



# Provider Issue Briefing

CONTRA COSTA  
HEALTH PLAN  
595 Center Avenue  
Suite 100  
Martinez, CA 94553  
925.313.6000  
Date: December 2023

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

The CCHP P&T committee met on 12/1/2023. Updates from the meeting are outlined below:

**\*\*Changes to the PDL will be effective by mid-January 2024\*\***

### Updates/Announcements:

#### 1. Expansion of CCHP Commercial Plans Retail Pharmacy Network:

As of mid-February 2024, the CCHP Commercial Plan Retail Pharmacy Network has expanded greatly. CCHP Commercial plan members will now be able to fill their prescriptions almost all major pharmacy chains including CVS, Costco, Wal-Mart, Safeway, Raleys, Walgreens and Rite Aid, as well as many independent pharmacies across the country. Please contact the CCHP Pharmacy Department if there are questions as to whether or not a retail pharmacy is included in the new expanded network.

#### 2. Over-the-Counter Contraceptives Covered at In-Network Retail Pharmacies

Effective 1/1/2024, CCHP Commercial Plan members can access OTC Birth Control Products/Devices at an in-network pharmacy counter with no prescription and no member cost-sharing. In-network pharmacies have been notified of the billing process. If there are any questions or if a pharmacy is having trouble billing these items for CCHP members, please contact the CCHP Pharmacy Department.

#### 3. Real Time Benefit Check Tools:

Please remember that providers and members have access to online pharmacy benefits checks. Providers can check a member's pharmacy benefit coverage via the prescribing provider's EMR/EHR platform. Please contact the CCHP Pharmacy Department for further information or if there are any questions about access.

#### 4. Medi-Cal Rx Formulary Changes:

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 <https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news> or contact the CCHP Pharmacy Department for additional details.

### CCHP Commercial Member Formulary Changes:

**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	Drug Name
Created new PA criteria:	Fecal Microbiota Hemgenix (etranacogene dezaparvovec) Jesduvroq (daprodustat) Lodoco (colchicine)
Modified PA criteria:	Reclast (zoledronic acid) Prolia (denosumab)

	Non-preferred/Non-formulary Medications Forteo (teriparatide) Vesicular Monoamine Transporter 2 Inhibitors
ADDED to the CCHP formulary:	Adapalene/Benzoyl Peroxide Gel Prevna 13 (pneumococcal vaccine)
Removed from CCHP formulary:	Botox (onabotulinumtoxinA) Myobloc

- **New Pharmacy Criteria for Fecal Microbiota:** diagnosis of at least 1 recurrent episode of CDI, positive stool test for C. difficile, current episode of CDI must be controlled
- **New Pharmacy Criteria for Hemgenix (etranacogene dezaparvovec):** provider must be a hematologist, diagnosis of hemophilia B, documentation that patient has <2% of normal circulating Factor IX and patient is negative for Factor IX inhibitors
- **New Pharmacy Criteria for Jesduvroq (daprodustat):** member has a diagnosis of CKD and has been undergoing dialysis for at least 4 months, has a HG between 8 and 11.5, documentation of a trial and failure, intolerance, contraindication or inability to use an ESA, and the member will not be receiving concurrent treatment with an ESA.
- **New Pharmacy Criteria for Lodoco (colchicine):** prescriber must be a cardiologist or in consultation with a cardiologist, member is currently receiving statin therapy or documentation of the medical reason why the member is not on statin therapy and the patient does not have renal failure or severe hepatic impairment
- **Modification of pharmacy criteria for Reclast (zoledronic acid):** an adjustment in the criteria for glucocorticoid induced osteoporosis was implemented changing the dose of prednisone (or equivalent) from 5 mg to  $\geq 2.5$  mg
- **Modification of pharmacy criteria for Prolia (denosumab):** an adjustment in the criteria for glucocorticoid induced osteoporosis was implemented changing the dose of prednisone (or equivalent) from 5 mg to  $\geq 2.5$  mg
- **Modification of pharmacy criteria for non-formulary medications):** changed the number of preferred formulary medications that need to be tried before approval of a non-preferred, non-formulary medication from 3 medications to 2 medications
- **Modification of pharmacy criteria for Forteo (teriparatide):** an adjustment in the criteria for glucocorticoid induced osteoporosis was implemented changing the dose of prednisone (or equivalent) from 5 mg to  $\geq 2.5$  mg
- **Modification of pharmacy criteria for Vesicular Monoamine Transporter 2 Inhibitors:** added criteria for the new indication of chorea associated with Huntington's Disease for Ingrezza and changed the formulary status of Ingrezza and tetrabenazine from non-formulary to formulary with a prior authorization

---

#### **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: <http://cchealth.org/healthplan/pdf/pdl.pdf>
- A searchable copy of the CCHP PDL can be found here: <https://cchealth.org/healthplan/formulary.php>
- **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.

Epocrates mobile is supported on the iOS (iPhone, iTouch, iPad), Android, & BlackBerry platforms

If you have any questions about the installation or use of Epocrates, please contact Epocrates Customer Support at [goldsupport@epocrates.com](mailto:goldsupport@epocrates.com) or at (800)230-2150.

---

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  
<http://cchealth.org/healthplan/provider-pharmacy-therapeutics.php>

---

Questions and comments may be directed to CCHP Pharmacy by emailing  
[joseph.cardinalli@cchealth.org](mailto:joseph.cardinalli@cchealth.org)

---