



To Help You End Opioid Abuse: *Preferred Drug List* Changes Focus on Opioid Pain Medications

Broad changes to the *Medi-Cal Preferred Drug List (PDL)* are effective October 15, 2019

Health Net* is making significant changes to the *Preferred Drug List (PDL)* for all Medi-Cal members.

These changes are in response to input from providers, regulatory changes, nationally recognized standard of care or treatment guideline changes, as well as the Pharmacy and Therapeutics (P&T) Committee. The P&T Committee reviews the *PDL* quarterly, at a minimum, to determine placement of medications on the drug list and any limitations to coverage. The P&T Committee consists of practicing physicians, pharmacists and other health care professionals.

These changes are considered more restrictive than prior *PDL* changes. Changes may include differences to the quantity limits (QL), age limits (AL), step therapy (ST), prior authorization (PA) status, formulary (F), and non-formulary (NF) status.

Note changes for opioids to prevent misuse

Note significant changes to the quantity limits and prior authorization requirements for opioid pain medications. These changes follow current treatment guidelines and standards of care for the utilization and prescribing of these medications. The goal is to improve safety and prevent abuse, overdose and diversion in response to the increased awareness of the opioid epidemic.

These medications will be updated with quantity limits and dosing that corresponds in most cases to less than or equal to 90 morphine milligram equivalents (MME) daily. In addition, opioid treatment-naïve patients may be limited to a seven-day supply on the first fill of preferred opioid pain medications. Requests for greater than seven days for opioid-naïve patients and requests for dosages that exceed 90 MME daily may require prior authorization. These new changes and quantity limits will be used in collaboration with the previously approved and implemented Opioid Utilization Management Program.

For the most current information and details about specific limits and restrictions, visit the Health Net provider website at provider.healthnet.com. Go to *Pharmacy Information > Drug Information for California State Health Programs*, then select the respective drug list under Printable Drug Lists.

Additional information

For additional information regarding changes to the *Health Net Medi-Cal PDL*, contact the Pharmacy Service Center (Medi-Cal) at 1-800-867-6564 or the Health Net Clinical

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

1-800-675-6110

provider.healthnet.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com

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Pharmacy Line (clinical programs) at 1-800-782-2221. For all other questions, contact the Health Net Medi-Cal Provider Services Center within 60 days at 1-800-675-6110.

Changes to the *PDL*, effective October 15, 2019

The table below lists medications and their status on the *PDL*.

Changes to the *PDL*, effective October 15, 2019

Medication	Status	Comments
Acetaminophen with codeine tab 300-15 mg, 300-30 mg, 300-60 mg	F	QL updated
Acetaminophen with codeine solution (soln) 120-12 mg/5 ml	F	QL updated
Butalbital-acetaminophen-caffeine with codeine cap 50-300-40-30 mg, 50-325-40-30 mg	F	QL updated
Butalbital-aspirin-caffeine with codeine capsule (cap) 50-325-40-30 mg	F	QL updated
Codeine sulfate tab 15 mg, 30 mg, 60 mg	F	QL updated
Fentanyl transdermal (TD) patch 72-hour (hr), 12.5 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr	F	QL updated
Hydrocodone-acetaminophen tab 5-325 mg, 7.5-325 mg, 10-325 mg	F	QL updated
Hydrocodone-acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg	F	QL updated
Hydrocodone-acetaminophen soln 7.5-325 mg/15 ml	F	QL updated
Hydromorphone HCl liquid 1 mg/ml	F	QL updated
Hydromorphone HCl suppository 3 mg	F	QL updated
Hydromorphone HCl tab 2 mg, 4 mg, 8 mg	F	QL updated
Hydromorphone HCl tab extended-release (ER) 24-hr deterrent 8 mg, 12 mg, 16 mg	F	QL updated
Meperidine HCl oral soln 50 mg/5 ml	F	QL updated
Meperidine HCl tab 50 mg, 100 mg	F	QL updated
Methadone soln 5 mg/5 ml	F, PA	PA, QL updated
Methadone tab 10 mg	F, PA	PA, QL updated
Methadone tab 5 mg	F, PA	PA, QL updated
Morphine sulfate (concentrate) oral soln 20 mg/ml	F	QL updated

Changes to the *PDL* effective October 15, 2019, continued

Medication	Status	Comments
Morphine sulfate beads cap ER 24-hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	F	QL updated
Morphine sulfate injection (inj) 0.5 mg/ml, 1 mg/ml, 2 mg/ml, 4 mg/ml, 5 mg/ml, 8 mg/ml, 10 mg/ml, 15 mg/ml	F	QL updated
Morphine sulfate IV soln 5 mg/ml, 25 mg/ml, 50 mg/ml	F	QL updated
Morphine sulfate oral soln 10 mg/5 ml, 20 mg/5 ml	F	QL updated
Morphine sulfate suppository 5 mg, 10 mg, 20 mg, 30 mg	F	QL updated
Morphine sulfate tab 15 mg, 30 mg	F	QL updated
Morphine sulfate tab controlled-release (CR) 15 mg, 30 mg, 60 mg, 100 mg, 200 mg	F	QL updated
Oxycodone-aspirin tab 4.88-325 mg	F	QL updated
Oxycodone HCl cap 5 mg	F	QL updated
Oxycodone HCl concentrate 100 mg/5 ml (20 mg/ml)	F	QL updated
Oxycodone HCl soln 5 mg/5 ml	F	QL updated
Oxycodone HCl tab 5 mg, 10 mg, 20 mg, 30 mg	F	QL updated
Oxycodone HCl tab ER 12-hr deterrent 10 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	F, PA	QL updated
Oxycodone with acetaminophen tab 5-325 mg, 7.5-325 mg, 10-325 mg	F	QL updated
Oxycodone with acetaminophen soln 5-325 mg/5 ml	F	QL updated
Tapentadol HCl tab sustained-release (SR) 12-hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	F, PA	QL updated
Tramadol HCl tab 50 mg	F	QL updated
Tramadol-acetaminophen tab 37.5-325 mg	F	QL updated

- F indicates formulary.
- NF indicates nonformulary.
- PA indicates prior authorization is required to verify member eligibility and that the member satisfies clinical protocols to ensure appropriate use of the medication.
- QL indicates quantity limit.