

HEALTH CARE AUTHORITY



NM HCA P&T /DUR COMMITTEE

KEENAN RYAN PHARMD, PHC, MPH

INVESTING FOR TOMORROW, DELIVERING TODAY.

BEFORE WE START…

On behalf of all colleagues at the Health Care Authority, we humbly acknowledge we are on the ancestral lands of the original peoples of the Pueblo, Apache, and Diné past, present, and future.

With gratitude we pay our respects to the land, the people and the communities that contribute to what today is known as the **Great State of New Mexico**.

Learn more: About Taos Pueblo at Taospueblo.com



A cloudy morning looking over Taos Pueblo
Photo provided by elpueblolodge.com

MISSION

We ensure New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible, and high-quality health care and safety-net services.

HEALTH CARE AUTHORITY

VISION

Every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.

GOALS

LEVERAGE purchasing power and partnerships to create innovative policies and models of comprehensive health care coverage that improve the health and well-being of New Mexicans and the workforce.

BUILD the best team in state government by supporting employees' continuous growth and wellness.

ACHIEVE health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.

IMPLEMENT innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

APPROVAL OF AGENDA OF P&T/DUR COMMITTEE MEETING (ATTACHMENT A)

APPROVAL OF MINUTES FROM APRIL 13, 2026, P&T/DUR COMMITTEE MEETING (ATTACHMENT B)

MEDICAL CLAIMS
Conduent

Client Counts
FFS-Only

Month			Males	Females	CMS	Summary
2026	1	January	77,631	86,405	1,193	**165,229**
	2	February	78,074	86,968	1,200	**166,242**
	3	March	78,730	87,941	1,205	**167,876**
	4	April	75,437	84,146	1,200	**160,783**
	5	May	71,734	79,969	1,199	**152,902**
	6	June	72,091	80,078	1,209	**153,378**

For the six-month period starting January 1, 2026, to June 30, 2026

Client Counts- MCO Highest to Lowest Volume

Month			Presbyterian		
			Males	Females	Summary
2026	1	January	145,466	173,694	**319,174**
	2	February	144,722	172,972	**317,710**
	3	March	144,127	172,290	**316,434**
	4	April	144,679	173,044	**317,742**
	5	May	145,249	173,924	**319,191**
	6	June	144,383	172,782	**317,189**

For the six-month period starting January 1, 2026, to June 30, 2026

Client Counts- MCO (cont)

Month			Blue Cross and Blue Shield		
			Males	Females	Summary
2026	1	January	109,351	126,397	**235,764**
	2	February	108,777	125,762	**234,552**
	3	March	108,450	125,328	**233,793**
	4	April	109,066	126,027	**235,117**
	5	May	109,696	126,835	**236,557**
	6	June	108,989	126,016	**235,032**

For the six-month period starting January 1, 2026, to June 30, 2026

Client Counts- MCO (cont)

Month			Molina			United		
			Males	Females	Summary	Males	Females	Summary
2026	1	January	18,968	19,635	**38,614**	17,597	17,922	**35,528**
	2	February	18,998	19,703	**38,712**	17,724	18,052	**35,785**
	3	March	19,075	19,769	**38,857**	17,823	18,232	**36,066**
	4	April	19,451	20,150	**39,614**	18,216	18,642	**36,870**
	5	May	19,716	20,480	**40,211**	18,606	19,047	**37,668**
	6	June	19,740	20,505	**40,262**	18,635	19,128	**37,780**

the six-month period starting January 1, 2026, to June 30, 2026

Client Counts (Summary)

Month			Summary
2026	1	January	629,080
	2	February	626,759
	3	March	625,150
	4	April	629,343
	5	May	633,627
	6	June	630,263

Numbers of Members in Any MCO Plan (January 1, 2026, to June 30, 2026)

Unique Client Counts by Claim Type

CONDUENT

Unique Client Counts by Claim Type

For Paid Last-in-Chain FFS Claims from Jan 1, 2025 through Dec 31, 2025

Claim Type Description	Claim_Type_Cd	Total Clients	% of total (Client_System_ID)
Dental	D	14,362	5.72%
HCBS Case Mgmt Assmt (CMA)	X	962	0.38%
HCBS Waiver	W	8,980	3.57%
Home Health	V	23	0.01%
Hospice	H	21	0.01%
Inpatient	I	4,960	1.97%
Laboratory and Xray	L	4,872	1.94%
Long Term Care	N	316	0.13%
Mcare Part A Crossover	A	4,807	1.91%
Mcare Part B Crossover	B	34,981	13.92%
Mcare UB Part B Crossover	C	29,172	11.61%
Medical Supply	S	1,867	0.74%
Outpatient	O	38,888	15.48%
Pharmacy (RX)	R	27,182	10.82%
Practitioner/Physician	P	74,025	29.46%
Transportation	T	5,847	2.33%
Overall - Summary		**251,265**	

Last Report	28,754	11.20%
Difference	<1,572>	<0.38%>

Report on Claims by Unique Client Counts separated by Claim Type between January 1, 2025, and December 31, 2025

PRODUR EDITS (from 4.1.2026 through 6.30.2026)

REJECT CODE	REJECT DESCRIPTION	CLAIM COUNT
4197	DRUG/DRUG INTERACTION	11130
4974	LATE REFILL	9984
4205	EARLY REFILLS REQUIRED PRIOR AUTHORIZATION	6575
4194	THERAPEUTIC DUPLICATION	5982
4198	INGREDIENT DUPLICATION	4594
4201	LOW DOSE EXCEPTION	2227
4922	INFERRED DISEASE - DC	1,340
4202	HIGH DOSE	737
4432	MIXED OPIOID AND BENZO OR ANTIPSYCHOTIC WITHIN 90 DAYS	546
4199	AGE EXCEPTION (YOUNGER THAN THE MINIMUM AGE ON THE DRUG RECORD)	374
4204	PREGNANCY EXCEPTION (PREGNANCY PRECAUTION CODES PRESENT ON DRUG RECORD AND PARTICIPANT WITH PREGNANCY FLAGGED INDICATOR ON)	128
4200	GENDER EXCEPTION (PARTICIPANT'S SEX CODE ('M' OR 'F') MUST MATCH THE SEX CODE ON THE DRUG RECORD)	106

PRODUR EDITS (cont)

REJECT CODE	REJECT DESCRIPTION	CLAIM COUNT
4620	MAT DRUG ON FILE WITHIN LAST 90 DAYS. USE DUR/PPS SEGMENT IN ORDER TO OVERRIDE.	158
4366	NO RECENT HISTORY OF OPIOID USE IN LAST 60-DAYS, NEW RX LIMITED TO 7 DAY SUPPLY	735
4750	CLAIM EXCEEDS 90 MME PER DAY SUPPLY LIMITS	133
4485	PRIOR SHORT ACTING OPIOID REQD, CLIENT IS OPIOID NAVE.	86
4879	THE CLIENT HAS FILLED A NAXOLONE PRESCRIPTION WITHIN THE PAST 30 DAYS	3

Retro DUR Agenda

Quarterly Reports

Metabolic Monitoring of Second-Generation Antipsychotics (SGAs) in Youth, Opioid Usage with Benzodiazepines, Antipsychotics, Smooth Muscle Relaxants, Gabapentinoids, Stimulants, and Non-Benzodiazepine Sedative Hypnotics

Top Drugs by Number of Claims

Upcoming Interventions

Opioid Newsletter (FY26 Q1)

Metabolic Monitoring of Antipsychotics (FY26 Q2)

Childhood Immunization Newsletter (FY26 Q3)

Quarterly Reports

SGAs in Youths Under 18 - Summaries by Monitoring Type

SGA Claims' Service Date Range: 04/01/2026 through 06/30/2026

Type of Monitoring Issue	# Prescribers	# Patients
No glucose monitoring	14	15
No lipids monitoring	16	17

Quarterly Reports

Opioids and Benzodiazepines - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	2	4
2026	5	3	6
2026	4	3	7

Quarterly Reports

Opioids and Antipsychotics - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	2	4
2026	5	0	0
2026	4	3	7

Quarterly Reports

Opioids, Antipsychotics, and Benzodiazepines - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	0	0
2026	5	0	0
2026	4	0	0

Quarterly Reports

Opioids and SMRs - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	12	26
2026	5	10	20
2026	4	9	22

Quarterly Reports

Opioids and Gabapentinoids - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	14	25
2026	5	22	44
2026	4	17	35

Quarterly Reports

Opioids and Stimulants - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	0	0
2026	5	0	0
2026	4	0	0

Quarterly Reports

Opioids and Non-BZD Sedative Hypnotics - Summary

FFS Claims' Paid Date Range: 4/01/2026 through 6/30/2026

Year	Month	Client Count	Prescriber Count
2026	6	1	2
2026	5	1	2
2026	4	3	6

Quarterly Reports

Top 25 Drugs by Number of Claims

May-26		
Rank	GCN Name	# of Claims
1	acetaminophen 325 MG TABLET	415
2	albuterol sulfate 90 MCG HFA AER AD	356
3	cetirizine HCl 10 MG TABLET	344
4	ibuprofen 400 MG TABLET	256
5	fluticasone propionate 50 MCG SPRAY SUSP	239
6	blood sugar diagnostic STRIP	223
7	metformin HCl 500 MG TAB ER 24H	215
8	ondansetron 4 MG TAB RAPDIS	206
9	insulin glargine,hum.rec.anlog 100/ML (3)	187
10	amoxicillin/potassium clav 875-125 MG TABLET	175
11	cholecalciferol (vitamin D3) 25 MCG TABLET	163
12	gabapentin 300 MG CAPSULE	158
13	aspirin 81 MG TABLET DR	157
14	ibuprofen 600 MG TABLET	157
15	blood-glucose sensor EACH	155
16	amoxicillin 500 MG CAPSULE	151
17	ibuprofen 100MG/5ML ORAL SUSP	132
18	metformin HCl 1000 MG TAB	124
19	semaglutide 2MG/0.75ML PEN INJCTR	122
20	semaglutide .25 or 0.5 PEN INJCTR	120
21	lisinopril 10 MG TABLET	118
22	semaglutide 1MG/0.75ML PEN INJCTR	117
23	diclofenac sodium 1% gel	116
24	acetaminophen 160 MG/5ML ORAL SUSP	116
25	cephalexin 500MG CAPSULE	113

June-26		
Rank	GCN Name	# of Claims
1	acetaminophen 325 MG TABLET	338
2	albuterol sulfate 90 MCG HFA AER AD	328
3	cetirizine HCl 10 MG TABLET	318
4	blood sugar diagnostic STRIP	243
5	metformin HCl 500 MG TAB ER 24H	228
6	ibuprofen 400 MG TABLET	212
7	fluticasone propionate 50 MCG SPRAY SUSP	196
8	cholecalciferol (vitamin D3) 25 MCG TABLET	191
9	blood-glucose sensor EACH	177
10	insulin glargine,hum.rec.anlog 100/ML (3)	170
11	gabapentin 300 MG CAPSULE	165
12	cephalexin 500MG CAPSULE	142
13	aspirin 81 MG TABLET DR	140
14	diclofenac sodium 1% gel	139
15	amoxicillin/potassium clav 875-125 MG TABLET	139
16	ibuprofen 600 MG TABLET	138
17	omeprazole 20 MG CAPSULE	137
18	ondansetron 4 MG TAB RAPDIS	136
19	semaglutide 1MG/0.75ML PEN INJCTR	128
20	metformin HCl 500 MG TAB	126
21	semaglutide 2MG/0.75ML PEN INJCTR	123
22	lisinopril 10 MG TABLET	120
23	amoxicillin 500 MG CAPSULE	118
24	famotidine 20MG TAB	117
25	polyethylene glycol 3350 17G/DOSE POWDER	117

Quarterly Reports

Top 10 Brand Drugs by Number of Claims

May-26		
Rank	Drug	# of Claims
1	LANTUS SOLOSTAR 100 UNIT/ML	179
2	ACCU-CHEK GUIDE TEST STRIP	173
3	OZEMPIC 0.25-0.5 MG/DOSE PE	122
4	OZEMPIC 2 MG/DOSE (8 MG/3 M	120
5	OZEMPIC 1 MG/DOSE (4 MG/3 M	118
6	ACCU-CHEK SOFTCLIX LANCETS	106
7	JARDIANCE 25 MG TABLET	105
8	JARDIANCE 10 MG TABLET	97
9	FREESTYLE LIBRE 3 PLUS SEN	87
10	ALCOHOL 70% SWABS	63

June-26		
Rank	Drug	# of Claims
1	ACCU-CHEK GUIDE TEST STRIP	171
2	LANTUS SOLOSTAR 100 UNIT/ML	128
3	OZEMPIC 0.25-0.5 MG/DOSE PE	126
4	OZEMPIC 2 MG/DOSE (8 MG/3 M	114
5	OZEMPIC 1 MG/DOSE (4 MG/3 M	113
6	ACCU-CHEK SOFTCLIX LANCETS	109
7	JARDIANCE 25 MG TABLET	109
8	JARDIANCE 10 MG TABLET	98
9	FREESTYLE LIBRE 3 PLUS SEN	85
10	NOVOLOG 199 UNIT/ML FLEXPEN	62

Quarterly Reports

Top 10 Generic Drugs by Number of Claims

May-26		
Rank	Drug	# of Claims
1	acetaminophen 325 MG TABLET	415
2	albuterol sulfate 90 MCG HFA AER AD	354
3	cetirizine HCl 10 MG TABLET	344
4	ibuprofen 400 MG TABLET	256
5	fluticasone propionate 50 MCG SPRAY SUSP	239
6	metformin HCl 500 MG TAB ER 24H	215
7	ondansetron 4MG TAB RAPDIS	206
8	amoxicillin/potassium clav 875-125 MG TAB	175
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4	metformin HCl 500 MG TAB ER 24H	228
5	ibuprofen 400 MG TABLET	212
6	fluticasone propionate 50 MCG SPRAY SUSP	196
7	cholecalciferol (vitamin D3) 25 MCG TABLET	191
8	gabapentin 300 MG CAPSULE	165
9	cephalexin 500 MG CAPSULE	142
10	aspirin 81 MG TABLET DR	140

Quarterly Reports

Top 10 Therapeutic Class by Number of Claims

May-26		
Rank	Thera Class Code Description	# of Claims
1	NSAIDS, CYCLOOXYGENASE INHIBITOR TYPE ANALGESICS	811
2	ANTICONVULSANTS	637
3	ANALGESIC/ANTIPYRETICS,NON-SALICYLATE	620
4	PENICILLIN ANTIBIOTICS	589
5	ANTIHISTAMINES - 2ND GENERATION	474
6	BETA-ADRENERGIC AGENTS, INHALED, SHORT ACTING	418
7	ANTIHYPERGLYCEMIC, BIGUANIDE TYPE	413
8	INSULINS	410
9	ANTIHYPERGLYCEMIC, INCRETIN MIMETIC (GLP1)	403
10	ANTIHYPERTENSIVES, ACE INHIBITORS	399

June-26		
Rank	Thera Class Code Description	# of Claims
1	NSAIDS, CYCLOOXYGENASE INHIBITOR TYPE ANALGESICS	721
2	ANALGESIC/ANTIPYRETICS,NON-SALICYLATE	638
3	PENICILLIN ANTIBIOTICS	539
4	ANTICONVULSANTS	493
5	ANTIHISTAMINES - 2ND GENERATION	488
6	BETA-ADRENERGIC AGENTS, INHALED, SHORT ACTING	466
7	ANTIVIRALS,GENERAL	443
8	INSULINS	437
9	ANTIHYPERGLYCEMIC, BIGUANIDE TYPE	425
10	ANTIEMETIC/ANTIVERTIGO AGENTS	422

Interventions

Opioid Newsletter (FY26 Q1)

Purpose: The purpose of this intervention is to educate providers on opioids including the recommendations from the ***2022 CDC Clinical Practice Guideline for Prescribing Opioids for Pain*** .

Interventions

Metabolic Monitoring of Antipsychotics(FY26 Q2)

Purpose: The purpose of this intervention is to assist providers in caring for youth and adult patients receiving either first-generation antipsychotics (FGAs) or second-generation antipsychotics (SGAs). Because of significant concerns about the side effect profile of SGAs, a metabolic monitoring plan should be in place before therapy is initiated. The management of metabolic side effects of SGAs should include regular monitoring of weight gain, blood glucose or hemoglobin A1c, and lipid profiles. Several studies have shown that both FGAs and SGAs increase the risk of metabolic syndrome in severe mental illness. Antipsychotics can directly and indirectly affect cardiometabolic health ranging from increasing appetite to producing a more sedentary lifestyle potentially related to sedation; however, it has also been shown that cardiometabolic adverse effects of antipsychotics are also independent of lifestyle changes.

This intervention identifies patients who are on a FGA or SGA and have not had a HgA1C/blood glucose level in the past year or a lipid level in the past 2 years.

Interventions

Childhood Immunization Newsletter (FY26 Q3)

Purpose: The purpose of this intervention is to educate providers on childhood immunizations and the importance of patients receiving them.

BREAK

CLOSED SESSION

OPEN SESSION

HCA ADMINISTRATIVE UPDATES and ELECTION OF OFFICERS

Prime - Drug Class Review

Agenda

Proposed New Drug Class
- Incretin Mimetics/Enhancers
- Gi Motility Chronic

New to Market Medications
- Angiotensin Modulators combinations
- Calcium Channel Blockers
- Diuretics
- Hepatitis B and related agents
- HIV
- Hypoglycemics, SGLT2

Established Drug Classes with proposed additions:
- Analgesics, Narcotics short
- Angiotensin Modulators
- Antifungal, Oral
- Antifungal, Topical
- Cephalosporins and related agents
- Hepatitis C
- Skeletal Muscle Relaxants
- Vasodilators, Coronary

Proposed PDL Drug Class:

GI Motility, Chronic

Androgenic Agents

ALOSETRON (ORAL)
IBSRELA (ORAL)
LINZESS (ORAL)
LOTRONEX (ORAL)
LUBIPROSTONE (AG) (ORAL)
LUBIPROSTONE (ORAL)
MOTEGRITY (ORAL)
MOVANTIK (ORAL)
PRUCALOPRIDE TABLET (ORAL)
SYMPROIC (ORAL)
VIBERZI (ORAL)

PDL Recommendation

Preferred	Non-Preferred
ALOSETRON (ORAL) LINZESS (ORAL) LUBIPROSTONE (AG) (ORAL) LUBIPROSTONE (ORAL) PRUCALOPRIDE TABLET (ORAL)	IBSRELA (ORAL) LOTRONEX (ORAL) MOTEGRITY (ORAL) MOVANTIK (ORAL) SYMPROIC (ORAL) VIBERZI (ORAL)

Androgenic Agents – Market Share

Brand Name	Curr. Rx	Curr. MS
ALOSETRON (ORAL)	4	0.5%
LINZESS (ORAL)	281	35.6%
LUBIPROSTONE (AG) (ORAL)	196	24.8%
LUBIPROSTONE (ORAL)	237	30.0%
PRUCALOPRIDE TABLET (ORAL)	28	3.5%
IBSRELA (ORAL)	9	1.1%
LOTRONEX (ORAL)	-	0.0%
MOTEGRITY (ORAL)	9	1.1%
MOVANTIK (ORAL)	18	2.3%
SYMPROIC (ORAL)	2	0.3%
VIBERZI (ORAL)	6	0.8%

Proposed PDL Drug Class:

Hypoglycemics, Incretin Mimetics/Enhancers

Hypoglycemics, Incretin Mimetics/Enhancers

ALOGLIPTIN (AG) (ORAL)
ALOGLIPTIN/METFORMIN (AG) (ORAL)
ALOGLIPTIN/PIOGLITAZONE (AG) (ORAL)
BRYNOVIN SOLUTION (ORAL)
GLYXAMBI (ORAL)
JANUMET (ORAL)
JANUMET XR (ORAL)
JANUVIA (ORAL)
JENTADUETO (ORAL)
JENTADUETO XR (ORAL)
LIRAGLUTIDE (AG) (SUBCUTANE.)
LIRAGLUTIDE (SUBCUTANE.)
MOUNJARO (SUBCUTANE.)
OZEMPIC (SUBCUTANE.)
OZEMPIC TABLET (ORAL)
RYBELSUS (ORAL)
SAXAGLIPTIN (ORAL)
SAXAGLIPTIN/METFORMIN ER (ORAL)
SITAGLIPTIN (JANUVIA) (ORAL)
SITAGLIPTIN (ZITUVIO) (AG) (ORAL)
SITAGLIPTIN/METFORMIN (JANUMET) (ORAL)
SITAGLIPTIN/METFORMIN (ZITUVIMET) (AG) (ORAL)
SITAGLIPTIN-METFORMIN ER (AG) (ZITUVIMET XR) ORAL
SOLIQUA (SUBCUTANE.)
STEGLUJAN (ORAL)
TRADJENTA (ORAL)
TRIJARDY XR (ORAL)
TRULICITY (SUBCUTANE.)
VICTOZA (SUBCUTANE.)
XULTOPHY (SUBCUTANE.)
ZITUVIMET (ORAL)
ZITUVIMET XR (ORAL)
ZITUVIO (ORAL)

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PDL Recommendation

Preferred	Non-Preferred
JENTADUETO (ORAL) JENTADUETO XR (ORAL) MOUNJARO (SUBCUTANE.) OZEMPIC (SUBCUTANE.) SAXAGLIPTIN (ORAL) SITAGLIPTIN (ZITUVIO) (AG) (ORAL) TRADJENTA (ORAL) TRULICITY (SUBCUTANE.) VICTOZA (SUBCUTANE.)	ALOGLIPTIN (AG) (ORAL) ALOGLIPTIN/METFORMIN (AG) (ORAL) ALOGLIPTIN/PIOGLITAZONE (AG) (ORAL) BRYNOVIN SOLUTION (ORAL) GLYXAMBI (ORAL) JANUMET (ORAL) JANUMET XR (ORAL) JANUVIA (ORAL) LIRAGLUTIDE (AG) (SUBCUTANE.) LIRAGLUTIDE (SUBCUTANE.) OZEMPIC TABLET (ORAL) RYBELSUS (ORAL) SAXAGLIPTIN/METFORMIN ER (ORAL) SITAGLIPTIN (JANUVIA) (ORAL) SITAGLIPTIN/METFORMIN (JANUMET) (ORAL) SITAGLIPTIN/METFORMIN (ZITUVIMET) (AG) (ORAL) SITAGLIPTIN-METFORMIN ER (AG) (ZITUVIMET XR) ORAL SOLIQUA (SUBCUTANE.) STEGLUJAN (ORAL) TRIJARDY XR (ORAL) XULTOPHY (SUBCUTANE.) ZITUVIMET (ORAL) ZITUVIMET XR (ORAL) ZITUVIO (ORAL)

*No step therapy applies

Antiemetic/Antivertigo Agents – Market Share

Brand Name	Curr. Rx	Curr. MS
JENTADUETO (ORAL)	1	0.0%
JENTADUETO XR (ORAL)	-	0.0%
MOUNJARO (SUBCUTANE.)	13,998	47.0%
OZEMPIC (SUBCUTANE.)	11,936	40.1%
SAXAGLIPTIN (ORAL)	12	0.0%
SITAGLIPTIN (ZITUVIO) (AG) (ORAL)	132	0.4%
TRADJENTA (ORAL)	20	0.1%
TRULICITY (SUBCUTANE.)	1,570	5.3%
VICTOZA (SUBCUTANE.)	4	0.0%
ALOGLIPTIN (AG) (ORAL)	1,442	4.8%
ALOGLIPTIN/METFORMIN (AG) (ORAL)	42	0.1%
ALOGLIPTIN/PIOGLITAZONE (AG) (ORAL)	17	0.1%
BRYNOVIN SOLUTION (ORAL)	-	0.0%
GLYXAMBI (ORAL)	1	0.0%
JANUMET (ORAL)	1	0.0%
JANUMET XR (ORAL)	1	0.0%
JANUVIA (ORAL)	141	0.5%
LIRAGLUTIDE (AG) (SUBCUTANE.)	172	0.6%
LIRAGLUTIDE (SUBCUTANE.)	168	0.6%
OZEMPIC TABLET (ORAL)	-	0.0%
RYBELSUS (ORAL)	102	0.3%
SAXAGLIPTIN/METFORMIN ER (ORAL)	-	0.0%
SITAGLIPTIN (JANUVIA) (ORAL)	-	0.0%
SITAGLIPTIN/METFORMIN (JANUMET) (ORAL)	-	0.0%
SITAGLIPTIN/METFORMIN (ZITUVIMET) (AG) (ORAL)	-	0.0%
SITAGLIPTIN-METFORMIN ER (AG) (ZITUVIMET XR) ORAL	-	0.0%
SOLIQUA (SUBCUTANE.)	4	0.0%
STEGLUJAN (ORAL)	-	0.0%
TRIJARDY XR (ORAL)	1	0.0%
XULTOPHY (SUBCUTANE.)	6	0.0%
ZITUVIMET (ORAL)	1	0.0%
ZITUVIMET XR (ORAL)	-	0.0%
ZITUVIO (ORAL)	-	0.0%

New to Market Medications and Proposed Additions

New to Market Medication

Angiotensin Modulators Combinations

Angiotensin Modulators Combinations

Preferred	Non-Preferred
AMLODIPINE / BENAZEPRIL (ORAL) AMLODIPINE / OLMESARTAN (AG) (ORAL) AMLODIPINE / OLMESARTAN (ORAL) AMLODIPINE / OLMESARTAN / HCTZ (ORAL) AMLODIPINE / VALSARTAN (ORAL) TELMISARTAN / AMLODIPINE (ORAL)	AZOR (ORAL) EXFORGE (ORAL) EXFORGE HCT (ORAL) TELMISARTAN / AMLODIPINE (ORAL) TRANDOLAPRIL / VERAPAMIL (ORAL) TRIBENZOR (ORAL) WIDAPLIK TABLET (ORAL)

Class Additions

New to Market: Widaplik – telmisartan, amlodipine and indapamide



Widaplik

❖ Mechanism of Action and Indication:

- Widaplik™ (telmisartan/amlodipine/indapamide) is indicated for the treatment of hypertension in adults;
- Angiotensin II Receptor Blocker (ARB) Dihydropyridine Calcium Channel Blocker (CCB) Thiazide-like Diuretic,in adults

❖ Dosing and Dosage Form:

- 10 mg / 1.25 mg / 0.625 mg tablet once daily
- 20 mg / 2.5 mg / 1.25 mg tablet once daily
- 40 mg / 5 mg / 2.5 mg tablet once daily (maximum dose)

❖ Clinical Pearls:

- Widaplik was approved as the first FDA-approved triple-combination pill for initial treatment of hypertension, combining an ARB, CCB, and thiazide-like diuretic in one tablet
- Titrate after 2 weeks as needed to a maximum of 40/5/2.5 mg once daily.

Angiotensin Modulators Combinations

Preferred	Non-Preferred
AMLODIPINE / BENAZEPRIL (ORAL) AMLODIPINE / OLMESARTAN (AG) (ORAL) AMLODIPINE / OLMESARTAN (ORAL) AMLODIPINE / OLMESARTAN / HCTZ (ORAL) AMLODIPINE / VALSARTAN (ORAL) TELMISARTAN / AMLODIPINE (ORAL)	AZOR (ORAL) EXFORGE (ORAL) EXFORGE HCT (ORAL) TELMISARTAN / AMLODIPINE (ORAL) TRANDOLAPRIL / VERAPAMIL (ORAL) TRIBENZOR (ORAL) WIDAPLIK TABLET (ORAL)

New to Market Medication

Calcium Channel Blockers

Calcium Channel Blockers

Preferred	Non-Preferred
AMLODIPINE (ORAL) FELODIPINE ER (ORAL) NIFEDIPINE ER (ORAL) NORLIQVA (ORAL) DILTIAZEM TABLET (ORAL) VERAPAMIL TABLET (ORAL) VERAPAMIL TABLET ER (ORAL) VERAPAMIL CAPSULE SR (AG) (ORAL) DILTIAZEM CAPSULE ER (ORAL) VERAPAMIL CAPSULE ER (ORAL)	NORVASC (ORAL) NIFEDIPINE IR (ORAL) ISRADIPINE (ORAL) LEVAMLODIPINE MALEATE (AG) (ORAL) DILTIAZEM LA (ORAL) PROCARDIA XL (ORAL) NIMODIPINE (ORAL) NICARDIPINE (ORAL) KATERZIA (ORAL) NISOLDIPINE (ORAL) NIMODIPINE SOLUTION (ORAL) NYMALIZE SYRINGE (ORAL) NYMALIZE SOLUTION (ORAL) MATZIM LA (ORAL) VERAPAMIL ER PM (ORAL) VERAPAMIL ER PM (AG) (ORAL) VERAPAMIL 360 MG CAPSULE (ORAL)

Class Additions

New formulation: Sdamlo solution – amlodipine suspension

New to Market: Cardamyst – Etripamil nasal



Cardamyst

❖ Mechanism of Action and Indication:

- Etripamil is a non-dihydropyridine calcium channel blocker that inhibits L-type calcium channels in cardiac tissue
- Acute treatment of symptomatic episodes of paroxysmal supraventricular tachycardia (PSVT) in adults

❖ Dosing and Dosage Form:

- 70 mg intranasal
- Optional repeat dose at 10 minutes

❖ Clinical Pearls:

- **Unique Features:**
  - Outpatient, self-administered during acute episode

PDL Recommendations

Preferred	Non-Preferred
AMLODIPINE (ORAL) FELODIPINE ER (ORAL) NIFEDIPINE ER (ORAL) NORLIQVA (ORAL) DILTIAZEM TABLET (ORAL) VERAPAMIL TABLET (ORAL) VERAPAMIL TABLET ER (ORAL) VERAPAMIL CAPSULE SR (AG) (ORAL) DILTIAZEM CAPSULE ER (ORAL) VERAPAMIL CAPSULE ER (ORAL)	CARDAMYST (NASAL) NORVASC (ORAL) NIFEDIPINE IR (ORAL) ISRADIPINE (ORAL) LEVAMLODIPINE MALEATE (AG) (ORAL) DILTIAZEM LA (ORAL) PROCARDIA XL (ORAL) NIMODIPINE (ORAL) NICARDIPINE (ORAL) KATERZIA (ORAL) NISOLDIPINE (ORAL) NIMODIPINE SOLUTION (ORAL) NYMALIZE SYRINGE (ORAL) NYMALIZE SOLUTION (ORAL) MATZIM LA (ORAL) SDAMLO SOLUTION (ORAL) VERAPAMIL ER PM (ORAL) VERAPAMIL ER PM (AG) (ORAL) VERAPAMIL 360 MG CAPSULE (ORAL)

New to Market Medication

Diuretics

Class Additions

New formulation:

- Enbumyst Spray – Bumetanide
- Lasix Onyu Infusion Kit – Furosemide
- Furoscix Kit - Furosemide

New to Market: Baxfendy - baxdrostat



PDL Recommendation

Preferred	Non-Preferred
AMILORIDE (ORAL) AMILORIDE HCTZ (ORAL) BUMETANIDE (ORAL) CHLORTHALIDONE (ORAL) EPLERENONE (ORAL) ETHACRYNIC ACID (ORAL) FUROSEMIDE SOLUTION (ORAL) FUROSEMIDE TABLET (ORAL) HYDROCHLOROTHIAZIDE CAPSULE (ORAL) HYDROCHLOROTHIAZIDE TABLET (ORAL) INDAPAMIDE (ORAL) KERENDIA (ORAL) METOLAZONE (ORAL) SPIRONOLACTONE (ORAL) SPIRONOLACTONE HCTZ (AG) (ORAL) SPIRONOLACTONE HCTZ (ORAL) TORSEMIDE (ORAL) TRIAMTERENE-HCTZ (ORAL)	ALDACTONE (ORAL) CAROSPIR (ORAL) HEMICLOR (ORAL) INZIRQO SUSPENSION (ORAL) LASIX (ORAL) SPIRONOLACTONE SUSPENSION (AG) (ORAL) SPIRONOLACTONE SUSPENSION (ORAL) THALITONE (ORAL) TRIAMTERENE (AG) (ORAL) TRIAMTERENE (ORAL)

Baxfendy

❖ Mechanism of Action and Indication:

- Baxfendy (baxdrostat) is indicated for the treatment of hypertension in combination with other antihypertensive agents to lower blood pressure in adults who are not adequately controlled on other therapies.
- Selective aldosterone synthase inhibitor

❖ Dosing and Dosage Form:

- 2 mg Daily
- Optional repeat dose at 10 minutes

❖ Clinical Pearls:

- Consider for use in adults whose BP is not adequately controlled by other agents.
- Novel mechanism targeting aldosterone production
- Potential option for patients with uncontrolled hypertension despite multidrug therapy

PDL Recommendation

Preferred	Non-Preferred
SPIRONOLACTONE HCTZ (AG) (ORAL)	ALDACTONE (ORAL)
HYDROCHLOROTHIAZIDE TABLET (ORAL)	BAXFENDY TABLET (ORAL)
FUROSEMIDE TABLET (ORAL)	CAROSPIR (ORAL)
HYDROCHLOROTHIAZIDE CAPSULE (ORAL)	ENBUMYST SPRAY (NASAL)
SPIRONOLACTONE (ORAL)	FUROSCIX KIT (SUBCUTANE.)
CHLORTHALIDONE (ORAL)	HEMICLOR (ORAL)
FUROSEMIDE SOLUTION (ORAL)	INSPRA (ORAL)
TORSEMIDE (ORAL)	INZIRQO SUSPENSION (ORAL)
TRIAMTERENE-HCTZ (ORAL)	LASIX (ORAL)
BUMETANIDE (ORAL)	LASIX ONYU INFUSION KIT (SUBCUTANE.)
INDAPAMIDE (ORAL)	SPIRONOLACTONE SUSPENSION (AG) (ORAL)
METOLAZONE (ORAL)	SPIRONOLACTONE SUSPENSION (ORAL)
AMILORIDE (ORAL)	THALITONE (ORAL)
AMILORIDE HCTZ (ORAL)	TRIAMTERENE (AG) (ORAL)
SPIRONOLACTONE HCTZ (ORAL)	TRIAMTERENE (ORAL)
EPLERENONE (ORAL)	
ETHACRYNIC ACID (ORAL)	
KERENDIA (ORAL)	

New to Market Medication

Hepatitis B and related agents

Class Additions

New to Market: Hepcludex



Current PDL

Preferred	Non-Preferred
ENTECAVIR TABLET (ORAL) LAMIVUDINE HBV TABLET (ORAL) VEMLIDY (ORAL)	ADEFOVIR DIPIVOXIL (ORAL) BARACLUDE SOLUTION (ORAL) BARACLUDE TABLET (ORAL)

Hepcludex

❖ Indications and Mechanism of Action:

- Hepcludex is indicated for the treatment of chronic hepatitis delta virus (HDV) infection in adults without cirrhosis or with compensated cirrhosis. This approval was granted under accelerated approval based on reductions in HDV RNA and ALT normalization
- NTCP (sodium taurocholate cotransporting polypeptide) attachment inhibitor
- Bulevirtide binds to and blocks the NTCP receptor on hepatocytes, preventing entry of both HDV and HBV into liver cells.

❖ Dosing and Dosage Form:

- 8.5 mg once daily

❖ Clinical Pearls:

- First-in-class and first FDA-approved treatment for chronic HDV..
- Optimal duration is unknown; continue treatment as long as clinical benefit is demonstrated. Underlying hepatitis B infection should be treated as clinically appropriate.

Recommendation

Preferred	Non-Preferred
ENTECAVIR TABLET (ORAL) HEPCLUDEX VIAL (SUBCUTANEOUS) LAMIVUDINE HBV TABLET (ORAL) VEMLIDY (ORAL)	ADEFOVIR DIPIVOXIL (ORAL) BARACLUDE SOLUTION (ORAL) BARACLUDE TABLET (ORAL)

New to Market Medication

HIV

Class Additions

New to Market: Idvynso – doravirine/islatravir



*pill not actual size

Current PDL

Preferred		Non-Preferred	
APRETUDE (INTRAMUSC)	JULUCA (ORAL)	ABACAVIR SOLUTION (ORAL)	MARAVIROC TABLET (ORAL)
ATAZANAVIR (ORAL)	LAMIVUDINE SOLUTION (ORAL)	ABACAVIR TABLET (ORAL)	NEVIRAPINE ORAL SUSP (ORAL)
BIKTARVY (ORAL)	LAMIVUDINE TABLET (ORAL)	ABACAVIR/LAMIVUDINE (ORAL)	NORVIR POWDER PACK (ORAL)
CABENUVA (INTRAMUSC)	LAMIVUDINE/ZIDOVUDINE (ORAL)	APTIVUS CAPSULE (ORAL)	NORVIR TABLET (ORAL)
CIMDUO (ORAL)	LOPINAVIR/RITONAVIR TABLET (ORAL)	COMBIVIR (ORAL)	PREZISTA (ORAL)
DARUNAVIR (ORAL)	NEVIRAPINE ER (ORAL)	COMPLERA (ORAL)	RETROVIR CAPSULE (ORAL)
DELSTRIGO (ORAL)	NEVIRAPINE TABLET (ORAL)	EDURANT (ORAL)	RETROVIR SYRUP (ORAL)
DESCOVY (ORAL)	ODEFSEY (ORAL)	EDURANT PED TAB SUSP (ORAL)	REYATAZ CAPSULE (ORAL)
DOVATO (ORAL)	PIFELTRO (ORAL)	EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE (SYMFI LO) (ORAL)	REYATAZ POWDER PACK (ORAL)
EFAVIRENZ TABLET (ORAL)	PREZCOBIX (ORAL)	EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE (SYMFI) (ORAL)	RUKOBIA (ORAL)
EFAVIRENZ/EMTRICITABINE/TENOFOVIR DISOPROXIL FUMARATE (ORAL)	PREZISTA ORAL SUSP (ORAL)	EMTRICITABINE CAPSULE (ORAL)	SELZENTRY SOLUTION (ORAL)
EMTRICITABINE/TENOFOVIR DISOPROXIL FUMARATE (ORAL)	RITONAVIR TABLET (ORAL)	EMTRICITABINE/RILPIVIRINE/TENOFOVIR DF (COMPLERA) (ORAL)	SELZENTRY TABLET (ORAL)
EVOTAZ (ORAL)	STRIBILD (ORAL)	EMTRIVA CAPSULE (ORAL)	SUNLENCA (SUBCUT)
GENVOYA (ORAL)	SYMTUZA (ORAL)	EMTRIVA SOLUTION (ORAL)	SUNLENCA TABLET (ORAL)
ISENTRESS (ORAL)	TENOFOVIR DISOPROXIL FUMARATE (ORAL)	EPIVIR SOLUTION (ORAL)	SYMFI (ORAL)
ISENTRESS HD (ORAL)	TIVICAY (ORAL)	EPIVIR TABLET (ORAL)	SYMFI LO (ORAL)
ISENTRESS POWDER PACK (ORAL)	TIVICAY PD SUSPENSION (ORAL)	ETRAVIRINE (ORAL)	TRIUMEQ PD TAB SUSP (ORAL)
ISENTRESS TAB CHEW (ORAL)	TRIUMEQ (ORAL)	FOSAMPRENAVIR TABLET (ORAL)	TROGARZO (INTRAVEN)
	TYBOST (ORAL)	FUZEON (SUB-Q)	TRUVADA (ORAL)
	ZIDOVUDINE CAPSULE (ORAL)	INTELENCE (ORAL)	VIRACEPT (ORAL)
	ZIDOVUDINE SYRUP (ORAL)	KALETRA SOLUTION (ORAL)	VIREAD POWDER (ORAL)
	ZIDOVUDINE TABLET (ORAL)	KALETRA TABLET (ORAL)	VIREAD TABLET (ORAL)
			YEZTUGO TABLET (ORAL)
			YEZTUGO VIAL (SUBCUTANEOUS)
			ZIAGEN SOLUTION (ORAL)

Idvynso

❖ Indications and Mechanism of Action:

- Treatment of HIV-1 infection in virologically suppressed adults as a replacement regimen.
- Combines doravirine (NNRTI) with islatravir (NRTI) to inhibit HIV-1 reverse transcriptase through complementary mechanisms, preventing viral replication.

❖ Dosing and Dosage Form:

- One tablet (100 mg/0.25 mg) orally once daily with or without food

❖ Clinical Pearls:

- First FDA-approved non-INSTI, tenofovir-free, once-daily two-drug regimen shown to maintain virologic suppression in Phase 3 switch studies.

Recommendation

Preferred		Non-Preferred	
APRETUDE (INTRAMUSC)	JULUCA (ORAL)	ABACAVIR SOLUTION (ORAL)	MARAVIROC TABLET (ORAL)
ATAZANAVIR (ORAL)	LAMIVUDINE SOLUTION (ORAL)	ABACAVIR TABLET (ORAL)	NEVIRAPINE ORAL SUSP (ORAL)
BIKTARVY (ORAL)	LAMIVUDINE TABLET (ORAL)	ABACAVIR/LAMIVUDINE (ORAL)	NORVIR POWDER PACK (ORAL)
CABENUVA (INTRAMUSC)	LAMIVUDINE/ZIDOVUDINE (ORAL)	APTIVUS CAPSULE (ORAL)	NORVIR TABLET (ORAL)
CIMDUO (ORAL)	LOPINAVIR/RITONAVIR TABLET (ORAL)	COMBIVIR (ORAL)	PREZISTA (ORAL)
DARUNAVIR (ORAL)	NEVIRAPINE ER (ORAL)	COMPLERA (ORAL)	RETROVIR CAPSULE (ORAL)
DELSTRIGO (ORAL)	NEVIRAPINE TABLET (ORAL)	EDURANT (ORAL)	RETROVIR SYRUP (ORAL)
DESCOVY (ORAL)	ODEFSEY (ORAL)	EDURANT PED TAB SUSP (ORAL)	REYATAZ CAPSULE (ORAL)
DOVATO (ORAL)	PIFELTRO (ORAL)	EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE (SYMFI LO) (ORAL)	REYATAZ POWDER PACK (ORAL)
EFAVIRENZ TABLET (ORAL)	PREZCOBIX (ORAL)	EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE (SYMFI) (ORAL)	RUKOBIA (ORAL)
EFAVIRENZ/EMTRICITABINE/TENOFOVIR DISOPROXIL FUMARATE (ORAL)	PREZISTA ORAL SUSP (ORAL)	EMTRICITABINE CAPSULE (ORAL)	SELZENTRY SOLUTION (ORAL)
EMTRICITABINE/TENOFOVIR DISOPROXIL FUMARATE (ORAL)	RITONAVIR TABLET (ORAL)	EMTRICITABINE/RILPIVIRINE/TENOFOVIR DF (COMPLERA) (ORAL)	SELZENTRY TABLET (ORAL)
EVOTAZ (ORAL)	STRIBILD (ORAL)	EMTRIVA CAPSULE (ORAL)	SUNLENCA (SUBCUT)
GENVOYA (ORAL)	SYMTUZA (ORAL)	EMTRIVA SOLUTION (ORAL)	SUNLENCA TABLET (ORAL)
ISENTRESS (ORAL)	TENOFOVIR DISOPROXIL FUMARATE (ORAL)	EPIVIR SOLUTION (ORAL)	SYMFI (ORAL)
ISENTRESS HD (ORAL)	TIVICAY (ORAL)	EPIVIR TABLET (ORAL)	SYMFI LO (ORAL)
ISENTRESS POWDER PACK (ORAL)	TIVICAY PD SUSPENSION (ORAL)	ETRAVIRINE (ORAL)	TRIUMEQ PD TAB SUSP (ORAL)
ISENTRESS TAB CHEW (ORAL)	TRIUMEQ (ORAL)	FOSAMPRENAVIR TABLET (ORAL)	TROGARZO (INTRAVEN)
	TYBOST (ORAL)	FUZEON (SUB-Q)	TRUVADA (ORAL)
	ZIDOVUDINE CAPSULE (ORAL)	IDVYNSO TABLET (ORAL)	VIRACEPT (ORAL)
	ZIDOVUDINE SYRUP (ORAL)	INTELENCE (ORAL)	VIREAD POWDER (ORAL)
	ZIDOVUDINE TABLET (ORAL)	KALETRA SOLUTION (ORAL)	VIREAD TABLET (ORAL)
		KALETRA TABLET (ORAL)	YEZTUGO TABLET (ORAL)
			YEZTUGO VIAL (SUBCUTANEOUS)
			ZIAGEN SOLUTION (ORAL)

New to Market Medication

Hypoglycemics, SGLT2

Class Additions

New to Market: Inpefa – sotagliflozin



Current PDL

Preferred	Non-Preferred
FARXIGA (ORAL) JARDIANCE (ORAL) SYNJARDY (ORAL) SYNJARDY XR (ORAL) XIGDUO XR (ORAL)	DAPAGLIFLOZIN (AG) (ORAL) DAPAGLIFLOZIN (FARXIGA) (ORAL) DAPAGLIFLOZIN-METFORMIN ER (AG) (XIGDUO XR) (ORAL) DAPAGLIFLOZIN-METFORMIN ER (XIGDUO XR) (ORAL) INVOKAMET (ORAL) INVOKAMET XR (ORAL) INVOKANA (ORAL) SEGLUROMET (ORAL) STEGLATRO (ORAL)

Inpefa

❖ Indications and Mechanism of Action:

- Reduces risk of CV death, HF hospitalization, and urgent HF visits in adults with HF.
- SGLT2 inhibition reduces renal glucose and sodium reabsorption, promoting glucosuria and natriuresis, which may decrease cardiac preload and afterload and SGLT1 inhibition decreases intestinal glucose and sodium absorption, reducing postprandial glucose excursions.

❖ Dosing and Dosage Form:

- Starting dose is 200 mg once daily, with titration to 400 mg once daily after ≥2 weeks if tolerated.

❖ Clinical Pearls:

- INPEFA is a dual SGLT1/SGLT2 inhibitor and can be initiated as soon as a patient is hemodynamically stable following a heart failure hospitalization, with demonstrated reductions in CV death, HF hospitalization, and urgent HF visits.

Recommendation

Preferred	Non-Preferred
FARXIGA (ORAL) JARDIANCE (ORAL) SYNJARDY (ORAL) SYNJARDY XR (ORAL) XIGDUO XR (ORAL)	DAPAGLIFLOZIN (AG) (ORAL) DAPAGLIFLOZIN (FARXIGA) (ORAL) DAPAGLIFLOZIN-METFORMIN ER (AG) (XIGDUO XR) (ORAL) DAPAGLIFLOZIN-METFORMIN ER (XIGDUO XR) (ORAL) INPEFA (ORAL) INVOKAMET (ORAL) INVOKAMET XR (ORAL) INVOKANA (ORAL) SEGLUROMET (ORAL) STEGLATRO (ORAL)

Established Drug Classes with Proposed Additions:

Class Additions

- Analgesics, Narcotics short
  - OXYCODONE / APAP SOLUTION (PROLATE) (ORAL)
  - TAPENTADOL (ORAL)
- Angiotensin Modulators
  - AZILSARTAN MEDOXOMIL (EDARBI) (AG) ORAL
- Antifungal, Oral
  - GRISEOFULVIN ULTRAMICROSIZE 165 MG (ORAL)
- Antifungal, Topical
  - LASOLEX SOLUTION OTC (TOPICAL)
  - LASOLEX AG GEL OTC (TOPICAL)
- Cephalosporins and related agents
  - CEFIXIME TABLET (ORAL)
- Hepatitis C
  - SOVALDI PELLET PACK (ORAL)
- Skeletal Muscle Relaxants
  - METHOCARBAMOL 1,000 MG (ORAL)
  - ATMEKSI SUSPENSION (ORAL)
  - ONTRALFY SOLUTION (ORAL)
- Vasodilators, Coronary
  - NITROGLYCERIN OINT. (TRANSDERM)

Recommendation: Analgesics, Narcotics short

Preferred	Non-Preferred
APAP / CODEINE ELIXIR (ORAL) APAP / CODEINE TABLET (ORAL) BUTALBITAL / CAFFEINE / APAP W/CODEINE (ORAL) BUTALBITAL COMPOUND W/CODEINE (ORAL) BUTORPHANOL TARTRATE (NASAL) CODEINE (ORAL) HYDROCODONE / APAP SOLUTION (ORAL) HYDROCODONE / APAP TABLET (ORAL) HYDROCODONE / IBUPROFEN (ORAL) HYDROMORPHONE LIQUID (ORAL) HYDROMORPHONE TABLET (ORAL) MEPERIDINE SOLUTION (ORAL) MORPHINE CONC SOLUTION (ORAL) MORPHINE IR TABLET (ORAL) MORPHINE SOLUTION (ORAL) OXYCODONE / APAP TABLET (ORAL) OXYCODONE CAPSULE (ORAL) OXYCODONE SOLUTION (ORAL) OXYCODONE TABLET (ORAL) TRAMADOL (ORAL) TRAMADOL / APAP (ORAL)	CARISOPRODOL COMPOUND-CODEINE (ORAL) DIHYDROCODEINE / APAP / CAFFEINE (ORAL) DILAUDID LIQUID (ORAL) DILAUDID TABLETS (ORAL) HYDROCODONE / APAP SOLUTION (ZOLVIT) (ORAL) HYDROMORPHONE SUPPOSITORIES (RECTAL) LEVORPHANOL (ORAL) MEPERIDINE TABLET (ORAL) MORPHINE DISP SYRIN (ORAL) MORPHINE SUPPOSITORIES (RECTAL) NALOCET (ORAL) OXYCODONE / APAP SOLUTION (PROLATE) (ORAL) OXYCODONE / APAP TABLET (PROLATE) (ORAL) OXYCODONE CONC (ORAL) OXYMORPHONE (ORAL) PENTAZOCINE / NALOXONE (ORAL) PERCOCET (ORAL) ROXICODONE TABLET (ORAL) ROXYBOND (ORAL) TAPENTADOL (ORAL) TRAMADOL 100 MG (ORAL) TRAMADOL 25 MG (ORAL) TRAMADOL 75 MG (ORAL) TRAMADOL SOLUTION (AG) (ORAL)

Recommendation: Angiotensin Modulators

Preferred	Non-Preferred
BENAZEPRIL (ORAL)	ALISKIREN (AG) (ORAL)
BENAZEPRIL HCTZ (ORAL)	ALISKIREN (ORAL)
CANDESARTAN (AG) (ORAL)	ARBLI ORAL SUSP (ORAL)
CANDESARTAN (ORAL)	ATACAND (ORAL)
CANDESARTAN HCTZ (AG) (ORAL)	AVALIDE (ORAL)
CANDESARTAN HCTZ (ORAL)	AVAPRO (ORAL)
CAPTOPRIL (ORAL)	AZILSARTAN MEDOXOMIL (EDARBI) (AG) ORAL
CAPTOPRIL HCTZ (ORAL)	BENICAR (ORAL)
ENALAPRIL (ORAL)	BENICAR HCT (ORAL)
ENALAPRIL HCTZ (ORAL)	COZAAR (ORAL)
ENALAPRIL SOLUTION (AG) (ORAL)	DIOVAN (ORAL)
ENALAPRIL SOLUTION (ORAL)	DIOVAN HCT (ORAL)
FOSINOPRIL (ORAL)	EDARBI (ORAL)
IRBESARTAN (ORAL)	EDARBYCLOR (ORAL)
IRBESARTAN HCTZ (ORAL)	ENTRESTO (ORAL)
LISINOPRIL (ORAL)	ENTRESTO SPRINKLE CAP (ORAL)
LISINOPRIL HCTZ (ORAL)	EPANED SOLUTION (ORAL)
LOSARTAN (ORAL)	FOSINOPRIL HCTZ (ORAL)
LOSARTAN HCTZ (ORAL)	HYZAAR (ORAL)
OLMESARTAN (AG) (ORAL)	MICARDIS HCT (ORAL)
OLMESARTAN (ORAL)	MOEXIPRIL (ORAL)
OLMESARTAN HCTZ (AG) (ORAL)	PERINDOPRIL (ORAL)
OLMESARTAN HCTZ (ORAL)	QBRELIS SOLUTION (ORAL)
RAMIPRIL (ORAL)	QUINAPRIL (ORAL)
SACUBITRIL / VALSARTAN TABLET (ORAL)	QUINAPRIL HCTZ (AG) (ORAL)
TELMISARTAN (ORAL)	QUINAPRIL HCTZ (ORAL)
TELMISARTAN HCTZ (ORAL)	TEKTURNA (ORAL)
VALSARTAN (ORAL)	TRANDOLAPRIL (ORAL)
VALSARTAN HCTZ (ORAL)	VALSARTAN SOLUTION (ORAL)
	ZESTORETIC (ORAL)

Recommendation: Antifungal, Oral

Preferred	Non-Preferred
CLOTRIMAZOLE (MUCOUS MEM) FLUCONAZOLE SUSPENSION (ORAL) FLUCONAZOLE TABLET (ORAL) GRISEOFULVIN SUSPENSION (ORAL) GRISEOFULVIN TABLETS (ORAL) GRISEOFULVIN ULTRAMICROSIZE (ORAL) ITRACONAZOLE CAPSULE (ORAL) KETOCONAZOLE (ORAL) NYSTATIN SUSPENSION (ORAL) NYSTATIN TABLET (ORAL) POSACONAZOLE TABLET (AG) (ORAL) POSACONAZOLE TABLET (ORAL) TERBINAFINE (ORAL) VORICONAZOLE TABLETS (ORAL)	CRESEMBA (ORAL) FLUCYTOSINE (ORAL) GRISEOFULVIN ULTRAMICROSIZE 165 MG (ORAL) ITRACONAZOLE SOLUTION (ORAL) NOXAFIL SUSPDR PKT (ORAL) ORAVIG (BUCCAL) POSACONAZOLE SUSPENSION (AG) (ORAL) POSACONAZOLE SUSPENSION (ORAL) SPORANOX CAPSULE (ORAL) TOLSURA (ORAL) VFEND SUSPENSION (ORAL) VIVJOA CAPSULE (ORAL) VORICONAZOLE SUSPENSION (ORAL)

Recommendation: Antifungal, Topical

Preferred	Non-Preferred
CICLOPIROX CREAM (TOPICAL) CICLOPIROX GEL (TOPICAL) CICLOPIROX SHAMPOO (TOPICAL) CICLOPIROX SOLUTION (TOPICAL) CICLOPIROX SUSPENSION (AG) (TOPICAL) CICLOPIROX SUSPENSION (TOPICAL) CLOTRIMAZOLE CREAM OTC (TOPICAL) CLOTRIMAZOLE CREAM RX (TOPICAL) CLOTRIMAZOLE SOLUTION OTC (TOPICAL) CLOTRIMAZOLE SOLUTION RX (TOPICAL) CLOTRIMAZOLE-BETAMETHASONE CREAM (TOPICAL) ECONAZOLE (TOPICAL) KETOCONAZOLE CREAM (TOPICAL) KETOCONAZOLE SHAMPOO (TOPICAL) LOTRIMIN ULTRA OTC (TOPICAL) MICONAZOLE CREAM OTC (TOPICAL) MICONAZOLE POWDER OTC (TOPICAL) NYSTATIN CREAM (TOPICAL) NYSTATIN OINT (TOPICAL) NYSTATIN POWDER (TOPICAL) NYSTATIN-TRIAMCINOLONE CREAM (TOPICAL) NYSTATIN-TRIAMCINOLONE OINT (TOPICAL) TERBINAFINE CREAM OTC (TOPICAL) TOLNAFTATE AERO POWDER OTC (TOPICAL) TOLNAFTATE CREAM OTC (TOPICAL) TOLNAFTATE POWDER OTC (TOPICAL) TOLNAFTATE SPRAY OTC (TOPICAL)	ALEVAZOL OTC (TOPICAL) CICLOPIROX KIT (TOPICAL) CLOTRIMAZOLE-BETAMETHASONE LOTION (TOPICAL) DESENEX AERO POWDER OTC (TOPICAL) ECONAZOLE NITRATE (AG) (ECOZA) (TOPICAL) ERTACZO (TOPICAL) KETOCONAZOLE FOAM (TOPICAL) KETODAN FOAM (TOPICAL) KETODAN FOAM KIT (TOPICAL) LASOLEX AG GEL OTC (TOPICAL) LASOLEX SOLUTION OTC (TOPICAL) LOPROX KIT (TOPICAL) MICONAZOLE NITRATE/ZINC OXIDE/PETROLATUM (AG) (TOPICAL) MICONAZOLE SOLUTION OTC (TOPICAL) MYCOZYL AC CREAM OTC (TOPICAL) NAFTIFINE CREAM (TOPICAL) NAFTIFINE GEL (TOPICAL) NAFTIN GEL (TOPICAL) OXICONAZOLE CREAM (TOPICAL) OXISTAT LOTION (TOPICAL) SALICYLIC ACID OINTMENT (TOPICAL) TAVABOROLE (TOPICAL) TOLNAFTATE SOLUTION OTC (TOPICAL) TRIPENICOL OTC (TOPICAL) VUSION (TOPICAL)

Recommendation: Cephalosporins and related agents

Preferred	Non-Preferred
CEFACLOR CAPSULE (ORAL) CEFADROXIL CAPSULE (ORAL) CEFADROXIL SUSPENSION (ORAL) CEFDINIR CAPSULE (ORAL) CEFDINIR SUSPENSION (ORAL) CEFPODOXIME TABLET (ORAL) CEFPROZIL SUSPENSION (ORAL) CEFPROZIL TABLET (ORAL) CEFUROXIME TABLET (ORAL) CEPHALEXIN CAPSULE (ORAL) CEPHALEXIN SUSPENSION (ORAL)	CEFACLOR SUSPENSION (ORAL) CEFACLOR TABLET ER (ORAL) CEFADROXIL TABLET (ORAL) CEFIXIME CAPSULE (AG) (ORAL) CEFIXIME CAPSULE (ORAL) CEFIXIME SUSPENSION (ORAL) CEFIXIME TABLET (ORAL) CEFPODOXIME SUSPENSION (ORAL) CEPHALEXIN TABLET (ORAL)

Recommendation: Hepatitis C Agents

Preferred	Non-Preferred
MAVYRET (ORAL) (8 WEEKS) MAVYRET PELLET PACK (ORAL) (8 WEEKS) SOFOSBUVIR/VELPATASVIR (AG) (ORAL) VOSEVI (ORAL)	EPCLUSA (ORAL) EPCLUSA PELLET PACK (ORAL) HARVONI PELLET PACK (ORAL) HARVONI TABLET (ORAL) LEDIPASVIR-SOFOSBUVIR (AG) (ORAL) SOVALDI PELLET PACK (ORAL) SOVALDI TABLET (ORAL) ZEPATIER (ORAL)

Recommendation: Skeletal Muscle Relaxants

Preferred	Non-Preferred
BACLOFEN (ORAL) BACLOFEN SOLUTION (ORAL) CHLORZOXAZONE (ORAL) CYCLOBENZAPRINE (ORAL) DANTROLENE SODIUM (AG) (ORAL) DANTROLENE SODIUM (ORAL) METAXALONE (ORAL) METHOCARBAMOL (ORAL) ORPHENADRINE CITRATE (INJECTION) ORPHENADRINE ER (ORAL) TIZANIDINE CAPSULES (ORAL) TIZANIDINE TABLETS (ORAL)	AMRIX (ORAL) ATMEKSI SUSPENSION (ORAL) BACLOFEN (INTRATHECAL) BACLOFEN SOLUTION (OZOBAX DS) (ORAL) BACLOFEN SUSPENSION (FLEQSUVY) (AG) (ORAL) BACLOFEN SUSPENSION (FLEQSUVY) (ORAL) CARISOPRODOL (ORAL) CARISOPRODOL 250 MG (ORAL) CARISOPRODOL COMPOUND (ORAL) CYCLOBENZAPRINE ER (AG) (ORAL) CYCLOBENZAPRINE ER (ORAL) DANTROLENE SODIUM (INJECTION) FLEQSUVY (ORAL) GABLOFEN (INTRATHECAL) LIORESAL (INTRATHECAL) LYVISPAH (ORAL) METAXALONE 640 MG (ORAL) METHOCARBAMOL (INJECTION) METHOCARBAMOL 1,000 MG (ORAL) NORGESIC (ORAL) NORGESIC FORTE (ORAL) ONTRALFY SOLUTION (ORAL) ORPHENADRINE COMPOUND (ORAL) OZOBAX (ORAL) OZOBAX DS SOLUTION (ORAL) RYANODEX (INJECTION) SOMA (ORAL) TANLOR TABLET (ORAL) ZANAFLEX CAPSULE (ORAL) ZANAFLEX TABLET (ORAL)

Recommendation: Vasodilators, Coronary

Preferred	Non-Preferred
ISOSORBIDE DINITRATE (ORAL) ISOSORBIDE MONONITRATE (ORAL) ISOSORBIDE MONONITRATE SR (ORAL) NITRO-BID OINT. (TRANSDERM) NITRO-DUR PATCH (TRANSDERM) NITROGLYCERIN (AG) (SUBLINGUAL) NITROGLYCERIN (AG) (TRANSDERM) NITROGLYCERIN (SUBLINGUAL) NITROGLYCERIN (TRANSDERM) NITROGLYCERIN SPRAY (AG) (TRANSLINGUAL) NITROLINGUAL SPRAY (TRANSLINGUAL) NITROSTAT (SUBLINGUAL)	BIDIL (ORAL) ISOSORBIDE DINIT/HYDRALAZINE TABLET (AG) (ORAL) ISOSORBIDE DINTRATE/HYDRALAZINE (ORAL) NITROGLYCERIN OINT. (TRANSDERM) NITROGLYCERIN SPRAY (TRANSLINGUAL) VERQUVO (ORAL)

Prime THERAPEUTICS™

New Mexico P&T Board Meeting

July 29, 2026



