

# Formulary Updates November 2018



**L.A. Care**  
HEALTH PLAN®

For All of L.A.

**L.A. Care makes changes to the list of drugs covered by L.A. Care (known as the formulary). This helps meet the needs of our members and providers. A list of abbreviations and covered drugs can be found on our website.**

- Member link: <http://www.lacare.org/members/member-services/pharmacy-services>
- Provider link: <http://www.lacare.org/providers/pharmacy-services/list-covered-drugs>

Effective Date	Drug	Medi-Cal (MCLA)	L.A. Care Covered & L.A. Care Covered Direct (LACC & LACCD)	In-Home Support Services (PASC-SEIU)
11/1/2018	albendazole tab (ALBENZA)	No Change (NF)	Tier 1	No Change (NF)
11/1/2018	ALBENZA	No Change (NF)	No Change (Tier 3)	No Change (NF)
11/1/2018	tadalafil tab (CIALIS)	No Change (NF)	Tier 1, QL	F,QL
11/1/2018	CIALIS	No Change (NF)	NF	NF
11/1/2018	mineral oil/petrolatum cream	NF	No Change (NF)	No Change (NF)
11/1/2018	testosterone gel 1.62% (ANDROGEL)	F	Tier 1	F
11/1/2018	ANDROGEL 1.62%	NF	Tier 3	NF
11/1/2018	albuterol neb soln 1.25mg	F	No Change (F)	F
11/1/2018	albuterol neb soln 0.63mg	F	No Change (F)	F
11/1/2018	naproxen sodium tab	NF	NF	NF
11/1/2018	CIMETIDINE SOLN	NF	NF	NF
11/1/2018	cimetidine tab	NF	NF	NF
11/1/2018	LACRISERT OPHTH INSERT	NF	NF	NF
11/1/2018	BETOPTIC-S OPHTH SOLN	NF	NF	NF
11/1/2018	betaxolol ophth soln	NF	NF	NF
11/1/2018	carteolol ophth soln	NF	NF	NF
11/1/2018	CARTEOLOL OPHTH SOLN	NF	NF	NF



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11/1/2018	METIPRANOLOL OPHTH SOLN	NF	NF	NF
11/1/2018	BETIMOL OPHTH SOLN	NF	NF	NF
11/1/2018	orphenadrine citrate ER tab	NF	NF	NF
11/1/2018	NAMENDA XR TITRATION PACK	Add ST	Add ST	Add ST
11/1/2018	rivastigmine patch	Add ST	Add ST	Add ST
11/1/2018	memantine ER cap	Add ST	Add ST	Add ST
11/1/2018	GABAPENTIN CAP 300MG	NF	NF	NF
11/1/2018	TACROLIMUS OIN 0.03%	NF	NF	NF
11/1/2018	SYMITUZA TAB	No Change (CO)	Tier 4	No Change (F)
11/1/2018	STEGLATRO TAB	No Change (F, QL)	Tier 2	F
11/1/2018	ZYKADIA CAP	Update QL	Update QL	Update QL
11/1/2018	EPROSARTAN TAB	No Change (NF)	NF	No Change (NF)
11/1/2018	LONHALA MAGNAIR SOLN	No Change (NF)	No Change (NF)	No Change (NF)
11/1/2018	ORKAMBI GRANULES PACKET	F, KMSP, PA, QL, SF	Tier 4, KMSP, PA, QL, SF	F, KMSP, PA, QL, SF
11/1/2018	LATUDA TAB	No Change (CO)	No Change (NF)	No Change (NF)
11/1/2018	acetaminophen/isometheptene/dichloral cap	No Change (NF)	No Change (NF)	No Change (NF)
11/1/2018	ACETAMINOPHEN/ISOMETHEPTENE/DICHLORAL CAP	No Change (NF)	No Change (NF)	No Change (NF)
11/1/2018	MIDRIN CAP	No Change (NF)	No Change (NF)	NF
11/1/2018	mupirocin cream	NF	NF	NF
11/1/2018	BACTROBAN CREAM	No Change (NF)	NF	No Change (NF)
11/1/2018	CHLORZOXAZONE TAB 250MG	NF	NF	NF
11/1/2018	ALPHAGAN P OPHTH SOLN 0.15%	No Change (NF)	Tier 3	NF



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11/1/2018	brimonidine ophth soln 0.15%	No Change (F)	No Change	No Change (F)
11/1/2018	AMPYRA 10MG ER TAB	No Change (NF)	(Tier 1)	No Change (NF)
11/1/2018	ERYPED SUSP 200MG/5ML	No Change (NF)	NF	No Change (NF)
11/1/2018	ZORTRESS 1MG TAB	F, KMSP, PA	NF	F, KMSP, PA
11/1/2018	clobazam 10mg, 20 mg tab	F, PA	Tier 4, KMSP, PA	F, PA
11/1/2018	ONFI 10mg, 20 MG TAB	NF	Tier 1, PA	NF

<b>NF</b>	Non formulary	<b>F</b>	Formulary/covered drug	<b>PA</b>	Prior Authorization
<b>ST</b>	Step Therapy	<b>QL</b>	Quantity Limit	<b>LD</b>	Limited Distribution
<b>SP</b>	Specialty Pharmacy Program			<b>RS</b>	Restricted to specialist
<b>MSP</b>	Mandatory Specialty Pharmacy Program				
<b>generic:</b> lower case letters		<b>BRAND:</b> CAPITAL LETTERS		<b>Carve-out:</b> Medi-Cal Fee-For-Service	
<b>No change:</b> no change in formulary status as compared to the previous month					



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