

From the December 12, 2025
Florida Pharmaceutical & Therapeutics Committee Meeting
(Changes Effective April 1, 2026)

	PDL Status Before Meeting	PDL Status After Meeting	Comment
ANGIOTENSIN MODULATOR COMBINATIONS			
AMLODIPINE/OLMESTARTAN/HCTZ (ORAL)	Non-PDL	PDL	
ANGIOTENSIN MODULATORS			
ARB LI ORAL SUSPENSION (ORAL)	NA	Non-PDL	
ANTIHISTAMINES, FIRST GENERATION			
CARBINOXAMINE TABLET (ORAL)	PDL	Non-PDL	
BETA BLOCKERS			
LOPRESSOR SOLUTION (ORAL)	NA	Non-PDL	
BONE RESORPTION SUPPRESSION AND RELATED AGENTS			
BOMYNTRA SYRINGE (SUBCUTANEOUS)	NA	Non-PDL	
BOMYNTRA VIAL (SUBCUTANEOUS)	NA	Non-PDL	
CONEXXENCE (SUBCUTANEOUS)	NA	Non-PDL	
CEPHALOSPORINS, INJECTABLE 5TH GENERATION			
ZEVTERA (INTRAVENOUS)	NA	Non-PDL	
CYTOKINE AND CAM ANTAGONISTS			
IMULDOSA SYRINGE (SUBCUTANEOUS)	NA	Non-PDL	
IMULDOSA VIAL (INTRAVENOUS)	NA	Non-PDL	
LEQSELVI TABLET (ORAL)	NA	Non-PDL	
ENZYME REPLACEMENT, GAUCHERS DISEASE			
ELELYSO (INTRAVENOUS)	PDL	Non-PDL	
H.PYLORI TREATMENT			
LANSOPRAZOLE/AMOXICILLIN/CLARITHROMYCIN (ORAL)	PDL	Non-PDL	
HAE TREATMENTS			
DAWNZERA AUTOINJECTOR (SUBCUTANEOUS)	NA	Non-PDL	
EKTERLY (ORAL)	NA	Non-PDL	
HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS			
BRYNOVIN SOLUTION (ORAL)	NA	Non-PDL	
HYPOGLYCEMICS, INSULIN AND RELATED AGENTS			
KIRSTY PEN (SUBCUTANEOUS)	NA	Non-PDL	
KIRSTY VIAL (SUBCUTANEOUS)	NA	Non-PDL	
MERILOG SOLOSTAR PEN (SUBCUTANEOUS)	NA	Non-PDL	
MERILOG VIAL (SUBCUTANEOUS)	NA	Non-PDL	
IMMUNOMODULATORS, ATOPIC DERMATITIS			
ANZUPGO (TOPICAL)	NA	Non-PDL	

	PDL Status Before Meeting	PDL Status After Meeting	Comment
IRON, ORAL			
FERRIMIN 150 TABLET OTC (ORAL)	PDL	Non-PDL	
TANDEM PLUS CAPSULE (ORAL)	PDL	Non-PDL	
PAH AGENTS, ORAL AND INHALED			
YUTREPIA CAP WITH DEVICE (INHALATION)	NA	Non-PDL	
PHENYLKETONURIA			
SEPHIENCE POWDER PACK (ORAL)	NA	Non-PDL	
NON-CF BRONCHIECTASIS AGENTS			
BRINSUPRI TABLET (ORAL)	NA	PDL	CLINICAL PA

NA = NOT ASSIGNED (FOR NEW PRODUCTS)

NR = NOT REVIEWED