

Covered Opioids List for Group Care Members – 2024

Questions regarding this list should be directed to the Alliance Pharmacy Services Department at **1.510.747.4541**. Opioids that are not listed are non-formulary and will require a prior authorization (PA) request. Since January 1, 2022, this list does not apply to Medi-Cal members. To check which drugs are covered for Medi-Cal members, please visit <https://medi-calrx.dhcs.ca.gov/home/cdl/>.

Brand Name	Generic Name	PA	New Start Day Supply Limit	Quantity Limit Amount	Quantity Limit Days	Age Restriction
Dilaudid	hydromorphone 2 mg tablet	No	14-day supply	90	30	
Dilaudid	hydromorphone 3 mg rectal suppository	No	14-day supply	6	30	
Dilaudid	hydromorphone 4 mg tablet	No	14-day supply	90	30	
Dilaudid	hydromorphone 8 mg tablet	No	14-day supply	90	30	
Dolophine	methadone 5 mg tablet	Yes				
Dolophine	methadone 5 mg/5 mL oral solution	Yes				
Dolophine	methadone 10 mg tablet	Yes				
Dolophine	methadone 10 mg/5 mL oral solution	Yes				
Dolophine	methadone 40 mg soluble tablet	Yes				
Duragesic	fentanyl 12 mcg/hr transdermal patch	No				
Duragesic	fentanyl 25 mcg/hr transdermal patch	No				
Duragesic	fentanyl 50 mcg/hr transdermal patch	No				
Duragesic	fentanyl 75 mcg/hr transdermal patch	No				
Duragesic	fentanyl 100 mcg/hr transdermal patch	No				
Lortab Elixir	hydrocodone 7.5 mg-acetaminophen 325 mg/15 mL oral solution	No	14-day supply	1350	30	
MS Contin	morphine ER 15 mg tablet, extended release	Yes				
MS Contin	morphine ER 30 mg capsule, extended release 24-hr multiphase	Yes				
MS Contin	morphine ER 30 mg tablet, extended release	Yes				
MS Contin	morphine ER 60 mg capsule, extended release 24-hr multiphase	Yes				
MS Contin	morphine ER 60 mg tablet, extended release	Yes				
MS Contin	morphine ER 100 mg tablet, extended release	Yes				
MS Contin	morphine ER 200 mg tablet, extended release	Yes				
None	morphine 10 mg/5 mL oral solution	No	14-day supply	450	30	
None	morphine 15 mg immediate release tablet	No	14-day supply	90	30	
None	morphine 20 mg/5 mL (4 mg/mL) oral solution	No	14-day supply	450	30	

Brand Name	Generic Name	PA	New Start Day Supply Limit	Quantity Limit Amount	Quantity Limit Days	Age Restriction
None	morphine 30 mg immediate release tablet	No	14-day supply	90	30	
None	morphine concentrate 100 mg/5 mL (20 mg/mL) oral solution	No	14-day supply	90	30	
Norco	hydrocodone 5 mg-acetaminophen 325 mg tablet	No	14-day supply	90	30	
Norco	hydrocodone 10 mg-acetaminophen 325 mg tablet	No	14-day supply	90	30	
Norco	hydrocodone 7.5 mg-acetaminophen 325 mg tablet	No	14-day supply	90	30	
OxyContin	oxycodone ER 10 mg tablet, crush resistant, extended release 12-hr	Yes				
OxyContin	oxycodone ER 15 mg tablet, crush resistant, extended release 12-hr	Yes				
OxyContin	oxycodone ER 20 mg tablet, crush resistant, extended release 12-hr	Yes				
OxyContin	oxycodone ER 30 mg tablet, crush resistant, extended release 12-hr	Yes				
OxyContin	oxycodone ER 40 mg tablet, crush resistant, extended release 12-hr	Yes				
OxyContin	oxycodone ER 60 mg tablet, crush resistant, extended release 12-hr	Yes				
OxyContin	oxycodone ER 80 mg tablet, crush resistant, extended release 12-hr	Yes				
Percocet	oxycodone-acetaminophen 5 mg-325 mg tablet	No	14-day supply	90	30	
Percocet	oxycodone-acetaminophen 5 mg-325 mg/5 mL oral solution	No	14-day supply	450	30	
Percocet	oxycodone-acetaminophen 10 mg-325 mg tablet	No	14-day supply	90	30	
Percocet	oxycodone-acetaminophen 7.5 mg-325 mg tablet	No	14-day supply	90	30	
Phenergan VC with codeine	promethazine VC-Codeine 6.25 mg-5 mg-10 mg/5 mL syrup	No		240	30	Minimum Age: 12 years
Phenergan with codeine	promethazine 6.25 mg-codeine 10 mg/5 mL syrup	No		240	30	Minimum Age: 12 years
Robitussin AC	codeine 10 mg-guaifenesin 100 mg/5 mL oral liquid	No		480	30	Minimum Age: 6 years
Stadol NS	butorphanol tartrate 10 mg/mL nasal spray	Yes				
Tussigon, Hydromet	hydrocodone-homatropine 5 mg-1.5 mg/5 mL syrup	No		240	30	Minimum Age: 6 years
Tylenol Codeine	acetaminophen 120 mg-codeine 12 mg/5 mL oral solution	No	14-day supply	1350	30	Minimum Age: 12 years
Tylenol Codeine #2	acetaminophen 300 mg-codeine 15 mg tablet	No	14-day supply	120	30	Minimum Age: 12 years
Tylenol Codeine #3	acetaminophen 300 mg-codeine 30 mg tablet	No	14-day supply	180	30	Minimum Age: 12 years
Tylenol codeine #4	acetaminophen 300 mg-codeine 60 mg tablet	No	14-day supply	120	30	Minimum Age: 12 years
Ultram	tramadol 50 mg tablet	No		120	30	