

Formulary Updates September 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)
9/1/2018	CIMZIA STARTER INJ KIT	No Change (NF)	Tier 4, LMSP, PA, QL	F, LMSP, PA, QL
9/1/2018	rajani tab	NF	No Change (NF)	No Change (NF)
9/1/2018	BEYAZ TAB	No Change (NF)	NF	NF
9/1/2018	pramipexole ER tab	No Change (NF)	NF	No Change (NF)
9/1/2018	ropinirole ER tab	No Change (NF)	NF	No Change (NF)
9/1/2018	sulfacetamide/sulfur	NF	NF	NF
9/1/2018	PRASCION RA CREAM	NF	NF	NF
9/1/2018	AVAR GEL	NF	NF	NF
9/1/2018	ALCOHOL WIPES	NF	No Change (NF)	No Change (NF)
9/1/2018	mesalamine tab (Asacol HD)	No Change (NF)	No Change (NF)	No Change (NF)
9/1/2018	ASACOL HD	No Change (NF)	No Change (NF)	No Change (NF)
9/1/2018	FLUMIST QUADRIVALENT NASAL SUSP	Tier \$0	Tier \$0	Tier \$0
9/1/2018	TUSSICAPS	No Change (NF)	NF	No Change (NF)
9/1/2018	aripiprazole tab	No Change (CO)	No Change (Tier 1)	No Change (F)
9/1/2018	DOXEPIN CREAM	No Change (NF)	Tier 3, PA	No Change (NF)
9/1/2018	PRUDOXIN CREAM	No Change (NF)	Tier 3, PA	No Change (NF)
9/1/2018	ZONALON CREAM	No Change (NF)	Tier 3, PA	No Change (NF)
9/1/2018	FULPHILA INJ 6/0.6mL	F, KMSP, SP	Tier 4, KMSP, SP	No Change (F, KMSP)



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9/1/2018	UCERIS TAB	No Change (NF)	Tier 3, PA, QL	No Change (NF)
9/1/2018	budesonide ER tab	No Change (NF)	No Change (Tier 1, PA, QL)	No Change (NF)
9/1/2018	OZEMPIC INJ 2/1.5ML	No Change (NF)	Tier 2	F
9/1/2018	HUMIRA INJ 80mg/0.8mL	No Change (F, LMSP, PA QL)	No Change (Tier 4, LMSP, PA, QL)	No Change (F, LMSP, PA QL)
9/1/2018	COSOPT PF (BRAND)	No Change (NF)	NF	NF
9/1/2018	dexamethasone pak 1.5mg	F	Tier 1	F
9/1/2018	BP 10-1 EMU	No Change (NF)	No Change (NF)	No Change (NF)
9/1/2018	VIRAMUNE SUSP 50MG/5ML	No Change (CO)	No Change (Tier 4)	NF
9/1/2018	nevirapine susp 50mg/5ml	No Change (CO)	Tier 4	F
9/1/2018	ADCIRCA TAB 20MG	NF	No Change (Tier 4, LMSP, PA)	NF
9/1/2018	tadalafil tab 20mg	F, LMSP, PA	Tier 4, LMSP, PA	F, LMSP, PA

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



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