

Department of Health and Human Services  
**Office of Inspector General**



Office of Evaluation and Inspections

**DATA SNAPSHOT**

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June 2026 | OEI-05-26-00150

**Part D Plans Generally Include  
Drugs Commonly Used by Dual-  
Eligible Enrollees: 2026**



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## Part D Plans Generally Include Drugs Commonly Used by Dual-Eligible Enrollees: 2026

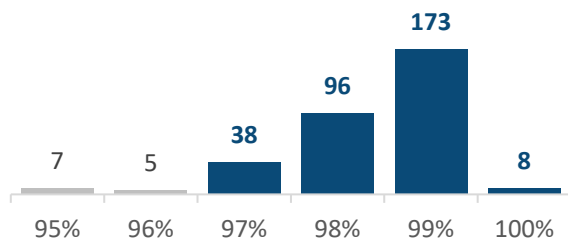
### Why OIG Did This Review

- For dual-eligible enrollees—that is, people enrolled in both Medicare and Medicaid—access to prescription drugs is particularly important. Overall, they have very low incomes and—because they are more likely to be in poorer health than other people enrolled in Medicare—tend to use more Medicare services.<sup>1</sup>
- Because Medicare prescription drug coverage is an important tool for ensuring access to prescription drugs, Congress mandated that OIG study whether Part D formularies cover prescription drugs commonly used by dual-eligibles enrollees.<sup>2</sup>
- For this report, we determined whether the 327 unique formularies used by the 5,038 Part D plans operating in 2026 cover 192 of the 200 drugs most commonly used by dual-eligible enrollees. See the methodology for more information about how we determined the most commonly used drugs.

### What OIG Found

- A majority of 2026 Part D plan formularies covered almost all commonly used drugs, and only a small number of commonly used drugs were not covered by most formularies. This is consistent with OIG’s annual findings since 2011.

Number of formularies including percentage of commonly used drugs



### What OIG Concludes

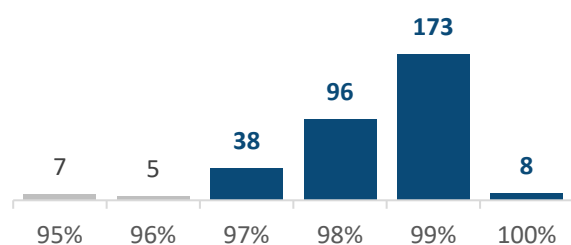
- Dual-eligible enrollees can expect to have access to most drugs in 2026, regardless of the Part D plan in which they are enrolled.

## Results

### A majority of 2026 Part D plan formularies covered almost all of the drugs that dual-eligible enrollees commonly use.

Of the 327 distinct formularies used by Part D plans in 2026, 315 covered at least 97 percent of commonly used drugs.

#### Exhibit 1: Number of formularies including percentage of commonly used drugs



Source: OIG analysis of formulary data, 2026.

### A small number of commonly used drugs were not covered by most formularies.

Two commonly used drugs—one to treat diabetes and one to treat gastroesophageal reflux disease—were covered by fewer than 75 percent of formularies in 2026. However, the formularies did cover alternative drugs in the same respective therapeutic classes, as CMS requires.<sup>7</sup>

### A majority of formularies used by Part D benchmark plans covered almost all commonly used drugs.

Each year, the [Centers for Medicare & Medicaid Services \(CMS\)](#) identifies benchmark plans: Part D plans with premiums at or below a regional benchmark amount.<sup>3</sup> There were 88 benchmark plans in 2026, which used 8 distinct formularies.

A majority (six of eight) of the benchmark plans' formularies covered at least 97 percent of the most commonly used drugs, and the remaining two covered at least 95 percent.<sup>4</sup>

#### It is particularly important that benchmark plans include the most commonly used drugs because:

- Dual-eligible enrollees do not pay premiums for these plans.<sup>5</sup>
- When CMS randomly assigns dual-eligible enrollees to Part D plans, it assigns them to benchmark plans without considering their specific prescription drug needs.<sup>6</sup>

While dual-eligible enrollees have **several options** if their formularies do not cover specific drugs, these options require dual-eligible enrollees to take administrative actions and do not guarantee that they can get the drugs.



Dual-eligible enrollees have one chance per month to **switch to plans** that cover the prescription drugs they require.<sup>8</sup>



Dual-eligible enrollees can use an **exceptions and appeals process** to request coverage of nonformulary drugs by their plans.<sup>9</sup>



Dual-eligible enrollees can work with their prescribers to find an **alternative drug** covered by their plans.



Dual-eligible enrollees can **pay out of pocket** for the noncovered drugs.

## What OIG Concludes

When establishing formularies, Part D plans are permitted to balance Medicare enrollees' needs for adequate prescription drug coverage against the need to contain costs for plans and for the Part D program. Part D plans may omit certain drugs from prescription coverage in order to control costs. However, omitting drugs from coverage can also limit the ability of enrollees to access the prescription drugs they need.

In general, dual-eligible enrollees have access to nearly all of the most commonly used drugs via their Part D plan formularies in 2026. Most of these formularies covered almost all commonly used drugs, and only a small number of commonly used drugs were not covered by most formularies. These findings are largely unchanged from OIG's findings reported from 2011 through 2025. Dual-eligible enrollees have several options if their formularies do not cover specific drugs, but these options may be burdensome and do not guarantee access to the drugs.

## Methodology

We determined whether the unique formularies used by Part D plans operating in 2026 cover the prescription drugs most commonly used by dual-eligible enrollees.

- We used the 2023 Medicare Current Beneficiary Survey (MCBS) Cost and Use data to create a list of drugs with the highest utilization by dual-eligible enrollees.
- We used the February 2026 First DataBank National Drug Data File to identify the drug product information for the drugs with the highest utilization by dual-eligible enrollees.
- To determine the drugs most commonly used by dual-eligible enrollees, we took the following steps:
  - We created a list of all drugs reported by dual-eligible enrollees surveyed in the 2023 MCBS, excluding territories.
  - We collapsed this list to a list of drugs based on their active ingredients.
  - We ranked the drugs by frequency of utilization, weighting the drug-event information from MCBS by sample weight.
  - We selected the 200 drugs with the highest utilization by dual-eligible enrollees.
- Of the top 200 drugs, we analyzed 192 drugs for this review. We removed seven drugs not covered under Part D and one drug for which we were unable to confidently project use to the entire dual-eligible population.<sup>10</sup>
- We collected from CMS the formulary data and the plan data for Part D plans operating in 2026. The formulary data include Part D plans' formularies for plans operating in 2026.
- We then analyzed the unique Part D plan formularies to determine their rates of inclusion of the drugs commonly used by dual-eligible enrollees. We counted a drug as included in a Part D plan's formulary if the formulary included the active ingredient.

## Standards

We conducted this study in accordance with the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

## Appendix A: Top 200 Commonly Used Drugs\*

No.	Generic Name	Percentage of Formularies Including Drug	No.	Generic Name	Percentage of Formularies Including Drug
1	Dexlansoprazole^	13%	45	Potassium Chloride	100%
2	Insulin Degludec^	26%	46	Nystatin	100%
3	Methocarbamol	78%	47	Hydrochlorothiazide	100%
4	Hydroxyzine Pamoate	83%	48	Apixaban	100%
5	Insulin Lispro	85%	49	Tamsulosin Hcl	100%
6	Temazepam	93%	50	Fluticasone Propionate	100%
7	Budesonide/Glycopyr/Formoterol	93%	51	Clopidogrel Bisulfate	100%
8	Esomeprazole Magnesium	94%	52	Carvedilol	100%
9	Alprazolam	94%	53	Sertraline Hcl	100%
10	Nebivolol Hcl	94%	54	Montelukast Sodium	100%
11	Linagliptin	94%	55	Simvastatin	100%
12	Dulaglutide	95%	56	Bupropion Hcl	100%
13	Clobetasol Propionate	96%	57	Duloxetine Hcl	100%
14	Sitagliptin Phos/Metformin Hcl	96%	58	Hydrocodone/Acetaminophen	100%
15	Omega-3 Acid Ethyl Esters	98%	59	Escitalopram Oxalate	100%
16	Semaglutide	98%	60	Fluoxetine Hcl	100%
17	Fluticasone/Vilanterol	98%	61	Meloxicam	100%
18	Fenofibrate Nanocrystallized	98%	62	Glipizide	100%
19	Insulin Glargine,hum.Rec.Anlog	99%	63	Buspirone Hcl	100%
20	Olmесartan Medoxomil	99%	64	Spironolactone	100%
21	Fluticasone Propion/Salmeterol	99%	65	Diclofenac Sodium	100%
22	Meclizine Hcl	99%	66	Empagliflozin	100%
23	Cyclobenzaprine Hcl	99%	67	Quetiapine Fumarate	100%
24	Mirabegron	99%	68	Citalopram Hydrobromide	100%
25	Nifedipine	100%	69	Alendronate Sodium	100%
26	Lovastatin	100%	70	Tizanidine Hcl	100%
27	Benazepril Hcl	100%	71	Pravastatin Sodium	100%
28	Bisoprolol Fumarate	100%	72	Levetiracetam	100%
29	Atorvastatin Calcium	100%	73	Mirtazapine	100%
30	Amlodipine Besylate	100%	74	Prednisone	100%
31	Gabapentin	100%	75	Oxybutynin Chloride	100%
32	Levothyroxine Sodium	100%	76	Baclofen	100%
33	Metformin Hcl	100%	77	Pregabalin	100%
34	Lisinopril	100%	78	Lamotrigine	100%
35	Omeprazole	100%	79	Ezetimibe	100%
36	Losartan Potassium	100%	80	Latanoprost	100%
37	Furosemide	100%	81	Oxycodone Hcl/Acetaminophen	100%
38	Metoprolol Succinate	100%	82	Allopurinol	100%
39	Pantoprazole Sodium	100%	83	Donepezil Hcl	100%
40	Albuterol Sulfate	100%	84	Atenolol	100%
41	Rosuvastatin Calcium	100%	85	Budesonide/Formoterol Fumarate	100%
42	Trazodone Hcl	100%	86	Tramadol Hcl	100%
43	Metoprolol Tartrate	100%	87	Hydralazine Hcl	100%
44	Famotidine	100%	88	Oxycodone Hcl	100%

No.	Generic Name	Percentage of Formularies Including Drug	No.	Generic Name	Percentage of Formularies Including Drug
89	Divalproex Sodium	100%	135	Torsemide	100%
90	Venlafaxine Hcl	100%	136	Prazosin Hcl	100%
91	Lisinopril/Hydrochlorothiazide	100%	137	Dicyclomine Hcl	100%
92	Sitagliptin Phosphate	100%	138	Promethazine Hcl	100%
93	Topiramate	100%	139	Ondansetron	100%
94	Fluticasone/Umeclidin/Vilanter	100%	140	Prednisolone Acetate	100%
95	Dapagliflozin Propanediol	100%	141	Enalapril Maleate	100%
96	Aripiprazole	100%	142	Lactulose	100%
97	Rivaroxaban	100%	143	Cephalexin	100%
98	Hydroxyzine Hcl	100%	144	Brimonidine Tartrate	100%
99	Risperidone	100%	145	Carbamazepine	100%
100	Clonazepam	100%	146	Oxcarbazepine	100%
101	Ibuprofen	100%	147	Glimepiride	100%
102	Diltiazem Hcl	100%	148	Lidocaine	100%
103	Memantine Hcl	100%	149	Azelastine Hcl	100%
104	Lorazepam	100%	150	Ondansetron Hcl	100%
105	Isosorbide Mononitrate	100%	151	Benzotropine Mesylate	100%
106	Warfarin Sodium	100%	152	Doxycycline Hyclate	100%
107	Losartan/Hydrochlorothiazide	100%	153	Roflumilast	100%
108	Olanzapine	100%	154	Naproxen	100%
109	Amitriptyline Hcl	100%	155	Sucralfate	100%
110	Zolpidem Tartrate	100%	156	Ciprofloxacin Hcl	100%
111	Sacubitril/Valsartan	100%	157	Acetaminophen With Codeine	100%
112	Estradiol	100%	158	Anastrozole	100%
113	Celecoxib	100%	159	Doxepin Hcl	100%
114	Ketoconazole	100%	160	Doxazosin Mesylate	100%
115	Propranolol Hcl	100%	161	Nitroglycerin	100%
116	Tiotropium Bromide	100%	162	Digoxin	100%
117	Triamcinolone Acetonide	100%	163	Methylprednisolone	100%
118	Chlorthalidone	100%	164	Timolol Maleate	100%
119	Azithromycin	100%	165	Dorzolamide Hcl/Timolol Maleat	100%
120	Levocetirizine Dihydrochloride	100%	166	Pramipexole Di-Hcl	100%
121	Insulin Aspart	100%	167	Hydroxychloroquine Sulfate	100%
122	Finasteride	100%	168	Diazepam	100%
123	Valsartan	100%	169	Icosapent Ethyl	100%
124	Clonidine Hcl	100%	170	Calcitriol	100%
125	Amoxicillin/Potassium Clav	100%	171	Dextroamphetamine/Amphetamine	100%
126	Triamterene/Hydrochlorothiazid	100%	172	Varicella-Zoster Ge/As01b/Pf	100%
127	Ropinirole Hcl	100%	173	Hydrocortisone	100%
128	Sulfamethoxazole/Trimethoprim	100%	174	Ammonium Lactate	100%
129	Pioglitazone Hcl	100%	175	Cyclosporine	100%
130	Bumetanide	100%	176	Amiodarone Hcl	100%
131	Linaclotide	100%	177	Mupirocin	100%
132	Paroxetine Hcl	100%	178	Irbesartan	100%
133	Fluconazole	100%	179	Fenofibrate	100%
134	Amoxicillin	100%	180	Metoclopramide Hcl	100%

No.	Generic Name	Percentage of Formularies Including Drug	No.	Generic Name	Percentage of Formularies Including Drug
181	Ipratropium/Albuterol Sulfate	100%	191	Colchicine	100%
182	Dorzolamide Hcl	100%	192	Cariprazine Hcl	100%
183	Methotrexate Sodium	100%	193	Alcohol Antiseptic Pads**	Excluded
184	Midodrine Hcl	100%	194	Cholecalciferol (Vitamin D3)**	Excluded
185	Primidone	100%	195	Ergocalciferol (Vitamin D2)**	Excluded
186	Nitrofurantoin Monohyd/M-Cryst	100%	196	Insulin Detemir**	Excluded
187	Lurasidone Hcl	100%	197	Folic Acid**	Excluded
188	Valacyclovir Hcl	100%	198	Sevelamer Carbonate**	Excluded
189	Buprenorphine Hcl/Naloxone Hcl	100%	199	Lipase/Protease/Amylase**	Excluded
190	Levofloxacin	100%	200	Lanthanum Carbonate***	Excluded

Source: OIG analysis of drugs commonly used by dual-eligible enrollees, 2026.

\* Of the top 200 drugs, we analyzed 192 drugs for this review.

^ These drugs are covered by fewer than 75% of formularies.

\*\* These drugs are excluded from our analysis because they are not covered by Part D.

\*\*\* This drug is excluded from our analysis because we were unable to confidently project its use to the entire dual-eligible population.

## Endnotes

<sup>1</sup> Kaiser Family Foundation, *Medicare's Role for Dual Eligible Beneficiaries*, April 2012. Accessed at <https://www.kff.org/wp-content/uploads/2013/01/8138-02.pdf> on May 1, 2026.

<sup>2</sup> For the mandate, see the Patient Protection and Affordable Care Act, P.L. No. 111-148 § 3313(a). For each study, OIG has reviewed drug coverage under Medicare Part D for all dual-eligible enrollees, rather than only for full-benefit dual-eligible enrollees as specified by the mandate. (Under Social Security Act § 1935(c)(6), full-benefit dual-eligible enrollees are individuals who are eligible for both Medicare and full Medicaid benefits.) With the data available for these studies, we could not confidently identify and separate full-benefit dual-eligible enrollees—and thus the drugs they used—from the total population of dual-eligible enrollees.

<sup>3</sup> Social Security Act § 1860D-14(b); 42 CFR § 423.780(b)(2)(i).

<sup>4</sup> In our annual reports prior to 2025, we assessed formularies used by all Part D plans—whether they were stand-alone Part D plans (PDPs) or were paired with Medicare Advantage plans (MA-PDs)—with premiums below the regional benchmark. Since 2025, CMS data have indicated which plans had premiums below the regional benchmark for PDPs only. Therefore, since 2025, we have included only PDPs with premiums below the benchmark for this analysis.

<sup>5</sup> Medicare subsidizes dual-eligible enrollees' premiums, deductibles, and other cost-sharing obligations up to a determined premium benchmark that varies by region. Medicare Prescription Drug, Improvement, and Modernization Act of 2003, P.L. No. 108-173 (enacted Dec. 8, 2003); § 101, Social Security Act § 1860D-14.

<sup>6</sup> CMS randomly assigns dual-eligible enrollees to a Part D plan with premiums below the regional benchmark when (1) they become eligible for both Medicare and Medicaid but have not elected a Part D plan; (2) their current Part D plan will have a premium above the regional benchmark for the following year; or (3) the plan to which they were assigned is terminated. CMS, MA and Part D Enrollment and Disenrollment Guidance, §§ 40.1.8-9. As an additional protection, Section 3305 of the Patient Protection and Affordable Care Act requires that dual-eligible enrollees who are reassigned to a different plan receive information outlining the formulary coverage in their new plan for the drugs they are taking. The Patient Protection and Affordable Care Act, P.L. No. 111-148, § 3305.

<sup>7</sup> Plan formularies do not have to include every available drug. Rather, to meet CMS's formulary requirements, they generally must include at least two drugs in each therapeutic category or class. 42 CFR § 423.120(b)(2). CMS, Prescription Drug Benefit Manual (PDBM), ch. 6, § 30.2.1.

<sup>8</sup> 42 CFR § 423.38(c)(4). This special enrollment period allows switches to other PDPs, but not to all plan types (e.g., MA-PDs).

<sup>9</sup> CMS, Parts C & D Enrollee Grievances, Organization/Coverage Determinations, and Appeals Guidance, §§ 40-60.

<sup>10</sup> We were unable to confidently project use of this drug to the dual-eligible population because the 95-percent confidence interval lower bound included zero.

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