



Medication Trend Updates and Formulary Changes – 3rd Quarter 2018

This update includes information regarding zero copayments for Medicare Advantage (MA) members; the potential risk of neural tube birth defects associated with the active ingredient dolutegravir in Juluca®, Tivicay® and Triumeq;® and changes to the Health Net of California, Inc., Health Net Community Solutions, Inc. and Health Net Life Insurance Company (Health Net) commercial *Recommended Drug Lists (RDLs)*, *Medi-Cal RDL* and *Medicare Part D Formularies* for the third quarter of 2018.

ZERO COPAYMENT PROGRAM FOR MEDICARE ADVANTAGE MEMBERS

Health Net continues to encourage member medication adherence in 2018. To help alleviate barriers to medication adherence and assist members in better managing chronic diseases, Health Net offers zero copayment on some medications. Most of the medications listed below – in the statins, anti-diabetic agents (not including insulin), angiotensin converting enzyme inhibitor (ACEI), and angiotensin receptor blocker (ARB) medication classes – are included on the Select Care tier without copayments for MA members. Members should contact the Health Net Medicare Programs Member Services Department, as listed on their member identification (ID) card, to ensure deductibles have been met.

Drug Class	Medication	
LIPID MANAGEMENT (STATINS)	<ul style="list-style-type: none"> atorvastatin calcium tablet fluvastatin sodium capsule lovastatin tablet 	<ul style="list-style-type: none"> pravastatin sodium tablet simvastatin tablet
ANTI-DIABETIC AGENTS	<ul style="list-style-type: none"> acarbose tablet glimepiride tablet glipizide tablet and glipizide SR 24 HR glipizide/metformin HCl tablet metformin HCl tablet metformin HCl tablet SR 24 HR (generic for Glucophage XR®) nateglinide tablet 	<ul style="list-style-type: none"> pioglitazone HCl tablet pioglitazone HCl/glimepiride tablet pioglitazone HCl/metformin HCl tablet repaglinide tablet tolazamide tablet tolbutamide tablet

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

provider_services@healthnet.com

EnhancedCare PPO (IFP)

1-844-463-8188
provider.healthnetcalifornia.com

EnhancedCare PPO (SBG)

1-844-463-8188
provider.healthnet.com

Health Net Employer Group HMO, POS, HSP, PPO, & EPO

1-800-641-7761
provider.healthnet.com

IFP – CommunityCare HMO, PPO, PureCare HSP, PureCare One EPO

1-888-926-2164
provider.healthnetcalifornia.com

Medicare (individual)

1-800-929-9224
provider.healthnetcalifornia.com

Medicare (employer group)

1-800-929-9224
provider.healthnet.com

Medi-Cal – 1-800-675-6110

provider.healthnet.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com
healthnet.com
fax 1-800-937-6086

Drug Class	Medication	
ACEI/ARB	<ul style="list-style-type: none"> • benazepril HCl tablet • benazepril/amlodipine besylate capsule • benazepril/HCTZ tablet • candesartan cilexetil tablet • candesartan cilexetil/HCTZ tablet • captopril tablet • captopril/HCTZ tablet • enalaprilat injection 1.25 mg/ml • enalapril maleate tablet • enalapril maleate/HCTZ tablet • eprosartan mesylate tablet • fosinopril sodium tablet • fosinopril sodium/HCTZ tablet • irbesartan tablet 	<ul style="list-style-type: none"> • irbesartan/HCTZ tablet • lisinopril tablet • lisinopril/HCTZ tablet • losartan potassium tablet • losartan potassium/HCTZ tablet • moexipril HCl tablet • moexipril/HCTZ tablet • perindopril erbumine tablet • quinapril HCl tablet • quinapril/HCTZ tablet • ramipril capsule • trandolapril tablet • valsartan tablet • valsartan/HCTZ tablet

- HCl indicates hydrochloride
- HCTZ indicates hydrochlorothiazide
- SR indicates sustained release
- XR indicates extended release

POTENTIAL RISK OF NEURAL TUBE BIRTH DEFECTS ASSOCIATED WITH ACTIVE INGREDIENT DOLUTEGRAVIR IN JULUCA, TIVICAY AND TRIUMEQ

Serious cases of neural tube birth defects involving the brain, spine and spinal cord have been reported in babies born to women treated with dolutegravir used to treat HIV. Neural tube defects are birth defects that can occur early in pregnancy when the spinal cord, brain and related structures do not form properly. Approved in 2013, dolutegravir has been on the market for five years and is available as a single ingredient product under the brand name Tivicay and as a fixed dose combination tablet with other HIV medications under the brand names Juluca and Triumeq.

Preliminary results from an ongoing observational study in Botswana found that women who received dolutegravir at the time of becoming pregnant or early in the first trimester appear to be at higher risk for these defects. To date, in this observational study there are no reported cases of babies born with neural tube defects to women starting dolutegravir later in pregnancy. The U.S. Food and Drug Administration (FDA) is investigating this new safety issue and will update the public when more information is available.

Patients should not stop taking dolutegravir without first talking to their health care professionals (HCPs). HCPs should weigh benefits and risks of the drug and inform women of childbearing age about the potential risk of neural tube defects when a dolutegravir-containing regimen is used at the time of conception and early in pregnancy. Alternative antiretroviral medications should be considered. If women of childbearing age continue to use dolutegravir, HCPs should reinforce the consistent use of effective birth control. Pregnancy testing should be performed before initiating a dolutegravir-containing regimen in women of childbearing age to exclude pregnancy.

For further information, visit the FDA's safety alerts page at: www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm608168.htm.

CHANGES TO THE RECOMMENDED DRUG LIST AND MEDICARE PART D FORMULARIES

The Health Net Pharmacy and Therapeutics (P&T) Committee, which comprises practicing physicians, pharmacists and other health care professionals, reviews medications on the Health Net *RDLs* for commercial and Medi-Cal members, and the *Medicare Part D Formularies* for Medicare members each quarter to determine medications to remain on or be moved to a different tier. A list of some recent changes is provided beginning on page 4. The list contains brand-name prescription medications, status, alternatives, and comments for the third quarter of 2018.

Complete lists of the *RDLs* and *Medicare Part D Formularies* are available on the Health Net provider portal, as listed in the table below, by selecting *Pharmacy Information* or *Provider Library*. Other pharmacy-related provider updates, prior authorization criteria and pharmacy forms are also available online under *Pharmacy Information*.

PHARMACY HELP LINE

For additional information regarding changes to the commercial Health Net *RDLs*, Health Net Medi-Cal *RDLs* or *Medicare Part D Formularies*, contact the appropriate pharmacy telephone numbers listed below:

- **Pharmacy Services** (commercial): 1-800-548-5524, option #3; fax 1-800-314-6223
- **Pharmacy Service Center** (Medi-Cal and Medicare): 1-800-867-6564; fax 1-800-977-8226
- **Health Net Clinical Pharmacy Line** (clinical programs): 1-800-782-2221

ADDITIONAL INFORMATION

If you have questions regarding the information contained in this update, contact the applicable Health Net Provider Services Center within 60 days at:

Line of Business	Telephone Number	Provider Portal	Email Address
ENHANCEDCARE PPO (IFP)	1-844-463-8188	provider.healthnetcalifornia.com	provider_services@healthnet.com
ENHANCEDCARE PPO (SBG)	1-844-463-8188	provider.healthnet.com	
HEALTH NET EMPLOYER GROUP HMO, POS, HSP, PPO, & EPO	1-800-641-7761	provider.healthnet.com	
IFP (COMMUNITYCARE HMO, PPO, PURECARE HSP, PURECARE ONE EPO)	1-888-926-2164	provider.healthnetcalifornia.com	
MEDICARE (INDIVIDUAL)	1-800-929-9224	provider.healthnetcalifornia.com	
MEDICARE (EMPLOYER GROUP)	1-800-929-9224	provider.healthnet.com	
MEDI-CAL	1-800-675-6110	provider.healthnet.com	N/A

HEALTH NET RECOMMENDED DRUG LIST (RDL), MEDI-CAL RDL AND MEDICARE PART D FORMULARY CHANGES

Medication	Status			Health Net Formulary Alternative(s)			Comments
	Commercial 3-Tier Plan (4-Tier Plan)	Medicare Part D Value ¹	Medi-Cal	Commercial (Tier 1 or 2)	Medicare Part D Value ¹ (Tier 1, 2, 3, 4 or 6)	Medi-Cal	
ORAL MEDICATIONS							
Bevyxa [®] (betrixaban) capsule	Tier 3 QL (NP QL)	Tier 4 QL	F (QL)**			enoxaparin	Prophylaxis of venous thromboembolism (VTE) in adult patients hospitalized for an acute medical illness who are at risk for thromboembolic complications due to moderate or severe restricted mobility and other risk factors for VTE Quantity limit is 42 capsules per 42 days. For Medicare, quantity limit is 1 capsule per day
Calquence [®] (acalabrutinib) capsule	Tier 3* (Specialty Tier*)	Tier 5*	F*, **	Revimid [®] (*for Tier 3 plan)			Treatment of adult patients with mantle cell lymphoma (MCL) who have received at least one prior therapy
Erleada [™] (apalutamide) tablet	Tier 3* (Specialty Tier*)	Tier 5*	F*, **	bicalutamide (Casodex [®]), flutamide and nilutamide (Nilandron [®])	bicalutamide (Casodex), nilutamide (Nilandron)	bicalutamide (Casodex),** flutamide	Treatment of patients with non-metastatic castration-resistant prostate cancer (CRPC)
Prevymis [™] (letermovir) tablet	NF (NF)	Tier 5*	NF**	valacyclovir (Valtrex [®]) tablet	valacyclovir (Valtrex) tablet, ganciclovir (Cytovene [®]) injection*	valacyclovir (Valtrex) tablet	Prophylaxis of cytomegalovirus (CMV) infection and disease in adult CMV-seropositive recipients [R+] of an allogeneic hematopoietic stem cell transplant (HSCT)

Medication	Status			Health Net Formulary Alternative(s)			Comments
	Commercial 3-Tier Plan (4-Tier Plan)	Medicare Part D Value ¹	Medi-Cal	Commercial (Tier 1 or 2)	Medicare Part D Value ¹ (Tier 1, 2, 3, 4 or 6)	Medi-Cal	

ORAL MEDICATIONS, CONTINUED

Verzenio [®] (abemaciclib) tablet	Tier 3 (Specialty Tier*)	Tier 5*	NF	anastrozole (Arimidex [®]), exemestane (Aromasin [®]), letrozole (Femara [®]), tamoxifen (Nolvadex [®]), Fareston, [®] Ibrance [®] (*for Tier 3 plan, SP *for Tier 4 plan)	anastrozole (Arimidex), letrozole (Femara), tamoxifen (Nolvadex)	anastrozole (Arimidex), exemestane (Aromasin), letrozole (Femara), Fareston, Ibrance	In combination with fulvestrant for the treatment of women with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative advanced or metastatic breast cancer with disease progression following endocrine therapy As monotherapy for the treatment of adult patients with HR-positive, HER2-negative advanced or metastatic breast cancer with disease progression following endocrine therapy and prior chemotherapy in the metastatic setting
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OPHTHALMIC PREPARATIONS

Vyzulta [®] (latanoprostene bunod) ophthalmic solution	NF (NF)	NF	NF**	latanoprost (Xalatan [®]), timolol (Timoptic [®]), brimonidine (Alphagan [®] P), dorzolamide (Trusopt [®])	latanoprost (Xalatan), timolol (Timoptic), brimonidine (Alphagan P), dorzolamide (Trusopt)	latanoprost (Xalatan), timolol (Timoptic), brimonidine (Alphagan P), dorzolamide (Trusopt)	Reduction of intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension
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Medication	Status			Health Net Formulary Alternative(s)			Comments
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INJECTABLE PREPARATIONS							
Fasenra™ (benralizumab) prefilled syringe	Medical benefit*	Tier 5*	F*, **	Inhaled corticosteroid: budenoside (Pulmicort), Arnuity®, Ellipta®, Asmanex®, Flovent®, Qvar® Long-acting beta agonist (LABA): Serevent® Combination products: fluticasone/salmeterol (Airduo RespiClick®), Advair®, Breo Ellipta®, Dulera®, Symbicort® Leukotriene modifier: montelukast, zafirlukast	Inhaled corticosteroid: Aerospan®, Arnuity Ellipta, Asmanex, Flovent, Qvar Long-acting beta agonist (LABA): Serevent Combination products: Advair, Breo Ellipta, Dulera, Leukotriene modifier: montelukast	Inhaled corticosteroid: budenoside (Pulmicort), Aerospan, Arnuity Ellipta, Asmanex, Flovent, Qvar Long-acting beta agonist (LABA): Serevent Combination products: fluticasone/salmeterol (Airduo RespiClick), Advair, Breo Ellipta, Dulera, Symbicort Leukotriene modifier: montelukast, zafirlukast	Add-on maintenance treatment of patients with severe asthma ages 12 and older, and with an eosinophilic phenotype Limitation(s) of use: Fasenra is not indicated for treatment of other eosinophilic conditions Fasenra is not indicated for the relief of acute bronchospasm or status asthmaticus

Medication	Status			Health Net Formulary Alternative(s)			Comments
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INJECTABLE PREPARATIONS, CONTINUED							
Hemlibra® (emicizumab-kxwh) vial	Medical benefit (Specialty Tier*)	Part B benefit	Medical benefit				Routine prophylaxis to prevent or reduce the frequency of bleeding episodes in adult and pediatric patients with hemophilia A (congenital factor VIII deficiency) with factor VIII inhibitors
Mepsevi™ (vestronidase alfa-vjvk) vial	Medical benefit *	Medical benefit	Bill Medi-Cal Fee for Service directly				Treatment of mucopolysaccharidosis VII (MPS VII, Sly syndrome) in pediatric and adult patients Limitation(s) of use: The effect of Mepsevi on the central nervous system manifestations of MPS VII has not been determined
Ozempic® (semaglutide) prefilled pen	Medical benefit (Specialty Tier*)	NF	NF**	metformin Preferred glucagon-like peptide-1 (GLP-1) receptor agonists at Specialty Tier.* Trulicity®, Victoza®	metformin GLP-1 receptor agonists: Bydureon® (EST), Byetta® (EST), Victoza (EST)	metformin GLP-1 receptor agonists: Adlyxin® *, **, Bydureon*, **, Byetta, Soliqua® *, **, Trulicity*, **, Victoza*, **, Xultophy® *, **	An adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus Electronic step therapy (EST) requires a trial of metformin first For commercial line of business, coverage of Ozempic requires a trial of Victoza and Trulicity

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INJECTABLE PREPARATIONS, CONTINUED

Prewymis (letermovir) single-dose vial	Medical benefit	Tier 5*	Bill Medi-Cal Fee for Service directly	valacyclovir (Valtrex) tablet	valacyclovir (Valtrex) tablet, ganciclovir (Cytovene) injection*	valacyclovir (Valtrex) tablet	Prophylaxis of cytomegalovirus (CMV) infection and disease in adult CMV-seropositive recipients [R+] of an allogeneic hematopoietic stem cell transplant (HSCT)
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¹Medicare Part D Value Formulary = Health Net Seniority Plus Amber I (HMO SNP), Health Net Seniority Plus Amber II (HMO SNP), Health Net Healthy Heart (HMO)

*Prior authorization (PA) is required to verify member eligibility and that the member satisfies clinical protocols to ensure appropriate use of the medication.

**CCS = California Children's Services: Refer to www.dhcs.ca.gov for the local telephone number to determine member's coverage eligibility.

- EST indicates step therapy required
- F indicates formulary
- NF indicates nonformulary. Medications require member-specific medical reasons why formulary medications cannot be considered. Requests are reviewed via Health Net's prior authorization process.
- NP indicates nonpreferred
- QL indicates quantity limit

PROVIDER Update



Health Net®

CONTRACTUAL | AUGUST 23, 2018 | UPDATE 18-583sum | 3 PAGES

Summary Update: Medication Trend Updates and Formulary Changes – 3rd Quarter 2018

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Drug Class	Medication
LIPID MANAGEMENT (STATINS)	<ul style="list-style-type: none"> atorvastatin calcium tablet fluvastatin sodium capsule lovastatin tablet pravastatin sodium tablet simvastatin tablet
ANTI-DIABETIC AGENTS	<ul style="list-style-type: none"> acarbose tablet glimepiride tablet glipizide tablet and glipizide SR 24 HR glipizide/metformin HCl tablet metformin HCl tablet metformin HCl tablet SR 24 HR (generic for Glucophage XR®) nateglinide tablet pioglitazone HCl tablet pioglitazone HCl/glimepiride tablet pioglitazone HCl/metformin HCl tablet

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 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

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PROVIDER COMMUNICATIONS

provider.communications@

healthnet.com

fax 1-800-937-6086

Drug Class	Medication	
ANTI-DIABETIC AGENTS, CONTINUED	<ul style="list-style-type: none"> • repaglinide tablet • tolazamide tablet 	<ul style="list-style-type: none"> • tolbutamide tablet
ACEI/ARB	<ul style="list-style-type: none"> • benazepril HCl tablet • benazepril/amlodipine besylate capsule • benazepril/HCTZ tablet • candesartan cilexetil tablet • candesartan cilexetil/HCTZ tablet • captopril tablet • captopril/HCTZ tablet • enalaprilat injection 1.25 mg/ml • enalapril maleate tablet • enalapril maleate/HCTZ tablet • eprosartan mesylate tablet • fosinopril sodium tablet • fosinopril sodium/HCTZ tablet • irbesartan tablet 	<ul style="list-style-type: none"> • irbesartan/HCTZ tablet • lisinopril tablet • lisinopril/HCTZ tablet • losartan potassium tablet • losartan potassium/HCTZ tablet • moexipril HCl tablet • moexipril/HCTZ tablet • perindopril erbumine tablet • quinapril HCl tablet • quinapril/HCTZ tablet • ramipril capsule •trandolapril tablet • valsartan tablet • valsartan/HCTZ tablet

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- HCTZ indicates hydrochlorothiazide
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- XR indicates extended release

POTENTIAL RISK OF NEURAL TUBE BIRTH DEFECTS ASSOCIATED WITH ACTIVE INGREDIENT DOLUTEGRAVIR IN JULUCA, TIVICAY AND TRIUMEQ

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Patients should not stop taking dolutegravir without first talking to their health care professionals (HCPs). HCPs should weigh benefits and risks of the drug and inform women of childbearing age about the potential risk of neural tube defects when a dolutegravir-containing regimen is used at the time of conception and early in pregnancy. Alternative antiretroviral medications should be considered. If women of childbearing age continue to use dolutegravir, HCPs should reinforce the consistent use of effective birth control. Pregnancy testing should be performed before initiating a dolutegravir-containing regimen in women of childbearing age to exclude pregnancy.

For further information, visit the FDA's safety alerts page at: www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm608168.htm.

CHANGES TO THE RECOMMENDED DRUG LIST AND MEDICARE PART D FORMULARIES

A list of recent changes to the Health Net *RDLs* and *Formularies* is available in the complete provider update 18-583, *Medication Trend Updates and Formulary Changes – 3rd Quarter 2018*. The list contains brand-name prescription medications, status, alternatives, and comments. Complete listings of the *RDLs* and *Medicare Part D Formularies* are available on the Health Net provider portal, as listed in the table below, by selecting *Pharmacy Information*.

PHARMACY HELP LINE

For additional information regarding changes to the commercial Health Net *RDLs*, Health Net Medi-Cal *RDLs* or *Medicare Part D Formularies*, contact the appropriate pharmacy telephone numbers listed below:

- **Pharmacy Services** (commercial): 1-800-548-5524, option #3; fax 1-800-314-6223
- **Pharmacy Service Center** (Medi-Cal and Medicare): 1-800-867-6564; fax 1-800-977-8226
- **Health Net Clinical Pharmacy Line** (clinical programs): 1-800-782-2221

ADDITIONAL INFORMATION

To obtain a comprehensive description of the above topics, the complete update, 18-583, is available on the Health Net provider portal, as listed in the table below, in the Provider Library under *Updates and Letters > 2018*; search for provider update 18-583. Providers who do not have access to the Internet may request a print copy of update 18-583 by contacting the Health Net Provider Communications Department by fax at 1-800-937-6086 or by email at provider.communications@healthnet.com.

For the most current version of the Health Net *RDLs*, visit the Health Net provider portal, as listed in the table below, under *Pharmacy Information > Drug Lists*.

If you have questions regarding the information contained in this update, contact the applicable Health Net Provider Services Center within 60 days at:

Line of Business	Telephone Number	Provider Portal	Email Address
ENHANCEDCARE PPO (IFP)	1-844-463-8188	provider.healthnetcalifornia.com	provider_services@healthnet.com
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MEDI-CAL	1-800-675-6110	provider.healthnet.com	N/A