



DATE: February 9, 2026

TO: Commonwealth of Kentucky Medicaid Pharmacy Network

FROM: MedImpact Healthcare Systems

Subject: Novolog PDL Status Change

Status: In response to Novo Nordisk discontinuation of Insulin Aspart Flexpen, Insulin Aspart Penfill and Insulin Aspart vial, the Commonwealth of Kentucky Department of Medicaid Services (DMS) has decided to move **Novolog to preferred status** on the Medicaid Preferred Drug List (PDL). This change will become effective on **February 14, 2026** within the *Rapid and short-acting insulins* PDL drug class.

Preferred Agents	Non-Preferred Agents
Humulin R vial	Admelog and Admelog Solostar ^{CC}
Humulin R U-500 KwikPen and vial	Afrezza
insulin lispro Junior (Jr) KwikPen	Fiasp FlexTouch, pen, pumpcart, and vial ^{CC}
insulin lispro pen and vial	Humalog 200 unit/mL KwikPen
Novolog cartridge, FlexPen, and vial	Humalog cartridge, KwikPen, and vial
	Humalog Junior (Jr) KwikPen
	Humalog Tempo Pen
	Kirsty pen, vial
	Lyumjev pen, Tempo Pen, and vial ^{CC}
	Merilog Solostar and vial
	Novolin R pen and vial
	Symlin ^{AE, CC}

Providers are encouraged to reference the Kentucky Medicaid PDL and Prior Authorization documents found on the MedImpact Provider Portal at: <https://kyportal.medimpact.com/provider-documents/drug-information>. For any additional information or questions that you may have, please contact the Kentucky MedImpact team at KYMFFS@medimpact.com for Fee for-Service members or at KYMCPBM@medimpact.com for Managed Care Organization (MCO) members.



KY MCO Contact Information

Program Questions	KYMCOPBM@MedImpact.com
Pharmacy Help Desk	(800) 210-7628 [24 hours per day/ 7 days per week]
Prior Authorizations	Phone (844) 336-2676 [8:00AM - 7:00PM EST/ 7 days per week]; Fax (858) 357-2612
Pharmacy Portal	https://kyportal.medimpact.com/
BIN: 023880 / PCN: KYPROD1 / GROUP: KYM01	

KY FFS Contact Information

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Pharmacy Portal	https://kyportal.medimpact.com/
BIN: 026309 / PCN: KYPROD1 / GROUP: KYF01	