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Absolute Total Care Comprehensive Drug List (CDL) Updates – Q3 2026

Absolute Total Care (ATC) is required to align to the SCDHHS Single PDL effective July 1, 2024. Below is the list of changes to ATC's published CDL this quarter. These changes are due to the move to the SCDHHS Single PDL.

Effective for all members on October 1, 2026					
Brand Name (Generic)	Dosage Form	Strength	Before Update	After Update	Notes
INVOKANA (Canagliflozin)	Tablet	100 MG, 300 MG	Preferred	Not preferred	Moved to non-preferred on CDL
INVOKAMET (Canagliflozin-Metformin HCl)	Tablet	50-500 MG, 50-10000 MG, 150-500 MG, 150-1000 MG	Preferred	Not preferred	Moved to non-preferred on CDL
VIRACEPT (Nelfinavir Mesylate)	Tablet	250 MG, 625 MG	Preferred	Not preferred	Moved to non-preferred on CDL
VICTOZA (Liraglutide)	Soln Pen-injector	18 MG/3ML	Preferred	Not preferred	Moved to non-preferred on CDL
DEXILANT (Dexlansoprazole)	Capsule Delayed Release	30 MG, 60 MG	Preferred	Not preferred	Moved to non-preferred on CDL

For the most current program description, you may call Provider Services at 1-866-433-6041 (TTY: 711) or visit the Absolute Total Care website at absolutetotalcare.com

Key: CDL=Comprehensive Drug List AL=Age Limit QL=Quantity Limit MDD= Max Daily Dosage CL= Claim Limit