

Colorado Medicaid PDL Announcement of Preferred Products-Effective January 01, 2026

The following drug classes and preferred agents represent the final updates to the Health First Colorado Preferred Drug List (PDL), **effective January 1, 2026**. These updates were approved following the October 2025 Pharmacy & Therapeutics (P&T) Committee meeting. Products highlighted in **green** indicate changes resulting from this review.

1- Antihherpetic Agents – Oral and Topical

- Acyclovir capsule, tablet, suspension, ointment, and cream (*Teva only*)
- DENAVIR^{BNR} (penciclovir) cream
- Famciclovir tablet
- Valacyclovir tablet

2- Antibiotics – Inhaled

- CAYSTON (aztreonam) inhalation solution
- Tobramycin inhalation solution (generic TOBI)

3- Antihistamine/Decongestant Combinations

- **Cetirizine-pseudoephedrine ER** tablet (OTC)
- Loratadine-D tablet (OTC)

4- Epinephrine Products

- **AUVI-Q (epinephrine)** auto-injector
- EPIPEN (epinephrine) auto-injector
- EPIPEN JR (epinephrine) auto-injector
- Epinephrine (**all manufacturers**) auto-injector
- **NEFFY (epinephrine)** nasal spray

5- Fluoroquinolones – Oral

- CIPRO (ciprofloxacin)^{BNR} oral suspension
- Ciprofloxacin tablet
- Levofloxacin tablet
- Moxifloxacin tablet

6- Hepatitis C Virus Treatments

- EPCLUSA (sofosbuvir/velpatasvir) 200 mg-50 mg, 150 mg-37.5 mg tablet & pellet packs
- HARVONI (ledipasvir/sofosbuvir) 45 mg-200 mg tablet & pellet packs
- Ledipasvir/Sofosbuvir 90 mg-400 mg tablet (Asegua only)
- MAVYRET (glecaprevir/pibrentasvir) tablet & pellet pack
- Sofosbuvir/Velpatasvir 400 mg-100 mg tablet (Asegua only)
- VOSEVI (sofosbuvir/velpatasvir/voxilaprevir) tablet

7- Human Immunodeficiency Virus (HIV) Treatments-Oral

- All oral products are preferred. Please refer to the PDL for more details.

8- Immune Globulins

- **BIVIGAM** 10% IV liquid
- CUVITRU 20% SQ liquid
- **CUTAQUIG** 16.5% SQ liquid
- GAMMAGARD 10% IV/SQ liquid
- **GAMMAKED** 10% IV/SQ liquid
- GAMUNEX-C 10% IV/SQ liquid
- PRIVIGEN 10% IV liquid

9- Intranasal Rhinitis Agents

- Azelastine 137 mcg
- Budesonide (OTC)
- DYMISTA (azelastine/fluticasone)^{BNR}
- Fluticasone Propionate (Rx)
- Ipratropium Bromide
- Olopatadine HCL
- Triamcinolone Acetonide (OTC)

10- Leukotriene Modifiers

- Montelukast sodium tablet & chewable

11- Methotrexate Products

- Methotrexate sodium tablet & vial

12- Newer Generation Antihistamines

- Cetirizine tablet (OTC) & syrup/solution (OTC/Rx)
- Desloratadine tablet (Rx)
- Levocetirizine tablet (Rx/OTC)
- Loratadine tablet & syrup/solution (OTC)

13- Newer Hereditary Angioedema (HAE) Products

- BERINERT (C1 esterase inhibitor) kit, vial
- HAEGARDA (C1 esterase inhibitor) vial
- **Icatibant** syringe (generic FIRAZYR)
- **ORLADEYO** (berotralstat) oral capsule
- **TAKHZYRO** (lanadelumab-flyo) syringe, vial

14- Respiratory Agents- Inhaled Beta2 Agonists (Short- and Long-Acting)

- Albuterol Sulfate solution (for nebulizer)
- SEREVENT DISKUS (salmeterol xinafoate) inhaler
- VENTOLIN HFA^{BNR} (albuterol sulfate)

15- Respiratory Agents- Inhaled Anticholinergics and Combinations

- ANORO ELLIPTA^{BNR} (umeclidinium bromide/vilanterol)
- ATROVENT HFA (ipratropium bromide)
- COMBIVENT RESPIMAT (ipratropium/albuterol sulfate)
- Ipratropium-Albuterol solution
- Ipratropium Bromide solution
- SPIRIVA HANDIHALER^{BNR} & RESPIMAT (tiotropium bromide)

16- Respiratory Agents- Inhaled Corticosteroids and Combinations

- ADVAIR DISKUS^{BNR} & HFA^{BNR} (fluticasone/salmeterol)
- AIRDUO RESPICLICK^{BNR} (fluticasone/salmeterol)
- ARNUITY ELLIPTA^{BNR} (fluticasone furoate)
- ASMANEX HFA (mometasone furoate) inhaler
- ASMANEX Twisthaler (mometasone furoate)
- Budesonide nebules
- DULERA (mometasone/formoterol)
- PULMICORT Flexhaler (budesonide)
- QVAR REDIHALER (beclomethasone)
- SYMBICORT^{BNR} (budesonide/formoterol) inhaler
- TRELEGY ELLIPTA (fluticasone furoate/umeclidinium/vilanterol)

17- Respiratory Agents- Phosphodiesterase Inhibitors

- Roflumilast table

18- Targeted Immunomodulators

- ADBRY (tralokinumab-ldrm) syringe & auto-injector
- Adalimumab-ADBM pen (2 pen kit)
- Adalimumab-AACF (CF) syringe (*One single-dose*)
- Adalimumab-AATY auto-injector
- AMJEVITA (adalimumab-atto) syringe & auto-injector
- CYLTEZO (adalimumab-adbm) pen & syringe
- ENBREL (etanercept) Mini, SureClick pen, syringe & vial
- IMULDOSA (ustekinumab-srlf) syringe
- KEVZARA (sarilumab) pen & syringe
- OTEZLA (apremilast) tablet
- SELARSDI (ustekinumab-aekn) syringe
- STEQEYMA (ustekinumab-stba) syringe
- TALTZ (ixekizumab) syringe & auto-injector
- TYENNE (tocilizumab-aazg) pen & syringe
- XELJANZ IR (tofacitinib) tablet
- XELJANZ XR (tofacitinib citrate) tablet
- YUFLYMA (adalimumab-aaty) syringe & auto-injector
- DUPIXENT (dupilumab) pen & syringe
- FASENRA (benralizumab) pen
- TEZSPIRE (tezepelumab-ekko) pen
- XOLAIR (omalizumab) syringe & auto-injector