Formulary Updates May 2024



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

Effective Date as of 05/01/2024:

Drug	L.A. Care Covered & L.A. Care Covered Direct (LACC & LACCD)	In-Home Support Services (PASC-SEIU)
methylphenidate chew tab	Tier 1	F
methylphenidate ER cap (APTENSIO XR equiv)	Tier 1	F
APTENSIO XR CAP	Tier 3	NF
QUFLORA PEDIATRIC CHEW TAB	NF	NF
pediatric multiple vitamins/fluoride chew tab	NF	NF
tadalafil tab (PAH)	Tier 1, PA	F, PA
TADLIQ SUSP	Tier 3, PA	NF
lamotrigine ODT	NF	NF
LAMICTAL ODT	NF	NF
lamotrigine ODT titration kit	NF	NF
LAMICTAL ODT TITRATION KIT	NF	NF
DICLOFENAC PATCH, FLECTOR PATCH	NF	NF
OPILL TAB	\$0	\$0

NC = Not Covered generic :		= small letters BR/		BRANDS = CAPTAL LETTERS	
EXC	Plan Exclusion	INF	Infertility	KMSP	Kroger Mandatory Specialty Pharmacy Program
LD	Limited Distribution	LMSP	Lumicera Mandatory Specialty Pharmacy Program	M	Medical Benefit
MSP	Mandatory Specialty Pharmacy Program	ONC	Oral Anticancer medication <=\$250 up to 30 day supply/Rx	ОТС	Over-the-counter
PA	Prior Authorization	QL	Quantity Limit	RDX	Restricted to Diagnosis
RS	Restricted to Specialist	SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation