

# Provider Issue



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Date: October 2022

# Contra Costa Health Plan Pharmacy and Therapeutics Committee (P&T)

The CCHP P&T committee met on 9/2/2022. Updates from the meeting are outlined below:

\*\*Changes to the PDL will be effective by mid-October 2022\*\*

#### **Updates/Announcements:**

1. Medi-Cal Rx Reinstatement of Limited Prior Authorization Requirements for 11 Drug Classes:

On September 16, 2022, prior authorization (PA) requirements were reinstated for 11 drug classes for new start medications for beneficiaries 22 years of age and older. "New start" is defined as either a new therapy or the first time the beneficiary has been prescribed the drug. Medi-Cal Rx will review claim date of service up to 15 months to determine if the beneficiary is new to therapy. New start prescriptions for children and youth 21 years of age and under within these 11 drug classes will not be subject to PA reinstatement. These drug classes are: diuretics, antilipemic agents, hypoglycemics and glucagon, antihypertensives, coronary vasodilators, cardiovascular agents, anticoagulants and antiplatelets, and niacin, vitamin B and vitamin C products. Please go to the DHCS Medi-Cal Rx website at https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-

assets/documents/provider/bulletins/2022.09\_A\_Now\_Active-Reistatement\_of\_Limited\_PA.pdf or contact CCHP Pharmacy Department for more details.

## 2. <u>Medi-Cal Rx Formulary Changes:</u>

Medi-Cal Rx has been updating their Contract Drug List (CDL) on a monthly basis. These updates can be found on the DHCS Medi-Cal Rx website at <a href="https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news">https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news</a> or contact the CCHP Pharmacy Department for additional details.

Quick reference table for all changes to the Preferred Drug List (PDL) and/or Prior Authorization (PA) criteria (for full details of each change, please see individual drugs listed below this table or contact the CCHP Pharmacy Department):

| Changes Made                 | <u>Drug Name</u>   |
|------------------------------|--|
| Created new PA criteria:     | Biologic Agents for Nasal Polyposis                        |
| Modified PA criteria:        | Urinary Antispasmodics                                     |
| Modified 17 (difficulty)     | Allergy Medications  |
|                              | SGLT2 inhibitors   |
|                              | GI agents  |
|                              | Byetta (exenatide)   |
|                              | Pulmonary Biologics for Asthma and Eosinophilic conditions |
|                              |  |
| ADDED to the CCHP formulary: | None   |
|                              |  |
|                              |  |
| Removed from CCHP formulary: | Viread tablets   |
|                              | Viread oral powder   |
|                              | Hepsera (adefovir) tablets                                 |
|                              | Steglujan (ertugliflozin/sitagliptin) tablets              |

- Modification of medical criteria for SGLT2 inhibitors: The formulary medications in this class
  previously had a requirement to try and failure metformin as step therapy. This step therapy
  requirement has now been dropped.
- Modification of medical criteria for Byetta (exenatide): This medication previously had a
  requirement to try and failure Victoza as step therapy. This step therapy requirement has now
  been dropped.
- Modification of medical criteria for Clarinex (desloratadine): will now require trial and failure
  or inability to use of at least 3 alternative products such as loratadine, cetirizine and
  fexofenadine.
- Modification of medical criteria for urinary antispasmotics: added an exception to the requirement to try and fail oxybutynin and tolterodine for members above 65 years of age.
- Modification of medical criteria for GI agents: CCHP's current criteria for Amitiza, Linzess and
  Trulance includes trial of a soluble fiber and trial of a tricyclic antidepressant. The requirement
  of trial and failure of a tricyclic antidepressant has been removed.

### There are numerous ways to view the CCHP Preferred Drug List:

CCHP updates the Preferred Drug List (PDL) after each quarterly Pharmacy & Therapeutics Committee meeting. CCHP invites and encourages practitioners to access each update through the following means:

- An interactive searchable formulary is available within Epic (contact the Epic team with any questions related to functionality).
- A printable copy of the CCHP PDL can be found here: <a href="http://cchealth.org/healthplan/pdf/pdl.pdf">http://cchealth.org/healthplan/pdf/pdl.pdf</a>
- A searchable copy of the CCHP PDL can be found here:
   <a href="http://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC">http://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC</a>
- EPOCRATES free mobile & online formulary resource
  - CCHP providers may add the CCHP formulary to their mobile devices using the following steps:
    - Open the Epocrates application on your mobile device.
    - Click on the "formulary" button on the home screen.
    - Click "add new formulary" button on the bottom of the screen.
    - Use the search box to locate "Contra Costa Health Plan" Medi-Cal or Commercial formulary. Click on each formulary that you would like to add, and then click the "add formulary" button.

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Providers may request a copy of CCHP pharmacy management procedures or specific drug PA criteria by contacting the pharmacy unit directly at 925-957-7260 x1, or via the email listed below:

P&T updates and DUR educational bulletins can be viewed online at <a href="http://cchealth.org/healthplan/provider-pharmacy-therapeutics.php">http://cchealth.org/healthplan/provider-pharmacy-therapeutics.php</a>

Questions and comments may be directed to CCHP Pharmacy by emailing <a href="mailto:joseph.cardinalli@cchealth.org">joseph.cardinalli@cchealth.org</a>