug              |
| VINATE DHA CAP 27-1.13  | Vitamin/Mineral              |
| VINATE II TAB           | Vitamin/Mineral              |
| VINATE ONE TAB          | Vitamin/Mineral              |
| VIRASAL LIQ 27.5%       | Unapproved Drug              |
| VIRT-C DHA CAP          | Vitamin/Mineral              |
| VIRT-CAPS CAP           | Vitamin/Mineral              |
| VIRT-GARD TAB 2.2-25-1  | Vitamin/Mineral              |
| VIRT-NATE CAP DHA       | Vitamin/Mineral              |
| VIRT-PHOS TAB 250 NEUT  | Vitamin/Mineral              |
| VIRT-PN DHA CAP         | Vitamin/Mineral              |
| VIRT-PN PLUS CAP        | Vitamin/Mineral              |
| VISBIOME PAK            | Not properly listed with FDA |
| VISCO-3 INJ 25/2.5ML    | Surgical Supply/Medical      |
| VISIPAQUE INJ 270MG/ML  | Diagnostic Agent             |
| VISIPAQUE INJ 320MG/ML  | Diagnostic Agent             |
| VIT A/C/D/FL DRO 0.25MG | Vitamin/Mineral              |
| VITA S FORTE TAB        | Vitamin/Mineral              |
| VITACEL TAB             | Vitamin/Mineral              |
| VITAFOL CAP ULTRA       | Vitamin/Mineral              |
| VITAFOL CHW GUMMIES     | Vitamin/Mineral              |
| VITAFOL TAB             | Vitamin/Mineral              |
| VITAFOL FE+ CAP         | Vitamin/Mineral              |
| VITAFOL STRP MIS 1MG    | Vitamin/Mineral              |
| VITAFOL-NANO TAB        | Vitamin/Mineral              |
| VITAFOL-OB PAK +DHA     | Vitamin/Mineral              |
| VITAFOL-OB TAB 65-1MG   | Vitamin/Mineral              |
| VITAFOL-ONE CAP         | Vitamin/Mineral              |
| VITAL-D RX TAB          | Vitamin/Mineral              |
| VITALIPID N INJ INFANT  | Multi-vitamin                |
| VITAMED MD CAP ONE RX   | Multi-vitamin w/ iron        |
| VITAMEDMD CAP ONE RX    | Vitamin/Mineral              |
| VITAMEZ CAP             | Vitamin/Mineral              |
| VITAMIN KIT SYS-B12     | LIST                         |
| VITAMIN D CAP 1.25MG    | LIST                         |
| VITAMIN D CAP 50000     | Vitamin/Mineral              |
| VITAMIN D CAP 50000UNT  | Vitamin/Mineral              |
| VITAMIN K1 INJ 10MG/ML  | Vitamin/Mineral              |
| VITAMIN K1 INJ 1MG/0.5  | Vitamin/Mineral              |
| VITAPEARL CAP           | Vitamin/Mineral              |
| VITA-PREN TAB           | Vitamin/Mineral              |
| VITAROCA PLU TAB        | Vitamin/Mineral              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| VITASURE TAB              | Vitamin/Mineral              |
| VITATHELY TAB             | Vitamin/Mineral              |
| VITATRUE MIS              | Vitamin/Mineral              |
| VITLIPID N INJ ADULT      | Multi-vitamin                |
| VITLIPID N INJ INFANT     | Multi-vitamin                |
| VITRAMYN TAB              | Vitamin/Mineral              |
| VITRANOL TAB              | Multi-vitamin                |
| VITRANOL FE TAB           | Multi-vitamin                |
| VITREXATE TAB             | Multi-vitamin                |
| VITREXATE FE TAB          | Multi-vitamin                |
| VITREXYL TAB              | Multi-vitamin                |
| VITREXYL TAB IRON         | Multi-vitamin                |
| VIVA DHA CAP              | Vitamin/Mineral              |
| VIZAMYL INJ               | Diagnostic Agent             |
| VOL-CARE RX TAB           | Vitamin/Mineral              |
| VOL-NATE TAB              | Vitamin/Mineral              |
| VOLUMEX INJ 25/ML         | Diagnostic Agent             |
| VONVENDI INJ 1300UNIT     | Blood Component              |
| VONVENDI INJ 650UNIT      | Blood Component              |
| VOPAC MDS KIT 1.5%        | LIST                         |
| VORVIDA MIS               | Not properly listed with FDA |
| VP FC CRE KIT             | Not properly listed with FDA |
| VP GKL CRE KIT            | Not properly listed with FDA |
| VP-PNV-DHA CAP            | Vitamin/Mineral              |
| VP-VITE RX TAB            | Vitamin/Mineral              |
| VSL#3 DS PAK 900BIL       | Not properly listed with FDA |
| VUEWAY INJ                | Diagnostic Agent             |
| VYLEESI INJ 1.75/0.3      | LIST                         |
| WASP VENOM INJ 1300MCG    | Non-standardized allergenic  |
| WASP VENOM INJ 550MCG     | Non-standardized allergenic  |
| WATER BASE GEL            | Not properly listed with FDA |
| WAX MYRTLE INJ 1:20       | Non-standardized allergenic  |
| WEGOVY INJ 0.25MG         | Anorexic, Anti-obesity Agent |
| WEGOVY INJ 0.5MG          | Anorexic, Anti-obesity Agent |
| WEGOVY INJ 1.7MG          | Anorexic, Anti-obesity Agent |
| WEGOVY INJ 1MG            | Anorexic, Anti-obesity Agent |
| WEGOVY INJ 2.4MG          | Anorexic, Anti-obesity Agent |
| WELLFOLA TAB              | Multi-vitamin                |
| WELLPRO 31 CAP            | Dietary Supplement           |
| WESCAP-C DHA CAP          | Multi-vitamin w/ iron        |
| WESCAP-PN CAP DHA         | Multi-vitamin w/ iron        |
| WESCAPS CAP               | Multi-vitamin                |
| WESNATAL DHA PAK COMPLETE | Multi-vitamin w/ iron        |
| WESNATE DHA CAP           | Multi-vitamin w/ iron        |

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| Label Name               | Reason  |
|--------------------------|---|
| WES-PHOS 250 TAB NEUTRAL | Not properly listed with FDA                              |
| WESTAB MAX TAB 2.5-25-2  | Vitamin/Mineral   |
| WESTAB MINI TAB 2.2-25-1 | Vitamin/Mineral   |
| WESTAB ONE TAB 2.5-25-1  | Vitamin/Mineral   |
| WESTAB PLUS TAB 27-1MG   | Vitamin/Mineral   |
| WESTERN JUNI INJ 1:40    | Non-standardized allergenic                               |
| WESTERN JUNI INJ 1:40    | Diagnostic Agent  |
| WESTERN JUNI SOL 1:20    | Non-standardized allergenic                               |
| WESTGEL DHA CAP          | Multi-vitamin w/ iron                                     |
| WHEAT GERM OIL           | Not properly listed with FDA                              |
| WHITE ALDER INJ 1:20     | Non-standardized allergenic                               |
| WHITE ASH INJ 1:20       | Non-standardized allergenic                               |
| WHITE ASH INJ 40000PNU   | Non-standardized allergenic                               |
| WHITE BIRCH INJ 1:20     | Non-standardized allergenic                               |
| WHITE MULBER SOL 1:20    | Non-standardized allergenic                               |
| WHITE OAK SOL            | Non-standardized allergenic                               |
| WHITE PINE INJ 1:20      | Non-standardized allergenic                               |
| WHITE POTATO INJ 1:20    | Diagnostic Agent  |
| WHOLE EGG INJ EXTRACT    | Diagnostic Agent  |
| WHOLE WHEAT INJ 1:20     | Diagnostic Agent  |
| WIDE-SEAL DPR KIT 60     | Device  |
| WIDE-SEAL DPR KIT 65     | Device  |
| WIDE-SEAL DPR KIT 70     | Device  |
| WIDE-SEAL DPR KIT 75     | Device  |
| WIDE-SEAL DPR KIT 80     | Device  |
| WIDE-SEAL DPR KIT 85     | Device  |
| WIDE-SEAL DPR KIT 90     | Device  |
| WIDE-SEAL DPR KIT 95     | Device  |
| WILATE INJ               | Blood Component   |
| WILZIN CAP 25MG          | Unapproved Drug   |
| WOUNDGELHA GEL MATRIX    | Surgical Supply/Medical                                   |
| WPR PLUS MIS             | OTC Product   |
| XALIX SOL 28%            | Unapproved Drug   |
| XCELLISTEM POW 250MG     | Not properly listed with FDA                              |
| XELODA TAB 150MG         | Covered under Part B; oral drug only indicated for cancer |
| XELODA TAB 500MG         | Covered under Part B; oral drug only indicated for cancer |
| XEMATOP CRE BASE         | Not properly listed with FDA                              |
| XENICAL CAP 120MG        | Anorexic, Anti-obesity Agent                              |
| XENON XE 133 GAS 10MCI   | Diagnostic Agent  |
| XENON XE 133 GAS 20MCI   | Diagnostic Agent  |
| XENOVIEW GAS             | Diagnostic Agent  |
| XERAC-AC SOL 6.25%       | OTC Product   |
| XERALUX CRE              | Not properly listed with FDA                              |
| XEROFORM OCL PAD 1X8"    | not properly listed with FDA                              |

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| Label Name                | Reason                       |
|---------------------------|------------------------------|
| XEROFORM OCL PAD 4"X4"    | Not properly listed with FDA |
| XEROFORM OIL MIS 1"X8"    | Not properly listed with FDA |
| XEROFORM OIL MIS ROLL 4X9 | Not properly listed with FDA |
| XEROFORM OIL PAD 2"X2"    | Not properly listed with FDA |
| XEROFORM PET PAD 4X4 DRES | Not properly listed with FDA |
| XEROFORM PET PAD 5X9 DRES | Not properly listed with FDA |
| XEROFRM GAUZ MIS 1"X8"    | Not properly listed with FDA |
| XEROFRM GAUZ MIS 5"X9"    | Not properly listed with FDA |
| XEROFRM GAUZ PAD 5"X9"    | Not properly listed with FDA |
| XEROFRM PETR PAD 2"X2"    | Not properly listed with FDA |
| XEROFRM PETR PAD 4"X4"    | Not properly listed with FDA |
| XEROFRM ROLL MIS 4"X9"    | Not properly listed with FDA |
| XEROSTOMIA SOL RELIEF     | Not properly listed with FDA |
| XOLEGEL DUO/ KIT HEAD&SHD | LIST                         |
| XOLEGEL DUO/ KIT XOLEX    | LIST                         |
| XPERT XPRESS KIT COV-2    | Diagnostic Agent             |
| XRYLIX PAK                | LIST                         |
| XRYLIX II PAK             | Unapproved Drug              |
| XUREA CRE 39%             | Unapproved Drug              |
| XVITE TAB                 | Vitamin/Mineral              |
| XYBIOTIC CAP              | Dietary Supplement           |
| XYLIDERM KIT              | Unapproved Drug              |
| XYLO/EPI INJ 0.5%         | LIST                         |
| XYLO/EPI INJ 2%           | LIST                         |
| XYLO/EPI 1%- INJ 1:100000 | LIST                         |
| XYLO-MPF/EPI INJ 1%       | LIST                         |
| XYLO-MPF/EPI INJ 1.5%     | LIST                         |
| XYLO-MPF/EPI INJ 2%       | LIST                         |
| XYNTHA INJ 1000UNIT       | Blood Component              |
| XYNTHA INJ 2000UNIT       | Blood Component              |
| XYNTHA INJ 250UNIT        | Blood Component              |
| XYNTHA INJ 500UNIT        | Blood Component              |
| XYNTHA SOLOF INJ 1000UNIT | Blood Component              |
| XYNTHA SOLOF INJ 2000UNIT | Blood Component              |
| XYNTHA SOLOF INJ 3000UNIT | Blood Component              |
| XYNTHA SOLOF INJ 500UNIT  | Blood Component              |
| XYNTHA SOLOF KIT 250UNIT  | Blood Component              |
| XYZBAC TAB                | Vitamin/Mineral              |
| XYZMUNE CAP               | Dietary Supplement           |
| YAXATARXYN EMU            | Cosmetic                     |
| YELLOW DOCK INJ 1:20      | Non-standardized allergenic  |
| YELLOW HORN INJ 550MCG    | Non-standardized allergenic  |
| YELLOW JACK INJ 1300MCG   | Non-standardized allergenic  |
| YELLOW JACK INJ 550MCG    | Non-standardized allergenic  |

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| Label Name                | Reason                                |
|---------------------------|---------------------------------------|
| YESCARTA INJ              | Covered under Part B; Blood Component |
| YOKATAR EMU               | Cosmetic                              |
| ZACLIR LOT 8%             | Unapproved Drug                       |
| ZALVIT TAB 13-1MG         | Dietary Supplement                    |
| ZANABIN GEL HYDROGEL      | Not properly listed with FDA          |
| ZATEAN-PN CAP DHA         | Vitamin/Mineral                       |
| ZATEAN-PN CAP PLUS        | Vitamin/Mineral                       |
| ZELAC CAP                 | Dietary Supplement                    |
| ZENIFIBER AG PAD 2"X2"    | Surgical Supply/Medical               |
| ZENIFIBER AG PAD 4"X5"    | Surgical Supply/Medical               |
| ZENIFIBER AG PAD 6"X6"    | Surgical Supply/Medical               |
| ZENIFIBER AG PAD 8"X8"    | Surgical Supply/Medical               |
| ZENIFOAM AG PAD 2"X2"     | Surgical Supply/Medical               |
| ZENIFOAM AG PAD 4"X5"     | Surgical Supply/Medical               |
| ZENPHOR GEL WOUND         | Device                                |
| ZENPHOR PAD WOUND         | Device                                |
| ZEPBOUND INJ 10/0.5ML     | Anorexic, Anti-obesity Agent          |
| ZEPBOUND INJ 12.5MG       | Anorexic, Anti-obesity Agent          |
| ZEPBOUND INJ 15/0.5ML     | Anorexic, Anti-obesity Agent          |
| ZEPBOUND INJ 2.5MG        | Anorexic, Anti-obesity Agent          |
| ZEPBOUND INJ 5/0.5ML      | Anorexic, Anti-obesity Agent          |
| ZEPBOUND INJ 7.5MG        | Anorexic, Anti-obesity Agent          |
| ZERUVIA PAD 4-1%          | Unapproved Drug                       |
| ZICLOCIN PAK              | Unapproved Drug                       |
| ZICLOPRO PAK              | LIST                                  |
| ZILACAINE PAK 5%          | LIST                                  |
| ZINC CHLORID INJ 10/10ML  | LIST                                  |
| ZINC CHLORID INJ 1MG/ML   | LIST                                  |
| ZINC SULFATE INJ 10/10ML  | LIST                                  |
| ZINC SULFATE INJ 1MG/ML   | Unapproved Drug                       |
| ZINC SULFATE INJ 25MG/5ML | LIST                                  |
| ZINC SULFATE INJ 30/10ML  | LIST                                  |
| ZINC SULFATE INJ 3MG/ML   | LIST                                  |
| ZINC SULFATE INJ 5MG/ML   | Unapproved Drug                       |
| ZINC TRACE INJ 1MG/ML     | LIST                                  |
| ZINTREXYL-C TAB           | Multi-vitamin                         |
| ZIONODIL LOT 3%           | Unapproved Drug                       |
| ZIONODIL 100 LOT 3%       | Unapproved Drug                       |
| ZIPHEX TAB 13-1MG         | Multi-vitamin w/ iron                 |
| ZITHRANOL SHA 1%          | Unapproved Drug                       |
| ZMA CLEAR SUS 9-4.5%      | Unapproved Drug                       |
| ZOLPAK KIT                | LIST                                  |
| ZYNTEGLO INJ              | Not properly listed with FDA          |
| ZYVANA CAP                | Multi-vitamin                         |

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| Label Name  | Reason                       |
|-------------|------------------------------|
| ZYVEXOL TAB | Not properly listed with FDA |