

2026 PREFERRED DRUG LIST MEETING SCHEDULE

State of Montana Department of Public Health & Human Services

Montana Healthcare Programs Drug Use Review (DUR) Board/Formulary Committee Meeting

The Montana Healthcare Programs DUR Board/Formulary Committee will hold a meeting on :

Date: April 22, 2026 (Wednesday)

Time: 1:00 pm – 5:00 pm Mountain Time

Location: This meeting will be conducted by teleconference only. Register in advance for this meeting. After registering, you will receive a confirmation email containing information about joining the meeting. Those wishing to provide public comment must follow the additional instructions provided on page 2 of this agenda. Please note that ALL public comment, including manufacturer presentations, will be in the same public comment period at the beginning of the meeting

<https://events.teams.microsoft.com/event/0b021616-500d-497c-b978-c347f0473f77@1f053f7a-e47d-43fd-9182-8507c9ff10c7>
[\[events.teams.microsoft.com\]](https://events.teams.microsoft.com)

At this time the Montana Healthcare Programs DUR Board/Formulary Committee will review the following drug classes for Preferred Drug List (PDL) review:

All drugs reviewed pertain to oral drugs unless otherwise indicated

NI- New information, ND- New Drug, NG-New Generic

The Department will review **GROUP 3** as **NEW** information is known to exist:

- ANTIFUNGALS, ORAL NI - Noxafil
- CYTOKINES & CAM ANTAGONIST NI - Omvoh, Otezla/XR, Rinvoq, Simponi, Tremfya, Xeljanz/XR biosimilars adalimumab, tocilizumab, ustekinumab
- HEPATITIS C AGENTS NI - Mavyret
- IDIOPATHIC PULMONARY FIBROSIS ND - Jascayd
- IMMUNOMODULATORS, ASTHMA NI - Nucala, Tezspire
- IMMUNOMODULATORS, ATOPIC DEMATITIS ND - Anzupgo NI - Dupixent, Zoryve

The Department will validate **GROUP 2** Formulary Committee's clinical recommendations unless manufacturers submit **NEW relevant clinical** information prior to the deadline noted below.

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|----------------------------------|-----------------------------------|
| • ACNE AGENTS | • CEPHALOSPORINS & RELATED AGENTS |
| • ANTI-ALLERGENS, ORAL | • COPD AGENTS |
| • ANTIBIOTICS, GI | • EPINEPHRINE, SELF-INJECTED |
| • ANTIBIOTICS, INHALED | • FLUOROQUINOLONES, ORAL |
| • ANTIBIOTICS, TOPICAL | • GLUCOCORTICOIDS, INHALED |
| • ANTIBIOTICS, VAGINAL | • GLUCOCORTICOIDS, ORAL |
| • ANTIFUNGALS, TOPICAL | • IMMUNOMODULATORS, TOPICAL |
| • ANTIHISTAMINES- MIN SEDATING | • IMMUNOSUPPRESSANTS |
| • ANTINEOPLASTIC AGENTS, TOPICAL | • INTRANASAL RHINITIS AGENTS |
| • ANTIPARASITICS, TOPICAL | • LEUKOTRIENE MODIFIERS |
| • ANTIPSORIATICS, TOPICAL | • MACROLIDES & KETOLIDES |
| • ANTIVIRALS, ORAL | • METHOTREXATE AGENTS |
| • ANTIVIRALS, TOPICAL | • ROSACEA AGENTS, TOPICAL |
| • BLADDER RELAXANTS | • SMOKING CESSATION |
| • BPH AGENTS | • STEROIDS, TOPICAL |
| • BRONCHODILATORS, BETA AGONISTS | • TETRACYCLINES |

There are no **GROUP 1** agents

**Montana Healthcare Programs
Department of Public Health and Human Services
DUR Board/Formulary Committee Meeting
General Procedures for Public Comment**

Public Comment will be permitted on items over which the DUR Board has jurisdiction. The public comment period will be limited to 15 minutes. All persons wishing to speak through the video conferencing platform must notify the Department by submitting their name and topic they wish to speak on via <https://forms.office.com/g/EkPyKbJYTv> by **noon** the day prior to the meeting. Individual comment will be limited to a maximum of 3 minutes per person but may be subject to further limitations depending on the number of speakers (15 minutes divided by total speakers).

Due to time constraints, all persons are encouraged to provide written comment, especially those providing clinical information, to allow the board adequate time to review and research. Please email written comments and/or clinical information, with a statement indicating that it is public comment, to PDL@mt.gov at least 7 days prior to the meeting. Please limit clinical information to 2 pages and to new information since last review. New peer-reviewed randomized comparative controlled trials or randomized controlled trials with true health outcomes are most helpful. Please do not provide any pricing information.

Note: These procedures may be revised at the discretion of the Department.