



Provider Issue Briefing

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

The CCHP P&T committee met on 12/4/2020. Updates from the meeting are outlined below:

****Changes to the PDL will be effective by mid-January 2021****

Updates/Announcements:

1. Fee-For-Service Medi-Cal Carve-Out (Medi-Cal Rx) has been delayed until April 1, 2021:
 - a. Given the ongoing challenges and constantly evolving health care landscape associated with the unprecedented COVID-19 public health emergency (PHE), the Department of Health Care Services (DHCS), after careful consideration and in close partnership and collaboration with Magellan Medicaid Administration, Inc., has decided to lengthen the transition time to the full implementation of Medi-Cal Rx by three (3) months, until April 1, 2021. In the interim, all current prescription drug service processes and protocols, both effectuated by DHCS and Medi-Cal managed care plans (MCPs), will remain unchanged and in place until Medi-Cal Rx launches. DHCS will be working diligently to update documents and resources on the Medi-Cal Rx website accordingly to reflect the new date of implementation.
2. Provider Instructions to Prepare for Medi-Cal Rx:
The Department of Health Care Services Medi-Cal Rx transition of all administrative services related to Medi-Cal pharmacy benefits billed on pharmacy claims from the existing intermediaries, Medi-Cal Fee-for-Service (FFS) or Managed Care Plan (MCP) providers, to the new Medi-Cal Rx vendor, Magellan Medicaid Administration, Inc. (MMA), goes into effect April 1, 2021.

All Medi-Cal Rx providers, including pharmacies, prescribers, and their staff, will need to complete a registration process to access the Learning Management System (LMS), Saba. All education and outreach events will be posted in a calendar on the Saba LMS. To access the Saba LMS, providers will need to utilize the User Administration Console (UAC) application—a registration tool that controls and manages the user’s access to the Medi-Cal Rx Web Portal and associated applications—at <https://medi-calrx.dhcs.ca.gov/provider/>

For additional information regarding this transition, billing, and to register please go to: <https://medi-calrx.dhcs.ca.gov/home/education>

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):

Changes Made	Drug Name
Created new PA criteria:	None
Modified PA criteria:	Adapalene 0.1%/benzoyl peroxide 2.5% gel (Epiduo) Apremilast (Otezla) Exenatide (Byetta) 250mcg/ml prefilled pen Teriparatide (Forteo) Dimethyl Fumarate (Tecfidera) Fingolimod (Gilenya)
ADDED to the CCHP formulary:	None

Removed from CCHP formulary:	Aminophylline IV solution Theophylline IV solution Theophylline (Theolair) oral solution Theophylline (Elixophyllan) Calcitriol (Calcijex) IV Naftifine (Naftin) 1% gel Oxistat (oxiconazole nitrate) 1% lotion Oxiconazole nitrate (Oxistat) 1% cream Ertaczo (sertaconazole nitrate) 2% cream Sulfaconazole (Exelderm) 1% solution and cream
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- **Modification of criteria for Adapalene 0.1%/benzoyl peroxide 2.5% gel (Epiduo):**
adapalene was added as an additional option that may also be tried and failed in addition to tretinoin
- **Modification of criteria for Apremilast (Otezla):**
other DMARDs may also be considered as alternative to methotrexate; topical tacrolimus or pimecrolimus or coal tar may also be considered as alternative to topical corticosteroids
- **Modification of criteria for Exenatide (Byetta) 250mcg/ml prefilled pen:**
new formulary medications Ozempic, Rybelsus were added as additional options to the trial and failure of either Victoza or Trulicity requirement
- **Modification of criteria for Teriparatide (Forteo):**
new formatting and minor edits to criteria
- **Modification of criteria for Dimethyl Fumarate (Tecfidera):**
no longer requires a trial and failure of Copaxone (glatiramer) and Avonex (IFN Beta 1a)
- **Modification of criteria for Fingolimod (Gilenya):**
no longer requires a trial and failure of Copaxone (glatiramer) and Avonex (IFN Beta 1a) for refractory multiple sclerosis

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: <http://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC>

- **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 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
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