



A Public Entity

Inland Empire Health Plan

PHARMACY TIMES

BY IEHP PHARMACEUTICAL SERVICES DEPARTMENT

February 1st 2020

IEHP FORMULARY CHANGES: November 2019 P&T UPDATE

We would like to inform you of the following changes to the 2019 IEHP Formulary that were approved by the Pharmacy and Therapeutics Subcommittee in November 2019. Changes will take effect on February 1, 2020.

AF = Add to Formulary	PA = Prior Authorization
AR = Age Restriction	QL = Quantity Limit
BOLD = Brand Name	R-C1 = Remove Code 1 restriction
C1 = Code 1 drugs are restricted to certain medical conditions or specific circumstances	RF = Remove from Formulary
DS = Days Supply	R-PA = Remove Prior Authorization
F = Formulary	R-QL = Remove Quantity Limit
NF = Non-formulary	ST = Step Therapy

NOTE: IEHP is a generic mandated health plan. Brand name drugs are not covered unless indicated or if generic is not available. The FDA recommended maximum dosage limit is applied.

Anti-Infective Drug Class Updates				
Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
ampicillin-sulbactam (1/1/20 implementation)	15 Gram Vial	NF		Retired Antibiotic Stewardship
cefepime (1/1/20 implementation)	1 Gram Vial Port	NF		Retired Antibiotic Stewardship
cefotaxime (1/1/20 implementation)	1 Gram Vial	NF		Retired Antibiotic Stewardship

Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
ceftazidime (1/1/20 implementation)	2 Gram Vial Port	NF		Retired Antibiotic Stewardship
ceftriaxone (1/1/20 implementation)	250 mg, 500 mg, 1 gram, 2 gram, 10 gram Vial	NF		Retired Antibiotic Stewardship
daptomycin (1/1/20 implementation)	500 mg Vial	NF		Retired Antibiotic Stewardship
entecavir	0.5 mg, 1 mg Tablet	F		
imipenem-cilastatin (1/1/20 implementation)	500 mg Vial	NF		Retired Antibiotic Stewardship
ivermectin	3 mg Tablet	F	QL: 5/14 days	
linezolid (1/1/20 implementation)		NF		Retired Antibiotic Stewardship
meropenem (1/1/20 implementation)	500 mg, 1 gram Vial	NF		Retired Antibiotic Stewardship
Mycamine (micafungin) (1/1/20 implementation)	50 mg Vial	NF		Retired Antibiotic Stewardship
paromomycin	250 mg Capsule	F	R-C1	
piperacillin-tazobactam (1/1/20 implementation)	13.5 gram Vial	NF		Retired Antibiotic Stewardship
Teflaro (ceftaroline) (1/1/20 implementation)	400 mg, 600 mg Vial	NF		Retired Antibiotic Stewardship
tobramycin solution for nebulization	0.225% sod chlor 300 mg/5ml AMPUL-NEB	F	QL: 60/30 days	
vancomycin intravenous (1/1/20 implementation)	vancomycin/0.9 % sod chloride 500MG/0.1L FROZ.PIGGY	NF		Retired Antibiotic Stewardship

Dermatological Drug Class Updates				
Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
adapalene gel	0.1 % Cream (G)	F	AR, QL: 45/30 days Min age: 35 years	
capsaicin	0.025%, 0.075%, 0.1% Cream	F	QL: 60/30 days	
crotamiton	10% Lotion	NF		

Gastrointestinal Drug Class Updates				
Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
Fluorabon drops (sodium fluoride)	0.25 mg/0.6 ml Drops	F		
Flura-Drops (sodium fluoride)	0.25 mg/Drops	F	AR: Max age 5 years	
Gattex (teduglutide) (1/1/20 implementation)	5 mg 30-Vial Kit	PA		Added PA criteria
mesalamine rectal enema	4 gram/60 ml Enema Kit	F		
Prilosec OTC (omeprazole)	20.6 mg Tablet	NF		
SmoothLax (polyethylene glycol 3350)	17 gram Powder Packet	F	QL: 1 pack/day	

Genitourinary Drug Class Updates				
Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
potassium citrate	5 mEq, 10 mEq, 15 mEq Tablet ER	F		

Miscellaneous Drug Class Updates				
Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
budesonide/formoterol	80-4.5 mcg, 160-4.5 mcg Inhaler	F	80-4.5mcg: QL 30.6 g /30 days 160-4.5mcg: QL 10.2 g /30 days	
cabergoline 0.5mg tab	0.5mg Tablet	F		
cervical cap		F	QL: 1/365 days	

condoms, latex, non-lubricated		F	QL: 24/30 days	
condoms, non-latex, lubricated		F	QL: 24/30 days	
Dulera (mometasone-formoterol) (1/1/20 implementation)	100 mcg/5 mcg, 200 mcg/5 mcg Inhaler	PA		Updated: AR updated
Entresto (sacubitril/valsartan) (1/1/20 implementation)	24 mg-26 mg, 49 mg-51 mg, 97 mg-103 mg Tablet	PA		Updated: AR updated
folic Acid	800 mcg Tablet	F		
hyoscyamine	0.125mg Tablet and Sublingual	F		
Jynneos (smallpox and monkeypox vaccine)		F	AR: Minimum Age: 18 years	
magnesium oxide	200mg, 250mg, 400mg, 420mg, 500mg	F	Remove QL	
nonoxynol 9 contraceptive sponge	1000 mg con Sponge	F	QL: 24/30 days	
Nucala (mepolizumab) (1/1/20 implementation)	100 mg/ml Syringe, 100 mg vial, 100 mg/ml Auto-Injector	PA		Updated: AR updated
Ofev (nintedanib) (1/1/20 implementation)	100 mg Capsule	PA		Updated: New FDA indication
Opsumit (macitentan) (1/1/20 implementation)	10 mg Tablet	PA		Updated: required preferred alternatives ambrisentan or bosentan
Orenitram (treprostinil ER) (1/1/20 implementation)	0.125 mg, 0.25 mg, 1 mg, 5 mg Tablet	NF		Retired
Quadracel (diphtheria and tetanus toxoids, pertussis, poliovirus) Pentacel (diphtheria and tetanus toxoid, pertussis, poliovirus, haemophilus b conjugate)	DTAP-IPV Vial	F	AR: Minimum Age: 18 years	
Shingrix (zoster vaccine)	GE antigen component	F	AR: Minimum Age: 50 years	
Uptravi (selexipag) (1/1/20 implementation)	200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1,200 mcg, 1,400 mcg, 1,600 mcg Tablet	PA		Updated: required preferred alternatives ambrisentan or bosentan
Varizig (varicella-zoster immune globulin)	125 unit/1.2 ml Vial	F	AR: Minimum Age: 18 years	
Zostavax (zoster vaccine)	Vial	F	AR: Minimum Age: 60 years	

DHCS Mandated Updates

Drug Name	Strength and Formulation	Formulary Status	AR/ST/QL/C1 Status	PA Criteria Status
SM foaming antacid (mag/aluminum/sod bicarb/alginc)	Tablet Chew m/sod bicarb/alginc)	F		
Maalox (mag hydrox/aluminum hyd/simeth)	Maximum Strength Suspension	F		
Symlin (pramlintide)	60 Pen Injector	F		
Symlinpen (pramlintide)	120 Pen Injector	F		
didanosine	DR 125 mg Capsule	F	QL (30/30 days)	
didanosine	DR 200 mg Capsule	F	QL (30/30 days)	
didanosine	DR 250 mg Capsule	F	QL (30/30 days)	
didanosine	Dr 400 mg Capsule	F	QL (30/30 days)	
Retrovir (zidovudine) (1/1/20 implementation)	200 mg/20 ml Vial	F		
zidovudine (1/1/20 implementation)	50 mg/5 ml Syrup	F		
zidovudine (1/1/20 implementation)	100 mg Capsule	F		
zidovudine (1/1/20 implementation)	300 mg Tablet	F		
ertapenem	1 Gram Vial	F		
chloramphenicol	Succ 1 Gram Vial	F		
ringer's solution	Ringers IV Solution	F		
dextrose	5%-electrolyte 48	F		
smoflipid	20% IV Fat Emulsion	F		
intralipid	30% IV Fat Emulsion	F		
dextrose	10%-Water IV Solution	F		
Rhopressa (netarsudil)	0.02% Ophth Solution	F		
Fremine III (amino acids)	10% IV Solution	F		

Clinimix (amino acid/dextrose)	4.25%-10% Solution	F		
Clinimix (amino acid/dextrose)	5%-15% Solution	F		
Clinimix (amino acid/dextrose)	4.25%-10% Solution	F		
Clinimix (amino acid/dextrose)	5%-20% Solution	F		
KCL	40 meq in D5W Solution	F		
D5%-1/4ns-kcl 40 meq/l	D5%-1/4ns-kcl 40 meq/l IV Solution	F		
D5%-1/4ns-kcl 30 meq/l	D5%-1/4ns-kcl 30 meq/l IV Solution	F		
D5%-1/4ns-kcl 10 meq/l	D5%-1/4ns-kcl 10 meq/l IV Solution	F		
D5w-kcl 30 meq/l	D5w-kcl 30 meq/l iv solution	F		
KCL	40 meq in D5w-Lactate Ringer	F		
KCL	10 meq in D5w-0.3% NaCl	F		
KCL	20 meq in D5w-0.3% NaCl	F		
KCL	20 meq in D5w-0.45% NaCl	F	Remove C1	
KCL	10 meq in D5w-0.45% NaCl	F	Remove C1	
saline	0.45% Solution-excel con	F		
sodium chloride	0.45% Solution	F		
sodium chloride	3% IV Solution	F		
sodium chloride	0.9% Solution	F		
sodium chloride	5% IV Solution	F		
Santyl (collagenase)	Ointment	F	QL (90 g/30 days)	
vancomycin	500 mg Vial	F		
vancomycin	1 Gram Vial	F		
vancomycin	HCl 750 mg Vial	F		

Clinical Practice Guideline Updates		
Clinical Practice Guideline	Academy/Association	Status
Sexually Transmitted Diseases- Summary of CDC Treatment Guidelines 2015	U.S. Department of Health and Human Services, Centers for Disease Control and Prevention	Renewed
Hepatitis C AASLD 2019	The American Association for the Study of Liver Diseases and the Infectious Diseases Society of America	Updated
Gastroesophageal Reflux Disease- Adults American College of Gastroenterology - 2013	NASPGHAN-North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition ESPGHAN-European Society for Pediatric Gastroenterology, Hepatology, and Nutrition	Renewed
Gastroesophageal Reflux Disease- Pediatrics	NASPGHAN-North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition ESPGHAN-European Society for Pediatric Gastroenterology, Hepatology, and Nutrition	Renewed

IEHP Policy Updates	
Policy	Status
Antibiotic Stewardship	Retired
Hepatitis B and C Center of Excellence	Renewed
IEHP Medi-Cal Treatment Criteria Policy	Updated: Changed the name of the policy: From "IEHP Medi-Cal Treatment Criteria and Policy," to "IEHP Drug Prior Authorization Policy"
Intrauterine & Subdermal Contraceptive Devices	Updated: Revised verbiage accordingly to remove pharmacy services provided by designated provider
Pharmacy Drug Management for Pain	Updated: internal process to include retrospective and compliance-initiated member reviews for drug seeking behavior (DSB) and fraud, waste and abuse (FWA)
Pediatric Enteral Nutritional Supplement	Updated: Removed "BMI" from required medical information of documented clinical signs and symptoms that a pediatric member is nutritionally at risk

For any questions, suggestions, or if you would like a printed copy of the IEHP Formulary Book or Clinical Practice Guideline, please call us at (909) 890-2049. As a reminder, the updated formulary information and Clinical Practice Guidelines are available at www.iehp.org.

Sincerely,
IEHP Pharmaceutical Services