

Colorado Access Formulary Change Notification

Commercial				
Drug Name	Effective Date	CHIP HMO	CHIP ASO	Change Note
GENTAK OPTH OINT	8/15/17	F	F	Add brand to formulary as covered.
vigabatrin powder pack	8/29/17	F	F	Add generic to formulary as covered, PA/LD Only available through Walgreens 888-347-3416
SABRIL POWDER PACK	8/29/17	NC	NC	Move brand to not covered on formulary.
DIASTAT RECTAL GEL	8/29/17	NA	NA	Remove brand from fomulary as it is no longer available.
BENZONATATE CAP	8/29/17	NA	NA	Remove brand from fomulary as it is no longer available.
ALINIA TAB	9/1/17	F	F	Remains coverd on formulary, add PA/QL= 6 tabs/day
ALINIA SUSP	9/1/17	F	F	Remains covered on formulary, add PA/QL= 60 ml/day
XULTOPHY INJ	9/1/17	F	F	Remains covered on formulary, add PA/QL= 15ml/day
LETAIRIS TAB	9/1/17	F	F	Remains covered on formulary, add LD Only available through Walgreens 888-347-3416
TRACLEER TAB	9/1/17	F	F	Remains covered on formulary, add LD Only available through Walgreens 888-347-3416
CYSTAGON CAP	9/1/17	F	F	Remains covered on formulary, add LD Only available through CVS Specialty 800-238-7828
SEROQUEL XR TAB	9/1/17	NC	NC	Move brand to not covered on formulary.
quetiapine XR tab	9/1/17	F	F	Move generic to covered on formulary, QL= 2 tabs/day
AMBIEN TAB	9/1/17	F	F	Remains covered on formulary, add QL= 1 tab/day
zolpidem tab	9/1/17	F	F	Remains covered on formulary, add QL= 1 tab/day
VENTOLIN HFA INHALER	9/1/17	F	F	Remains covered on fomulary, updated QL= 2 inhalers/30 days