

Provider Network News

Change in Preferred Drug List Status for Glucocorticoids, Inhaled Drug Class Effective May 6, 2025

Background

The manufacturers of brand-name Asmanex HFA, Organon, and QVAR RediHaler, Teva Pharmaceuticals, reported product backorders due to distribution and manufacturing delays.

Key Details

Due to the shortage, HHSC removed the non-preferred status of the drugs in the table on this page from the authorized generic (AG) fluticasone HFA products on the preferred drug list (PDL), effective May 6, 2025.

These changes allow providers to prescribe the AG fluticasone HFA products without requiring a PDL prior authorization and continue access to necessary asthma control medications for members.

| NDC | Drug Name |
|---------------|------------------------------|
| 66993-0078-96 | FLUTICASONE PROP HFA 44 MCG |
| 66993-0079-96 | FLUTICASONE PROP HFA 110 MCG |
| 66993-0080-96 | FLUTICASONE PROP HFA 220 MCG |

Additional Information

This notice serves as education to PCHP in-network pharmacies and providers about access to asthma control medications, specifically the AG fluticasone HFA products. In addition, PCHP will work with in-network asthma disease management service coordinators.