Blue Shield of California Promise Health Plan
Medi-Cal Formulary Changes - Second Quarter of 2020

This report provides formulary changes approved by our Pharmacy and Therapeutics Committee. For a complete listing, please refer to the Blue Shield Promise website at blueshieldca.com/promise. You may also call Blue Shield Promise at (800) 468-9935.

Analgesics

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
butalbital-acetaminophen, Tencon	butalbital-acetaminophen	50mg-325mg	tablet	Formulary	Add quantity limit of 6 tablets per day, with a maximum of 48 tablets per 30 days.	Yes
butalbital-acetaminophen-caffeine	butalbital-acetaminophen-caffeine	50mg-325mg-40mg	tablet	Formulary	Add quantity limit of 6 tablets per day, with a maximum of 48 tablets per 30 days.	Yes
butalbital-aspirin-caffeine	butalbital-aspirin-caffeine	50mg-325mg-40mg	capsule	Formulary	Add quantity limit of 6 tablets per day, with a maximum of 48 tablets per 30 days.	Yes

Antispasmodics, Gastrointestinal

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
chlordiazepoxide-clidinium	chlordiazepoxide-clidinium	5mg-2.5mg	capsule	Formulary	Add quantity limit of 8 capsules per day.	Yes

Antivirals

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Med-Cal
valacyclovir	valacyclovir	1gm	tablet	Formulary	Update quantity limit from 2 tablets per 15 days to 60 tablets per 30 days.	Yes
valacyclovir	valacyclovir	500mg	tablet	Formulary	Add to the formulary, with a quantity limit of 60 tablets per 30 days.	Yes

Bronchodilators

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
levalbuterol tartrate HFA	levalbuterol tartrate	45mcg	HFA inhaler	Formulary	Add to the formulary, with a quantity limit of 2 inhalers (30gm) per month.	Yes

Contraceptives

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
Volnea	desogestrel/ethinyl estradiol - ethinyl estradiol	150-20mcg (21 tabs), 10mcg (5tabs), 2 inert; 28 tablets	tablets	Formulary	Add to the formulary.	Yes
Depo-SubQ Provera 104	medroxyprogesterone	104mg/0.65ml	syringe	Formulary	Add to the formulary, per DHCS APL 20-004 Emergency Guidance.	Yes

Inflammatory Bowel Disease Agents

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
mesalamine DR	mesalamine	400mg	capsule	Formulary	Update quantity limit from 4 capsules per day to 6 capsules per day.	Yes
Pentasa	mesalamine	250mg	ER capsule	Non-formulary	Remove from the formulary.	Yes
Dipentum	olsalazine sodium	250mg	capsule	Non-formulary	Remove from the formulary.	Yes

Insulin

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
Insulin Lispro Protamine Mix Kwikpen	insulin lispro protamine mix	100 unit/ml (75unit-25unit/ml)	pen	Formulary	Add to the formulary with prior authorization.	Yes

Anti-Addiction/Substance Abuse Treatment Agents

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
naloxone	naloxone HCl	2mg/0.4ml	autoinjector	Carve-Out	Add to the Medi-Cal Carve-Out list.	Yes

Antimalarial Medications

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
chloroquine phosphate	chloroquine phosphate	250mg, 500mg	tablet	Formulary	Add the quantity limit of 25 tablets per 30 days.	Yes
hydroxychloroquine	hydroxychloroquine	200mg	tablet	Formulary	Add the quantity limit of 3 tablets per day.	Yes

Antipsychotic Agents

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
Caplyta	lumateperone tosylate	42mg	capsule	Carve-Out	Add to the Medi-Cal Carve-Out list.	Yes
ziprasidone	ziprasidone mesylate	20mg/ml	vial	Carve-Out	Add to the Medi-Cal Carve-Out list.	Yes

Blood Formation Modifiers

Drug Name	Generic Name	Drug Strength	Formulation	Formulary Status	Formulary Comments	Medi-Cal
Esperoct	antihemophilic factor (recombinant), glycopegylated-exei	500 unit (+/-), 1000 unit (+/-), 1500 unit (+/-), 2000 unit (+/1), 3000 unit (+/-)	vial	Carve-Out	Add to the Medi-Cal Carve-Out list.	Yes

Electrolytes						
Drug Name	**Generic Name**	**Drug Strength**	**Formulation**	**Formulary Status**	**Formulary Comments**	**Medi-Cal**
sodium polystyrene sulfonate	sodium polystyrene sulfonate	15gm/60ml	suspension	Formulary	Add to the formulary.	Yes
Kionex	sodium polystyrene sulfonate/sorbitol	15gm/60ml	suspension	Formulary	Add to the formulary.	Yes

Glycemic agents						
Drug Name	**Generic Name**	**Drug Strength**	**Formulation**	**Formulary Status**	**Formulary Comments**	**Medi-Cal**
Glucagon Emergency Kit	glucagon HCl	1mg	vial	Formulary	Add to the formulary.	Yes