UnitedHealthcare

UnitedHealthcare - Pharmacy Benefit

Quantity Limits per copay

Last updated 7/28/2025 (For 8/1/2025 Effective Date)
The following is a comprehensive list of medications that have a copay quantity limit. Supply Limits establish the maximum quantity of drug that is covered per copay or in a specified timeframe.
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Medication Name	Quantity Limit per copay	Overrides
Acanya - 1.2, 2.5%	50 grams	Yes
Aczone - 5, 7.5%	60 grams	Yes
Adrenaclick - 0.15, 0.3 mg	2 auto-injectors or 1 two pack (per copay)	No
Adzenys XR	31 tablets	No
Aemcolo	12 tablets	No
Afrezza	10 boxes	Yes
Airsupra	1 inhaler	No
Aklief	45 grams	Yes
Akynzeo	1 capsule	Yes
Alphagan P - 0.1, 0.15%	10 mL	No
Alrex ophthalmic	5 mL	No
Alinia - 100 mg	1 bottle	Yes
Alinia - 500 mg	6 tablets	Yes
Altabax	15 grams	Yes
Altreno	45 grams	Yes
Amerge - 1, 2.5 mg	4 tablets	No
Amzeeq	30 grams	Yes
Analapram E kit with 1 oz tube and 30 single use kit	1 kit	Yes
Anzemet - 50 mg	6 tablets	Yes
ApexiCon E cream	30 grams	Yes
Apidra	7 vials or 25 pens/cartridges	Yes
Arazio	45 grams	Yes
Arixtra - 2.5, 5, 7.5 & 10 mg	30 syringes	No
Atopaderm	100 grams	No
Atralin 0.05% gel	45 grams	Yes
Auvi-Q	2 pens	No
Axert - 6.25, 12.5 mg	4 tablets	No
Azelex - 20%	30 grams	Yes
Azopt ophthalmic	10 mL	No
Bactroban - cream	15 grams	Yes
Bactroban - ointment	22 grams	Yes
Basaglar	25 pens	Yes
Baqsimi	2 devices	No
Benzamycin gel	23.3 grams (jar only)	Yes
Bepreve	5 mL	No
Betimol	5 mL	No
bimatoprost	2.5 mL (1 bottle)	No

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Medication Name	Quantity Limit per copay	Overrides
Brexafemme - 150 mg	4 tablets	No
BromSite	5 mL	No
Bryhali	60 grams	Yes
Butorphanol Nasal Solution	3 bottles (7.5 mL)	No
Cabtreo	50 grams	Yes
Cambia - 50 mg packets	4 packets	No
Cequa	60 vials	No
Clenpiq	350 mL	No
Clindagel - 1%	75 mL	Yes
Clindamycin/benzoyl peroxide topical gel (generic Benzaclin)*	50 grams	Yes
Clindamycin gel	75 grams	Yes
Clobetasol (generic Temovate) gel	30 grams	Yes
Clobetasol E 0.05%	30 grams	Yes
Clobetasol shampoo (generic Clobex Shampoo)	118 mL	Yes
Clobetasol suspension	1 bottle	No
Clobex - cream	30 grams	Yes
Clobex - lotion	118 mL	Yes
Clobex - spray	59 mL	Yes
Clobex - shampoo	118 mL	Yes
Cloderm - 30, 75 gram pump	30 grams	Yes
Cloderm - 45, 90 gram tube	45 grams	Yes
Codeine / phenylephrine / promethazine	120 mL, maximum 360 mL/month	No
Codeine / promethazine	120 mL, maximum 360 mL/month	No
Combigan - 0.2% / 0.5% ophthalmic	5 mL	No
Cordran	120 grams or mL	Yes
Cordran SP	30 grams	Yes
Cordran Tape	1 package	Yes
Cosopt PF	60 single-use vials	No
Cutivate lotion	60 mL	Yes
Derma-Smoothe FS	118.28 mL	Yes
Desonate	60 grams	Yes
DesOwen cream & ointment	15 grams	Yes
DesOwen lotion	60 mL	Yes
Diabetic Lancing Device	1 device	No
Diastat - 2.5 mg/ Diastat AcuDial 10 & 20 mg	1 box (2 doses/box)	Yes
Differin - 0.1, 0.3% cream & gel	45 grams	Yes
Differin - 0.1% lotion	59 mL (2 oz)	Yes
Diflorasone diacetate	30 grams	Yes
Dovonex	60 grams	Yes
Dovonex Scalp Solution	60 mL	Yes
Duobrii	100 grams	No

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Medication Name	Quantity Limit per copay	Overrides
Dymista	0.125 mg (23 g)	No
Elestat ophthalmic	5 mL	No
Elidel	30 grams	Yes
Elyxyb - 120 mg/4.8 mL	6 bottles	No
Emend - 40, 125 mg	1 capsule	Yes
Emend - 80 mg	2 capsules	Yes
Emend - Unit of Use Pack	1 pack	Yes
Emend powder for suspension	3 pouches	Yes
Enstilar Foam	60 grams	Yes
Epiduo	45 grams	Yes
Epiduo Forte	45 grams	No
EpiPen - 0.3 mg	2 autoinjectors	No
EpiPen Jr.	4 auto-injectors	No
Ergomar - 2 mg	5 tablets	No
Epsolay	30 grams	No
Eucrisa	60 grams	Yes
Eysuvis	1 bottle (8.3 mL)	No
Fiasp	7 vials	Yes
Fiasp Flex	25 cartridges	Yes
Flonase	1 bottle (16 mL or grams)	No
Flowtuss	120 mL, maximum 360 mL/month	No
Fluocinolone	15 grams	Yes
Fragmin - 10000 units/mL, 12500 units/0.5 mL, 15000 units/0.6 mL, 18000 units/0.72 mL, 2500 units/0.2 mL, 5000 units/0.2 mL, 7500 units/0.3 mL	10 syringes	Yes
Frova - 2.5 mg	4 tablets	No
Furoscix	4 cartridges	No
Gentamicin sulfate - ointment, cream	30 grams	Yes
Gentamicin sulfate - solution	15 grams	No
Glucagon/Glucagen	2 devices/boxes	No
Golytely	1 kit / 1 (4000 mL) bottle	No
Granisol - 2 mg/10 mL	2 bottles (60 mL)	Yes
Gvoke	2 syringes	No
Gvoke Hypopen	2 autoinjectors	No
Halog, 0.1% cream & ointment	30 grams	Yes
Halog, 0.1% solution	60 mL	Yes
Humalog	7 vials or 25 pens/cartridges	Yes
Humalog Mix 50/50	7 vials or 25 pens/cartridges	Yes
Humalog Mix 75/25	7 vials or 25 pens/cartridges	Yes
Humalog Tempo Pen	25 pens	Yes
Humulin	7 vials or 25 pens/cartridges	Yes
Humulin 70/30	7 vials or 25 pens/cartridges	Yes

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Medication Name	Quantity Limit per copay	Overrides
Humulin N	7 vials or 25 pens/cartridges	Yes
Humulin R	7 vials	Yes
Humulin R U-500	7 vials or 25 pens	Yes
Hycofenix	120 mL, maximum 360 mL/month	No
Hydrocodone / Homatropine	120 mL, maximum 360 mL/month	No
Imitrex - 4 mg injection cartridges	2 kits	No
Imitrex - 6 mg injection cartridges	2 kits	No
Imitrex - 6 mg vials	4 vials	No
Imitrex Nasal Spray - 5 mg	6 spray bottles	No
Imitrex Nasal Spray - 20 mg	6 spray bottles	No
Imitrex Tablets - 25, 50 & 100 mg	10 tablets	No
Impeklo	68 grams	Yes
Impoyz	60 grams	Yes
Innohep	5 vials	Yes
Kenalog	63 grams	Yes
Ketoconazole 2% cream	30 grams	Yes
Klisyri	5 units	Yes
Kloxxado	2 devices	No
Krintafel	2 tablets	No
Lantus	7 vials or 25 pens/cartridges	Yes
Lexette	50 grams	Yes
Levemir	7 vials or 25 pens/cartridges	Yes
Libervant	2 doses	Yes
Lindane shampoo	60 mL	No
Livilix Pak	1 kit	No
Locoid lipocream	45 grams	Yes
Locoid lotion	59 mL	Yes
Lotemax solution	1 bottle (5 mL)	No
Lotemax SM	5 grams	No
Lotrisone	15 grams	Yes
Lovenox - 30, 40, 60, 80, 100, 120 & 150 mg	30 syringes	Yes
Lovenox - 300 mg	14 MDV	Yes
Luxiq - 50, 100 gram	50 grams	Yes
Lyumjev KwikPen - 100 units/mL, 200 units/mL	25 pens	Yes
Lyumjev Tempo Pen	25 pens	Yes
Maxalt/Maxalt MLT - 10 mg	10 tablets	No
Mephyton	5 tablets	Yes
Migranal	8 mL	No
Mirvaso	1 tube (30 g)	No
MoviPrep	1 kit	No
Mulpleta	7 tablets	No
Narcan Nasal Spray	2 devices	No

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Medication Name	Quantity Limit per copay	Overrides
Nasonex	1 bottle (17 g)	Yes
Nayzilam	2 doses (1 box)	Yes
Neffy	2 nasal sprays	No
Neo Synalar	60 grams	Yes
Ninlaro - 2.3, 3 & 4 mg	3 capsules	No
Nitrolingual Pump/spray	1 bottle (4.9 g) (60 sprays)	No
Novolin 70/30	7 vials	Yes
Novolin N	7 vials	Yes
Novolin R	7 vials	Yes
Novolin Flexpen	25 pens	Yes
Novolog	7 vials or 25 pens/cartridges	Yes
Novolog Mix	7 vials or 25 pens/cartridges	Yes
Nulytely	1 kit (4000 mL)	No
Nurtec - 75 mg	8 tablets	Yes
Nuzyra	30 tablets	No
Nyamyc	120 grams	No
Nystatin - cream/ointment	90 grams	No
Nystop	120 grams	No
Obredon	120 mL, maximum 360 mL/month	No
Olux & Olux E	50 grams	Yes
Omnaris - 50 mcg nasal spray	1 bottle (12.5 g)	No
Omnipod 5	10 pods	Yes
Onexton	50 grams	Yes
Onzetra Xsail	8 pouches	No
Opioids, long acting	Opioid Cumulative Dose: 180 MED	Yes
Opioids, short acting	Opioid Naïve: 7 day supply, less than 50 MED	Yes
Opzelura	240 grams	Yes
Oravig - 50 mg	14 tablets	No
Oxistat Cream	30 grams	Yes
Picato - 0.015%	1 carton of 3 unit dose tubes	Yes
Picato - 0.05%	1 carton of 2 unit dose tubes	Yes
Plenvu	1 box	No
Prednisolone	2 bottles (474 mL)	Yes
Prevpac	14 units	No
Proair Digihaler	1 inhaler	No
Proair HFA	1 inhaler	No
Proair Respiclick	1 inhaler	No
Protopic	30 grams	Yes
Proventil HFA	1 inhaler	No
Prudoxin	45 grams	Yes
Psorcon	30 grams	Yes

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Medication Name	Quantity Limit per copay	Overrides
Qnasl & Qnasl Childrens	1 inhaler	No
Regranex	30 grams	Yes
Relpax - 20, 40 mg	4 tablets	No
Restasis - 0.05%	2 trays (60 vials)	No
Retin-A - 0.025, 0.05% cream	20 grams	Yes
Retin-A - 0.025, 0.01% gel	15 grams	Yes
Retin-A - 0.1% Cream	20 grams	Yes
Retin-A micro - 0.04, 0.1% gel	20 grams	Yes
Retin-A micro - 0.06, 0.08% gel	50 grams	Yes
Rextovy	1 package (2 devices)	No
Reyvow - 50 mg	4 tablets	No
Reyvow - 100 mg	8 tablets	No
Rezvoglar KwikPen	75 mL	Yes
Rhofade	30 grams	No
Rhopressa	2.5 mL	No
RiVive	2 devices	No
Rocklatan	2.5 mL	No
Ryaltris	1 spray bottle	No
Sancuso	1 patch	Yes
Santyl	90 grams	Yes
Sernivo	120 mL	Yes
Simbrinza	1 bottle (8 mL)	No
Sitavig	1 tablet	No
Sivextro	6 tablets	No
Solaraze	100 grams	Yes
Solosec	1 packet	No
Soolantra	45 grams	No
Sorilux Foam	0.005% (60 g)	Yes
Sprix	5 bottles	Yes
Sprycel - 20 mg	62 tablets	Yes
Sprycel - 50, 70, 100 & 140 mg	31 tablets	No
Sprycel - 80 mg	62 tablets	No
Suflave	2 doses (1 box)	No
Suprep	354 mL	No
Synalar	15 grams	Yes
Synalar topical solution	60 mL	Yes
Taclonex	60 grams	Yes
Taclonex Scalp	60 grams	Yes
Targretin	60 grams	Yes
Tazorac - 0.05, 0.1% cream & gel	30 grams	Yes
Temovate - Cream, Ointment	30 grams	Yes
Temovate Scalp Solution	25 mL	Yes

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Medication Name	Quantity Limit per copay	Overrides
Temovate-E	15 grams	Yes
Thalomid - 50 mg	28 capsules	No
Thalomid - 100 mg	28 capsules	No
Thalomid - 150 mg	56 capsules	No
Thalomid - 200 mg	56 capsules	No
Tibsovo	60 tablets	No
Tobrex Ointment	3.5 grams	No
Tobrex Solution	5 mL	No
Topicort Cream	60 grams	No
Topicort Ointment - 0.05%	60 grams	Yes
Tosymra	6 bottles	No
Toujeo Solostar / Toujeo Max Solostar	25 pens	Yes
Travatan Z	2.5 mL	No
Tresiba	7 vials	Yes
Tresiba Flex Touch	25 pens	Yes
Tretinoin - 10 mg	279 capsules	Yes
Treximet - 85/500 mg	9 tablets	No
Trezix	40 capsules	No
Trudhesa	4 inhalers	No
Tussionex	120 mL, maximum 360 mL/month	No
Tuxarin ER	10 tablets, maximum 30 tablets/month	No
Tykerb - 250 mg	186 tablets	Yes
Twiist - Refill kit	1 kit	Yes
Twyneo	30 grams	Yes
Ubrelvy - 50, 100 mg	8 tablets	Yes
Ultracet	40 tablets	No
Ultravate	15 grams	Yes
Ultravate Lotion - 0.05%	60 grams	Yes
Upneeq	30 vials	No
Valchlor	120 grams	Yes
Valtoco - 5, 10, 15 & 20 mg	5 devices	Yes
Valtrex - 1 gram	31 caplets	Yes
Valtrex - 500 mg	62 caplets	Yes
Vanatol LQ	180 mL	No
Vanos	30 grams	Yes
Varubi	2 tablets	Yes
Vectical	100 grams	Yes
Veltin - 1.2%/0.025% gel	30 grams	Yes
Ventolin HFA	1 inhaler	No
Verdeso	100 grams	Yes
Veregen	30 grams	Yes

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Medication Name	Quantity Limit per copay	Overrides
Vfend - 200 mg	62 capsules	Yes
Vfend - 50 mg	124 tablets	Yes
Vfend - 40 mg suspension	300 mL	Yes
Vistogard	20 packets	No
Vtama	60 grams	No
Vyzulta	2.5 mL	No
Westcort	15 grams	Yes
Winlevi	60 grams	Yes
Wynzora	60 grams	Yes
Xaciato	1 tube (8 grams)	No
Xeloda - 150 mg	84 tablets	Yes
Xeloda - 500 mg	140 tablets	Yes
Xelpros	2.5 mL	No
Xepi	30 grams	Yes
Xhance	1 bottle	No
Xifaxan - 200 mg	9 tablets	Yes
Xiidra	60 vials	No
Xopenex - 0.31 mg/3mL, 0.63 mg/3 mL, 1.25 mg/3 mL & 1.25 mg/0.5 mL Solution	1 carton (30 vials)	No
Xopenex HFA	1 inhaler	No
Zavzpret	6 units (1 box)	No
Zegalogue	2 autoinjectors/prefilled syringes	No
Zembrace Symtouch	4 auto-injectors	No
Zerviate	60 vials	No
Zetonna Nasal Spray	1 inhaler (6.1 g)	No
Ziana - 1.2-0.25% gel	30 grams	Yes
Zilxi	30 grams	Yes
Zimhi	2 syringes	No
Zioptan	1 carton (30 unit of use droppers)	No
Zomig - 2.5 & 5 mg	4 tablets	No
Zomig Nasal Spray - 2.5, 5 mg	1 box (6 units)	No
Zomig ZMT - 2.5, 5 mg	4 tablets	No
Zonalon	45 grams	Yes
Zoryve	60 grams	No
Zovirax cream	5 grams	No
Zovirax ointment	15 grams	Yes
Zutripro - 5 mg/4 mg/60 mg per 5 mL	120 mL, maximum 360 mL/month	No
Zyclara - 2.5%	1 tube (7.5 g)	Yes
Zyclara - 3.75%	28 packets	Yes
Zyclara - 3.75% Pump	1 tube (7.5 g)	Yes

*__Generic Benzaclin__ (clindamycin/benzoyl peroxide) - only implemented on the Advantage PDL.