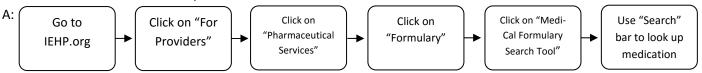
Inland Empire Health Plan

FAQ for Medi-Cal Members

Q: How do I access the formulary table for IEHP Medi-Cal members?



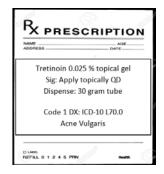
Q: What is a Code 1 medication?

A: Code 1 medication is a list of formulary drugs with restrictions that can be processed at the pharmacy level without an authorization if restrictions are met. These medications are restricted to specific criteria such as age, quantity, drug therapy, drug duration and type of illness. Please see example below:

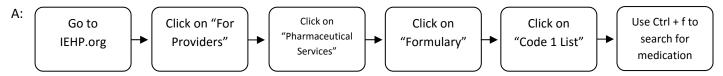
Retin-A Tretinoin	0.025% topical gel	Restricted to use in the treatment of acne vulgaris
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Q: Why does a provider need to write on the prescription that code 1 requirements have been met?

A: If medication is considered Code 1, Providers should document the Code 1 description on the prescription to allow the pharmacy to process the prescription. If Code 1 requirements are not met, Provider will need to submit a "Prescription Drug Prior Authorization Form" for the prescribed medication. Please see example below on how to document Code 1:



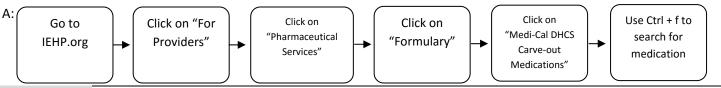
Q: Where can I access the Code 1 medication list?



Q: What are DCHS carve-out medications?

A: Drugs that are non-capitated (not IEHP's responsibility) or carved out of Managed Care Plans (i.e. Seroquel XR). Carveout medications may pay at the pharmacy under Medi-Cal Fee-for-service (FFS). If not a Formulary medication for Medi-Cal a Treatment Authorization Request (TAR) will need to be submitted to Medi-Cal for approval.

Q: Where can I access the DCHS Carve-out medication list?



A Public Employee

FAQ for Medi-Cal Members

Q: What does Formulary without Prior Authorization mean?

A: Formulary without a Prior Authorization means the drug will process at the pharmacy if the medication prescribed is within formulary quantity limits and day supply. You will not have to submit a prior authorization for review.

Q: What does Formulary with Prior Authorization mean?

A: Formulary with a Prior Authorization means the prescribed medication will not process at the pharmacy and will require a Prior Authorization to be submitted to IEHP for review. Please go to www.IEHP.org or the Provider Portal to submit.

Q: What is a Step Therapy medication?

A: Step Therapy is a formulary medication that requires the Member to try one or more drugs. Once Step Therapy criteria has been met; the drug will pay at the pharmacy level <u>without</u> a Prior Authorization at the pharmacy. Please see example below:

Januvia	Sitagliptin	iptin Tablet 100 mg	Step Therapy Applies: Tried or clinically significant adverse effect to a metformin-containing product

Q: How often are the Formulary table and PA table updated for Medi-Cal line of business?

A: The IEHP Formulary and PA table are continually updated to reflect the most appropriate and cost-effective drug therapies. IEHP Pharmacy and Therapeutics (P & T) Subcommittee develops and monitors the Formulary. Changes are made quarterly, so please reference quarterly for updates.

Q: How can I access the Prior Authorization criteria for Medi-Cal members?



Q: What is a Floor Stock medication?

A: A medication that is available in the medical office without the need for a pharmacy to dispense. Physicians can administer these medications and submit a manual claim for reimbursement. These medications do not require preapproval (prior authorization) prior to administration.

Q: How do I know if a Prior Authorization has been approved?

A: You can log into the provider portal click on Claims Status under the Referrals tab and then click on Status. You will enter the Members' IEHP ID, Social Security Number (SSN), Client Identification Number (CIN), or Referral number to check status.