DHMP PROVIDER NEWSLETTER

DENVER HEALTH MEDICAL PLAN INC.™

October 3, 2025

Denver Health Medical Plan (DHMP) Formulary Updates for Quarter Four 2025

Formulary updates occur quarterly and are approved by the Denver Health Pharmacy and Therapeutics (P&T) committee. Formulary updates and changes typically aim to promote cost effectiveness, clinical appropriateness, and alignment with regulations.

The updates may include, but are not limited to, additions to the formulary, removal of drugs/products from the formulary, updates to the utilization management criteria, and/or updates to a drug/product's tier placement. Some medications such as new generics may be added retroactively to prevent delays in care. The updated formulary can be found on DHMP's website DenverHealthMedicalPlan.org/for-providers/provider-pharmacy-information and is refreshed quarterly.

Formulary Updates for Quarter 4 2025:

Elevate Medicaid/CHP Choice:

The Elevate Exchange/CO Option Formulary updates can be found at: Elevate Medicaid/CHP Choice Formulary Updates

Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug	New Tier	Restrictions	Effective Date
Several OTC Products	Moved from Tier 1 (Vaccines) to Tier 0 (OTC)	Coding Error	N/A	Tier 0	N/A	8/2/2025
Methenamine Hippurate 1gm tablet Manufacturers: Aurobindo Pharma, Jubilant Cadista, Micro Labs. Novast Labs, and Zydus Lifesciences	Added to formulary	Preferred UTI recurrence strategy	N/A	Tier 1	N/A	10/1/2025
Dificid 200mg tablets Manufactured by Merck	Removal	New Generic available	Fidaxomicin 200mg	N/A	N/A	10/1/2025
Umeclidinium-Vilanterol (Anoro Ellipta) 62.5mcg/25mcg per actuation Manufactured by Prasco Laboratories	Added to the formulary	New Generic Available	N/A	Tier 2 (non-preferred generic)	LA, QL (2 actuations per 1 day)	7/26/2025
Anoro Ellipta (umeclidinium-Vilanterol) 62.5mcg/25mcg per actuation Manufactured by: GlaxoSmithKline (GSK)	Removal	New Generic Available	N/A	N/A	N/A	10/1/2025
Influenza Vaccines 2025-2026	Added to the formulary	New Formulations	N/A	Tier 1 (Vaccine)	N/A	9/1/2025
Influenza Vaccines 2024-2025	Removal	New Formulations	N/A	N/A	N/A	10/1/2025

DHMP Commercial (Self-funded) Plans Formulary Updates:

Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug	New Tier	Restrictions	Effective Date
Progesterone 500mg/10mL vial Manufactured by: Hikma Pharmaceuticals, Fresenius Kabi, Xiromed, Eugia, Auromedica Pharma	Added to the formulary	Frequent exception approved for IVF	N/A	Tier 4	LA	10/1/2025
Fidaxomicin 200mg Manufactured by Merck and Teva	Added to formulary	New generic available	N/A	Tier 4	LA, QL 2 tablets per day	7/26/2025
Dificid 200mg tablets Manufactured by Merck	Removal	New Generic available	Fidaxomicin 200mg	N/A	N/A	10/1/2025
Dexcom G6 and G7 sensors, transmitters, receivers Manufactured by Dexcom	Tier change: Moved from Tier 4 to Tier 2	Member Benefit change from leadership	N/A	Tier 2	N/A	8/2/2025
Methenamine Hippurate 1gm tablet Manufacturers: Aurobindo Pharma, Jubilant Cadista, Micro Labs. Novast Labs, and Zydus Lifesciences	Added to formulary	Preferred UTI recurrence strategy	N/A	Tier 1	N/A	10/1/2025
Umeclidinium-Vilanterol (Anoro Ellipta) 62.5mcg/25mcg per actuation Manufactured by Prasco Laboratories	Added to the formulary	New Generic Available	N/A	Tier 4 (nonpreferred generic)	LA, QL (2 actuations per 1 day)	7/26/2025
Anoro Ellipta (umeclidinium-Vilanterol) 62.5mcg/25mcg per actuation Manufactured by: GlaxoSmithKline (GSK)	Removal	New Generic Available	N/A	N/A	N/A	10/1/2025
Influenza Vaccines 2025-2026	Added to the formulary	New Formulations	N/A	Tier 0 (Preventative)	N/A	9/1/2025
Influenza Vaccines 2024-2025	Removal	New Formulations	N/A	N/A	N/A	10/1/2025
Covid Vaccines 2025-2026	Added to the formulary	New Formulations	N/A	Tier 0	N/A	9/6/2025

The Elevate Exchange/CO Option Formulary updates can be found at: Elevate Exchange/CO Option Formulary Updates

The FDA has requested manufacturers and labelers of teriparatide 600 mcg/2.4 mL to update the strength from 600 mcg/2.4 mL to 560 mcg/2.24 mL on labeling. The updated strength reflects the amount of drug delivered to the patient and not the overfill in the pen. The concentration remains 250 mg/mL. The new strength correlates with the intended delivery of 28 daily doses of 20 mcg. The FDA is not requiring manufacturers to change the NDC numbers on the products. There is no recall or replacement of products labeled as 600 mcg/2.4 mL currently in distribution. The brand manufacturer and its authorized generic distributor anticipate that products with the updated labeling will be in the market by early February 2025.

Prior Authorization Forms and Criteria can be found online

DenverHealthMedicalPlan.org/for-providers/provider-pharmacy-information

Please submit Prior Authorizations electronically or via fax to 303-602-2081

Please respond as soon as possible for outreach requests from the pharmacy department via fax to 303-602-2081 to ensure a timely response and decision due to compliance times. If we do not hear back, we may have to deny this request. If you need more time, please respond asking us to withdraw this request. Withdrawing this request now and submitting once all the information is available is easier than going through the appeal process.

Starting 4/1/2025, if the prescriber thinks a prior authorization decision was made in error for the Elevate Medicaid Choice/CHP or Commercial Self-funded (DHHA employee plans), the prescriber can either submit a second prior authorization request with the missing information or request an exception for approval.