

PROVIDER Update



CONTRACTUAL | JANUARY 2, 2026 | UPDATE 26-019m | 7 PAGES

Medication Trend Updates and Drug List/Formulary Changes – 1st Quarter 2026

Review drug list, formulary and drug benefit changes, and medication safety issues

Stay up to date with information about:

- New guidance to expand non-opioid analgesics for chronic pain.
- Changes to the Health Net* Commercial Drug Lists, Medi-Cal drug benefits and Medicare Part D Formulary for the first quarter of 2026.

New guidance to expand non-opioid analgesics for chronic pain

The U.S. Food and Drug Administration (FDA) released draft guidance on non-opioid analgesic for treating chronic pain and reducing prescription opioid misuse. The guidance includes regulatory considerations related to:

- Categorization of multiple chronic pain conditions versus individual chronic pain indications.
- Design of clinical trials that ensure safety and efficacy.
- Evaluation of non-opioid drugs to avoid, reduce or eliminate opioid use.
- Inclusion of statistical principles, patient-reported outcomes and use of expedited programs to support non-opioid drug development.

The FDA issued this draft guidance as part of a larger FDA strategy to address the opioid crisis and to help drug developers create safer and more effective non-opioid alternatives for treating chronic pain, a long-standing problem for which physicians need more therapeutic options.

Source: FDA news release at <https://bit.ly/FDA-Opioid-Pain-Med-Labeling>.

Changes to Commercial, Medicare Part D and Medi-Cal drug lists/formulary

The Pharmacy Advisory Committee is made up of participating physicians, pharmacists and other health care professionals. Every quarter, the committee reviews drug lists/formulary and medication benefits for Commercial, Medicare

THIS UPDATE APPLIES TO:

- Physicians
- Participating Physician Groups

LINES OF BUSINESS:

- IFP
 - Ambetter HMO
 - Ambetter PPO
- Employer Group
 - HMO/POS
 - PPO
- Wellcare By Health Net
 - Medicare Advantage (HMO)
- Medi-Cal
 - Amador
 - Calaveras
 - Inyo
 - Los Angeles
 - Molina
 - Mono
 - Sacramento
 - San Joaquin
 - Stanislaus
 - Tulare
 - Tuolumne

PROVIDER SERVICES

provider_services@healthnet.com

Ambetter from Health Net IFP
Ambetter HMO – 888-926-2164

Ambetter from Health Net IFP
Ambetter PPO – 844-463-8188

Health Net Employer Group
HMO, POS & PPO – 800-641-7761

Medicare (individual & employer group)
(Wellcare By Health Net) –
800-929-9224

Medicare Supplement – 800-641-7761

Medi-Cal (including CS and ECM providers) – 800-675-6110

Medicare Supplement – 800-641-7761

Medi-Cal (including CS and ECM providers) – 800-675-6110

PROVIDER PORTAL

provider.healthnetcalifornia.com

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Part D (for Medicare members) and Medi-Cal members. They decide which medications stay on the same tier and which ones move to a different tier.

A table showing some of the recent changes for **Q1 2026** is available on **pages 3-7**. It includes:

- Medication names.
- Their updated formulary status.
- Formulary alternative options.
- Notes or comments.

You can find the full formulary/drug lists for Commercial, Medi-Cal and Medicare Part D on the *Pharmacy Information for Providers* page at <https://bit.ly/PharmacyInformationforProviders>.

For medical drug benefits, refer to the *Outpatient Pharmaceuticals (Submitted Under Medical Benefit)* section on the Medi-Cal Fee-for-Service **Prior Authorization List** at <https://bit.ly/HealthNetPriorAuthorizations>.

Pharmacy help line

For more information regarding changes to the Health Net Commercial Formularies, Medi-Cal medication benefits or drug list, or Medicare Part D Formulary, contact the proper pharmacy phone numbers listed below:

Product	Phone number	Fax number
Pharmacy Benefit (Medi-Cal Rx)	800-977-2273	800-869-4325
Medical Benefit Drugs (Medi-Cal)	800-867-6564, option 2	833-953-3436
Commercial Pharmacy Services	800-548-5524, option 2	800-314-6223
Medicare Pharmacy Service Center	800-867-6564, option 1	800-977-8226

Need help? Contact us

If you have questions regarding the information contained in this update, contact the Health Net Provider Services Center by email at **provider_services@healthnet.com**, by phone or through the Health Net provider portal as listed in the right-hand column on page 1.

Health Net Commercial Drug Lists, Medicare Part D Formulary and Medi-Cal medication benefit changes

Note: The information on the tables is subject to change. For the most current details, please refer to the Prior Authorization List at <https://bit.ly/HealthNetPriorAuthorizations>.

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

Oral preparation

Brinsupri™ (brensocatic) tablet	NF	NF	Carved out to state			Carved out to state	A dipeptidyl peptidase 1 (DPP1) inhibitor indicated for the treatment of non-cystic fibrosis bronchiectasis in adult and pediatric patients ages 12 and older.
Cibinqo® (abrocitinib) tablet	NF	NF	Carved out to state	Topical corticosteroids: augmented betamethasone, clobetasol propionate Non-steroidal topical: tacrolimus, pimecrolimus	Topical corticosteroids: augmented betamethasone, clobetasol propionate	Carved out to state	A Janus kinase (JAK) inhibitor indicated for the treatment of adults and pediatric patients ages age and older with refractory, moderate-to-severe atopic dermatitis whose disease is not adequately controlled with other systemic drug products, including biologics, or when use of those therapies is inadvisable.

¹Medicare Part D: Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP), Wellcare Low Premium (HMO), Wellcare Simple Focus (HMO), Wellcare Simple Ruby (HMO), Wellcare Premium Ultra (HMO), Wellcare Specialty Simple (HMO C-SNP), Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP).

NF indicates nonformulary; NP indicates nonpreferred. These medications require member-specific medical reasons why formulary medications cannot be considered. Requests are reviewed via Health Net's prior authorization process.

Health Net Commercial Drug Lists, Medicare Part D Formulary and Medi-Cal medication benefit changes, *continued*

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

Oral preparation

Hernexeos® (zongertinib) tablet	NF	NF	Carved out to state			Carved out to state	A kinase inhibitor indicated for the treatment of adult patients with unresectable or metastatic non-squamous non-small cell lung cancer whose tumors have human epidermal growth factor receptor 2 (also known as ERBB2) tyrosine kinase domain activating mutations, as detected by an FDA-approved test, and who have received prior systemic therapy.
Modeyso™ (dordaviprone) capsule	NF	NF	Carved out to state	Etoposide, temozolomide, Gleostine®		Carved out to state	A protease activator indicated for the treatment of adult and pediatric patients ages 1 and older with diffuse midline glioma harboring an H3 K27M mutation with progressive disease following prior therapy.
Wayrilz™ (rilzabrutinib) tablet	NF	NF	Carved out to state	Dexamethasone, methyl-prednisolone, prednisone	Dexamethasone, methyl-prednisolone, prednisone	Carved out to state	A kinase inhibitor indicated for the treatment of adult patients with persistent or chronic immune thrombocytopenia who have had an insufficient response to a previous treatment.

¹Medicare Part D: Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP), Wellcare Low Premium (HMO), Wellcare Simple Focus (HMO), Wellcare Simple Ruby (HMO), Wellcare Premium Ultra (HMO), Wellcare Specialty Simple (HMO C-SNP), Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP).

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Health Net Commercial Drug Lists, Medicare Part D Formulary and Medi-Cal medication benefit changes, *continued*

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

Ophthalmic preparation

Vizz™ (aceclidine ophthalmic solution) 1.44%, topical ophthalmic	NF	NF	Carved out to state			Carved out to state	A cholinergic agonist indicated for the treatment of presbyopia in adults.
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Topical preparation

Anzupgo® (delgocitinib) cream	NF	NF	Carved out to state	Topical corticosteroids: augmented betamethasone, fluocinonide acetone, desoximetasone Non-steroidal topical: tacrolimus, pimecrolimus	Topical corticosteroids: augmented betamethasone, fluocinonide acetone	Carved out to state	A Janus kinase inhibitor indicated for the topical treatment of moderate to severe chronic hand eczema in adults who have had an inadequate response to, or for whom topical corticosteroids are not advisable.
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NF indicates nonformulary; NP indicates nonpreferred. These medications require member-specific medical reasons why formulary medications cannot be considered. Requests are reviewed via Health Net's prior authorization process.

Health Net Commercial Drug Lists, Medicare Part D Formulary and Medi-Cal medication benefit changes, *continued*

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

Injectable preparation

Adbry® (tralokinumab-ldrm) single-dose prefilled syringe/ autoinjector	Medical benefit ²	Medical benefit ²	Medical benefit ²	Topical corticosteroids: augmented betamethasone, clobetasol propionate Non-steroidal topical: tacrolimus, pimecrolimus	Topical corticosteroids: augmented betamethasone, clobetasol propionate	Carved out to state	An interleukin-13 antagonist indicated for the treatment of moderate-to-severe atopic dermatitis in adults and pediatric patients ages 12 and older whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable. Adbry can be used with or without topical corticosteroids.
Ebglyss™ (lebrikizumab-lbkz), single-dose, prefilled pen/ syringe	Medical benefit ²	Medical benefit ²	Medical benefit ²	Topical corticosteroids: augmented betamethasone, clobetasol propionate Non-steroidal topical: tacrolimus, pimecrolimus	Topical corticosteroids: augmented betamethasone, clobetasol propionate	Carved out to state	An interleukin-13 antagonist indicated for the treatment of adults and pediatric patients ages 12 and older who weigh at least 40 kg with moderate-to-severe atopic dermatitis. whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable. Ebglyss can be used with or without topical corticosteroids.

¹Medicare Part D: Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP), Wellcare Low Premium (HMO), Wellcare Simple Focus (HMO), Wellcare Simple Ruby (HMO), Wellcare Premium Ultra (HMO), Wellcare Specialty Simple (HMO C-SNP), Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP).

²Prior authorization is required to verify that the member is eligible and satisfies clinical protocols to ensure appropriate use of the medication.

Health Net Commercial Drug Lists, Medicare Part D Formulary and Medi-Cal medication benefit changes, *continued*

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

Injectable preparation

Nemluvio® (nemolizumab-ilto) single-dose prefilled pen	Medical benefit ²	Medical benefit ²	Medical benefit ²	Prurigo Nodularis/ Atopic Dermatitis: Topical corticosteroids: augmented betamethasone, clobetasol propionate Atopic Dermatitis: Non-steroidal topical: tacrolimus, pimecrolimus	Prurigo Nodularis/ Atopic Dermatitis: Topical corticosteroids: augmented betamethasone, clobetasol propionate	Carved out to state	An interleukin-31 receptor antagonist indicated for: <ul style="list-style-type: none"> • Prurigo Nodularis: The treatment of adults with prurigo nodularis. • Atopic Dermatitis: The treatment of adults and pediatric patients ages 12 and older with moderate-to-severe atopic dermatitis in combination with topical corticosteroids and/or calcineurin inhibitors when the disease is not adequately controlled with topical prescription therapies.
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¹Medicare Part D: Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP), Wellcare Low Premium (HMO), Wellcare Simple Focus (HMO), Wellcare Simple Ruby (HMO), Wellcare Premium Ultra (HMO), Wellcare Specialty Simple (HMO C-SNP), Wellcare CalViva Health Dual Align (HMO D-SNP), Wellcare Dual Align (HMO D-SNP), Wellcare Dual Liberty (HMO D-SNP).

²Prior authorization is required to verify that the member is eligible and satisfies clinical protocols to ensure appropriate use of the medication.