

Preferred Drug List (PDL) Changes Effective 9/25/2025

Potassium Binders:

Preferred to Non-Preferred

Non-Preferred to Preferred

Lokelma multidose packs

Ophthalmics, Anti-Inflammatories-Steroids

Preferred to Non-Preferred

Non-Preferred to Preferred

Inveltys

Effective October 1, 2025, Bausch Health US, LLC and its subsidiary Salix Pharmaceuticals have terminated their participation in the Medicaid Drug Rebate Program. State Medicaid Programs are prohibited from utilizing federal funds to pay for medications manufactured by companies that don't participate in the Medicaid Drug Rebate Program.

Therefore, several medications, most non-preferred, will no longer be covered by Montana Healthcare Programs. The most notable are Retin-A and **Xifaxan**. Generic Retin-A will replace the brand as a preferred product. Unfortunately, Xifaxan does not have a generic alternative. The manufacturer has said that they will provide Xifaxan to Medicaid members through a patient assistance program. The application for which can be found [here](#). Please, alert members and their providers so that they can start this process and avoid interruptions in care.

Below is a complete list of labelers whose rebate agreements and coverage will be terminated October 1, 2025.

Labeler Code	Labeler Name
99207	BAUSCH HEALTH US, LLC
68682	OCEANSIDE PHARMACEUTICALS
68012	SANTARUS, INC.
66530	SPEAR DERMATOLOGY PRODUCTS, INC.
66490	BAUSCH HEALTH US LLC
65649	SALIX PHARMACEUTICALS, INC.
57782	BAUSCH & LOMB INC.
25010	BAUSCH HEALTH US, LLC
16781	BAUSCH HEALTH US, LLC
13548	BAUSCH HEALTH US, LLC
00884	PEDINOL PHARMACAL INC

00187	BAUSCH HEALTH US, LLC.
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