

BLUE SHIELD OF CALIFORNIA
MAY 2023 STANDARD/VALUE DRUG FORMULARY CHANGES

Blue Shield is committed to covering safe, effective and affordable medications, so we regularly review and update our drug formularies. Our Pharmacy and Therapeutics (P&T) Committee is made up of a group of practicing physicians and pharmacists who meet quarterly to recommend changes to our formulary based on the latest medical literature, new clinical guidelines, new information from key physician experts, and new information from the Food and Drug Administration.

Changes to the Standard/Value Drug Formulary from the May 2023 P&T Committee meeting are outlined below. To view a copy of the Standard/Value Drug Formulary, please [download a copy](#).

The drugs listed below are to be used for FDA-approved indications but may also be used for other conditions.

1. DRUGS ADDED TO FORMULARY

The following drugs were added to the formulary:

Drug	FDA Indication(s)	Coverage Restriction(s)	Tier Status
clindamycin 1%-benzoyl peroxide 5% gel in pump	Acne vulgaris		Tier 1
clobazam (Onfi)	Lennox-Gastaut syndrome	Step therapy, Quantity limit	Tier 2
Gilenya 0.25mg capsule	Multiple sclerosis	Quantity limit	Tier 4
teriflunomide (Aubagio)		Prior authorization, Quantity limit	Tier 4
lurasidone (Latuda)	Schizophrenia, Bipolar disorder	Quantity limit	Tier 2
pirfenidone 267mg capsule (Esbriet)	Idiopathic pulmonary fibrosis	Prior authorization, Quantity limit	Tier 4

2. FORMULARY DRUGS WITH CHANGES TO TIER AND/OR COVERAGE RESTRICTION

The following drugs have coverage restriction(s) added or removed, and/or change of tier status as noted:

Drug	FDA Indication(s)	Coverage Restriction(s)	New Tier Status
Rybelsus	Diabetes	Quantity limit, Remove Step therapy, Add Prior authorization	Remains Tier 2
Ozempic	Diabetes, Cardiovascular events		
Trulicity			
Victoza			

3. DRUGS REMOVED FROM THE FORMULARY

The following brand-name drugs were removed from the formulary because generic is now available and was added to the formulary. Drug removal is effective August 2023.

Brand-name Drug	FDA Indication(s)	Restriction(s)	Alternative(s)
Esbriet	Idiopathic pulmonary fibrosis	Quantity limit	pirfenidone
Latuda	Schizophrenia, Bipolar disorder	Quantity limit	lurasidone
Vascepa 500mg	Hypertriglyceridemia, MI and stroke	Quantity limit	icosapent ethyl