

Formulary Tip Sheet

Pharmacy & Formulary Resources



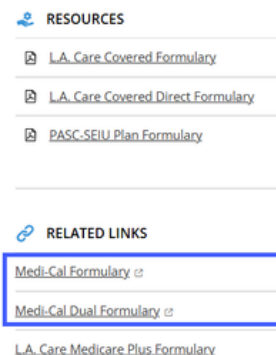
Where Can I Find the Formulary?

1 Directly on the L.A. Care Website

1. On the L.A. Care website (www.lacare.org), go to : “For Members” > “Getting Care” > “Pharmacy Services”
2. Scroll down to “Resources” and “Related Links” on the bottom right hand column. You will find the formulary PDFs for each line of business linked here.

2 Formulary Search Tool

- This is a quick and easy way to determine if a medication is covered.
- Type the medication name into the appropriate search tool according to your patient’s L.A. Care health plan for instant results.
- It is **highly suggested** to bookmark this tool for quick and convenient formulary searches!



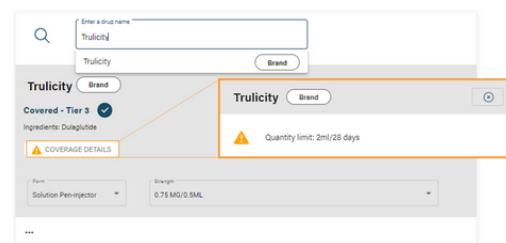
Did You Know?

- Medi-Cal’s formulary is managed by DHCS, NOT by L.A. Care.
- For additional information and resources, this link will re-direct you to the DHCS Medi-Cal Rx Website (<https://medi-calrx.dhcs.ca.gov/home/>)



Formulary Tips

- Our formularies for DSNP (<<1 tier>>), LACC (<<4 tiers>>), and PASC (<<1 tier>>) are updated on a monthly basis.
- Coverage restrictions can be found within the formulary to the right of the drug name.
- For details on coverage restrictions, refer to the definitions table towards the beginning of the formulary.



***Please Note:** The Formulary Search Tool is not available for **Medi-Cal**, but there is a **lookup tool** available on the DHCS website: <https://medi-calrx.dhcs.ca.gov/member/drug-lookup/>

Mail Order Services

- Patients can conveniently receive the majority of their prescriptions delivered directly to their home or workplace.
- This saves the patient time, a trip to the pharmacy, and sometimes money.
- Some members may qualify for 100-day supply, auto-refill, and auto-ship.
- This is highly encouraged for members with chronic conditions to improve adherence and overall health outcomes.
- These services are **FREE** for non-Medi-Cal patients! Medi-Cal patients can search for pharmacies [here](#).

For more information, advise your patient to call L.A. Care Member Services or visit our [website!](#)



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Frequently Asked Questions (FAQ's)

1.) What should I do if a prescribed drug is not on the formulary?

- You may consider prescribing a covered alternative or submit a Prior Authorization (PA) request if you believe this medication is medically necessary.

Prescribing a Covered Alternative:

- Search our formulary for a complete list of the covered drugs available.

There Are 2 Ways to Submit a Prior Authorization:

- The fastest and easiest way to submit a Prior Authorization is through www.covermymeds.com, OR
- Fill out the Prescription Drug Prior Authorization Or Step Therapy Exception Request Form
 - This can be sent to the provider by calling LACC Member Services at 1-855-270-2327 (TTY 711), or DSNP Member Services at 1-833-522-3767 available 24 hours a day, 7 days a week.
 - The form for LACC/PASC members can be found [here](#).
 - The form for D-SNP members can be found [here](#).
 - The forms linked above can be found on the L.A. Care pharmacy services page under "Resources" at <https://www.lacare.org/providers/pharmacy-services/prior-authorizations>

2.) How long will it take to process my Prior Authorization?

- A decision for approval or denial of the exception request or Prior Authorization can be made within 24 hours if the request is urgent or within 72 hours if the request is not urgent.
- CoverMyMeds enables you to track your Prior Authorizations and decision responses online. It will also notify the member once the PA is approved.

3.) What can I do if my Prior Authorization request is denied?

- If a requesting practitioner believes that the determination is not correct, they have the right to appeal the decision on behalf of the member with L.A. Care Health Plan.
- The requesting practitioner should submit a copy of the member's denial notice and a brief explanation of their concern with any other relevant information by mail, fax, or phone:
 - Mail to: L.A. Care Health Plan Grievance and Appeals 1200 West 7th St. Los Angeles, CA 90017
 - Phone: Customer Solution Center (Contact by line of business listed below)
 - Fax: L.A. Care Appeals and Grievances Department at 213-438-5748
 - Online Form: <https://www.lacare.org/members/file-grievance/grievance-appeal-form>
- Filing Deadline: 65 calendar days from the Notice of Action (NOA) date or before service discontinuation .
- A decision will be issued within 30 calendar days (LACC, PASC) or 7 calendar days (DSNP) for a standard case and within 72 hours for an expedited case.

4.) Is there a way for me to submit feedback?

- L.A. Care welcomes the participation of physicians, pharmacists, and ancillary medical providers.
- Physicians and pharmacists are highly encouraged to direct any suggestions or comments to L.A. Care via the **Provider's Solution Center at 1-866-522-2736.**

Questions?

- Contact L.A. Care's Customer Solution Center via phone for:
 - Medicare Plus (HMO D-SNP) [1.833.522.3767](tel:18335223767) (TTY: 711)
 - L.A. Care Covered (LACC): [1.855.270.2327](tel:18552702327) (TTY: 711)
 - PASC-SEIU Plan [1.844.854.7272](tel:18448547272) (TTY: 711)
 - Medi-Cal (MCLA): [1.888.839.9909](tel:18888399909) (TTY: 711)

Save time by submitting
your Prior Authorization at
www.covermymeds.com



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