

The focus of this guide is to assist you with accessing the IEHP criteria for formulary medications. Formulary medications generally do not require a prior authorization. However, some medications have an associated restriction, such as Quantity Limit, Code 1, or Step Therapy.

Definition of key terms:

Age Restriction – medications that are formulary if a Member is within a certain age

Claim Rejection – pharmacy does not receive a paid claim when billing a medication through the Member's insurance, reasons such as prior authorization needed, generic required, or quantity limit.

Code 1 – refers to criteria for a medication that if met, would allow the medication to be covered at the pharmacy level without a prior authorization

DHCS – Department of Health Care Services

Floor Stock – medication that does not require pre-approval prior to administration. Physician can administer medication and submit a manual claim for reimbursement

Formulary Medication – medication that is approved by the health plan to reflect the most appropriate, high quality, and cost-effective drug therapies

Maintenance Drug – a drug that can be processed for a maximum of a 3-month supply

Non-Capitated or Carve-Out Medication – a medication that is not reimbursed by managed care plans, such as IEHP, and should be billed to Fee-for-service (FFS) Medi-Cal for payment

Not Covered – refers to a medication that does not qualify for reimbursement under IEHP

Office Stock – medication that is available in the medical office without the need for a pharmacy to dispense

Prior Authorization – a process for requesting more information in which to determine whether a medication can be covered by IEHP

Quantity Limit – quantity of a drug that can be filled without needing a prior authorization during a specific period

Search Tool – a utility that is available on the internet to help find specific information in a database

Step Therapy – a type of criteria, often associated with trials of certain types of medications, that needs be filled before a medication can be considered formulary

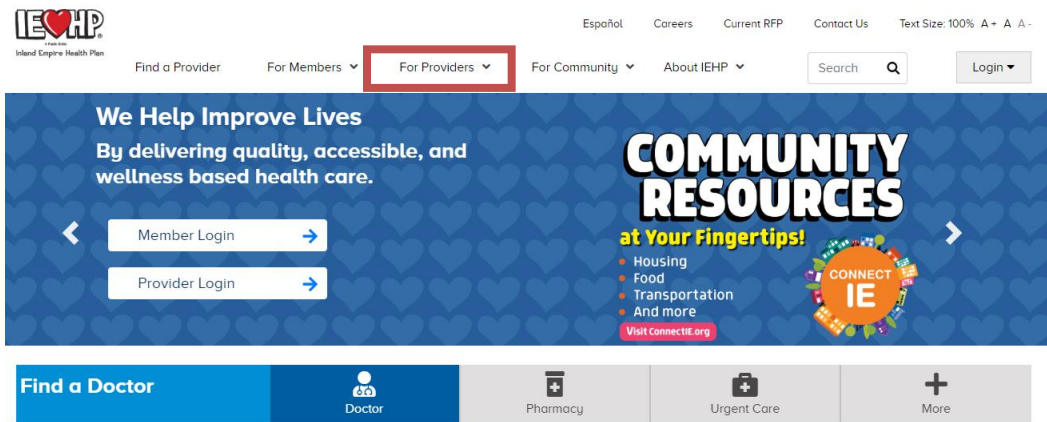
Therapeutic Class - a set of medications that have similar chemical structures and mechanism of action and are used to treat the same disease

How to access the Formulary Criteria:

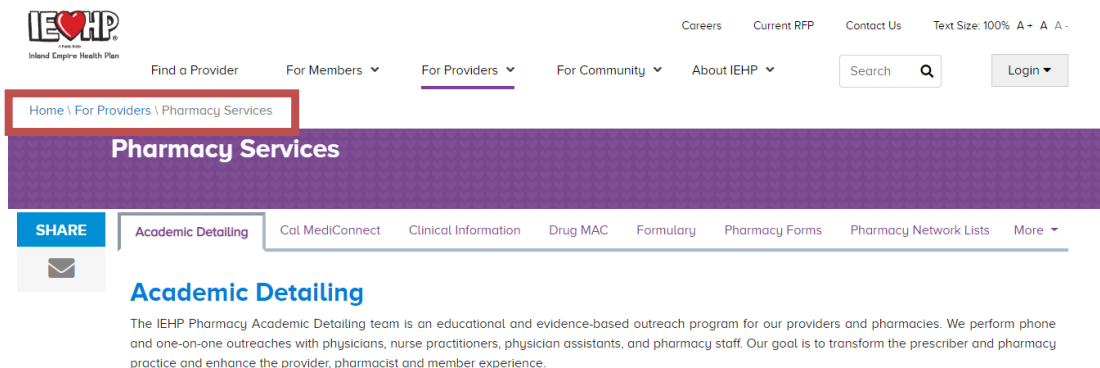
There are two ways of accessing the formulary.

Access from the IEHP Website

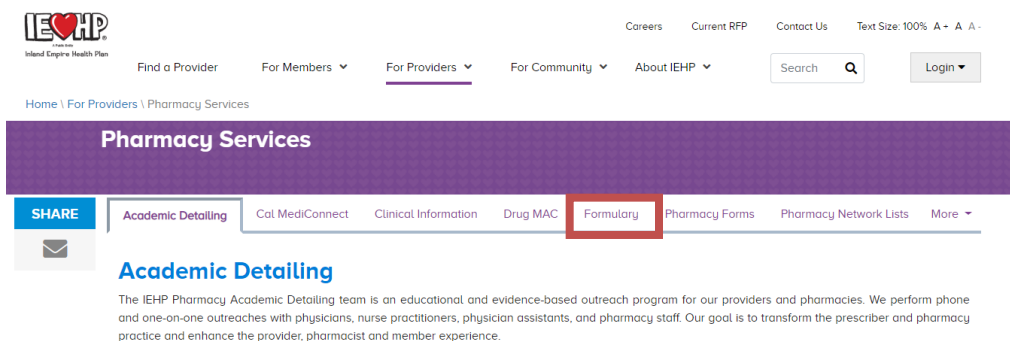
- Navigate to www.iehp.org
 - Hover over **For Providers**



- Click on **Pharmacy Services**



- Click on **Formulary**



- Click on the **Medi-Cal Formulary Search Tool** or **Dual Choice Cal MediConnect Formulary Search Tool** based on line of business.

IEHP Medi-Cal Formulary Items:

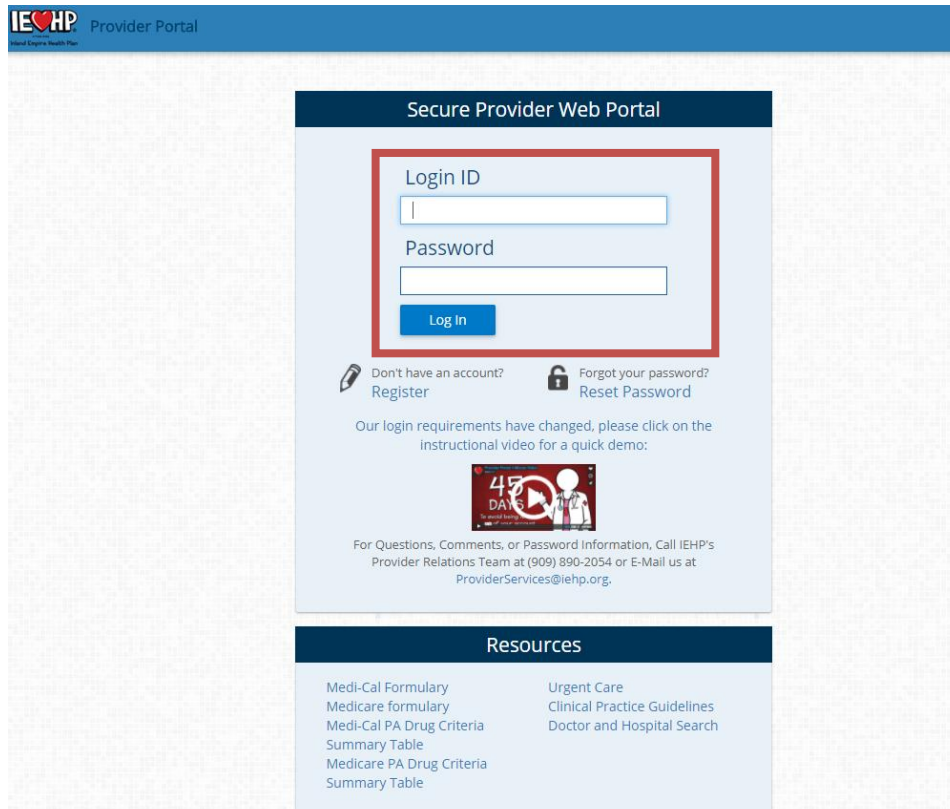
- [Medi-Cal Formulary Book](#) (PDF)
- [Code 1 List](#) (PDF)
- [Medi-Cal PA Drug Criteria Summary](#) (PDF)
- [Grievances](#)
- [Medi-Cal Formulary Search Tool](#)
- [IEHP Medi-Cal Formulary Maintenance Drug List](#) (PDF)
- [IEHP Medi-Cal Floor Stock List](#) (PDF)
- [Medi-Cal DHCS Carve-Out Medication List](#) (PDF)

IEHP DualChoice Cal MediConnect (Medicare-Medicaid Plan) Items:

- [DualChoice Cal MediConnect Formulary Book](#) (PDF)
- [Grievance Coverage Determination and Appeals Process](#)
- [DualChoice Cal MediConnect Formulary Search Tool](#)
- [IEHP DualChoice Cal MediConnect Formulary Maintenance Drug List](#) (PDF)

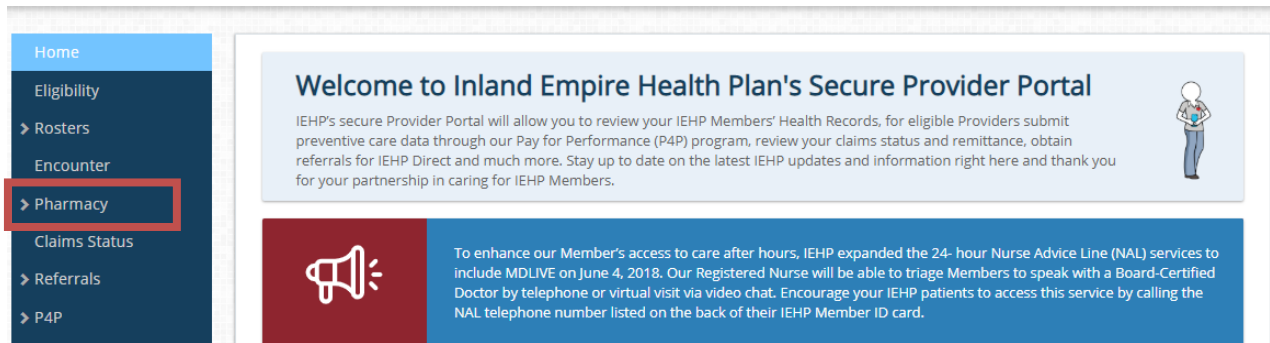
Access from the Provider Portal

- Log in to the IEHP Provider Portal
 - <https://providers.iehp.org/account/login>



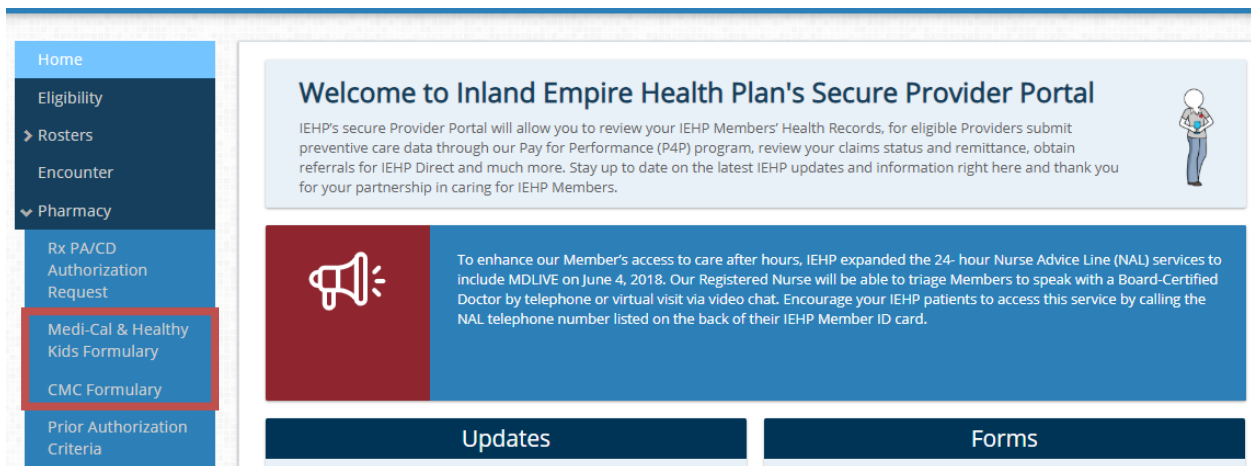
The screenshot shows the IEHP Provider Portal login page. At the top left is the IEHP logo and the text "Provider Portal". The main heading is "Secure Provider Web Portal". Below this is a login form with two input fields: "Login ID" and "Password". A red rectangular box highlights these two fields and the "Log In" button below them. Below the login form are two links: "Don't have an account? Register" and "Forgot your password? Reset Password". A message states: "Our login requirements have changed, please click on the instructional video for a quick demo:" followed by a video thumbnail titled "45 DAYS". At the bottom, contact information is provided: "For Questions, Comments, or Password Information, Call IEHP's Provider Relations Team at (909) 890-2054 or E-Mail us at ProviderServices@iehp.org." A "Resources" section at the bottom lists links for "Medi-Cal Formulary", "Urgent Care", "Medicare formulary", "Clinical Practice Guidelines", "Medi-Cal PA Drug Criteria Summary Table", and "Doctor and Hospital Search".

- Click on **Pharmacy**



The screenshot shows the 'Welcome to Inland Empire Health Plan's Secure Provider Portal' page. On the left, a navigation menu lists: Home, Eligibility, Rosters, Encounter, Pharmacy (highlighted with a red box), Claims Status, Referrals, and P4P. The main content area features a welcome message and a notification about the 24-hour Nurse Advice Line (NAL) services.

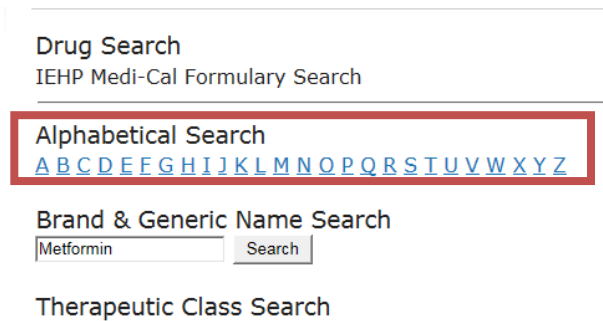
- Click on **Medi-Cal & Healthy Kids Formulary** or **CMC Formulary**, based on line of business



This screenshot shows the same 'Welcome to Inland Empire Health Plan's Secure Provider Portal' page. The navigation menu on the left is expanded under 'Pharmacy' to include: Rx PA/CD Authorization Request, Medi-Cal & Healthy Kids Formulary (highlighted with a red box), CMC Formulary (highlighted with a red box), and Prior Authorization Criteria. The main content area remains the same, including the welcome message and the NAL notification.

Interpreting the Formulary Criteria:

- A medication can be searched for by using an **Alphabetical Search**, **Brand & Generic Name Search** and the **Therapeutic Class Search**.
 - Alphabetical Search
 - Click on a letter in the alphabet to filter medications that start with the corresponding letter



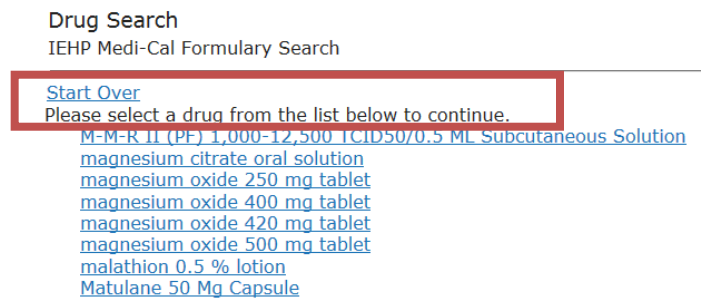
Drug Search
IEHP Medi-Cal Formulary Search

Alphabetical Search
A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Brand & Generic Name Search
Metformin Search

Therapeutic Class Search

- Select the desired drug from the list

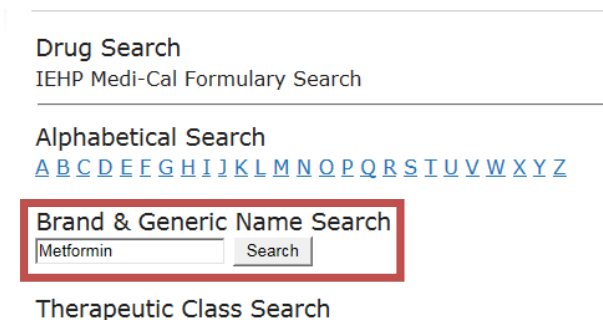


Drug Search
IEHP Medi-Cal Formulary Search

[Start Over](#)
Please select a drug from the list below to continue.

[M-M-R II \(PF\) 1,000-12,500 IU/0.5 ML Subcutaneous Solution](#)
[magnesium citrate oral solution](#)
[magnesium oxide 250 mg tablet](#)
[magnesium oxide 400 mg tablet](#)
[magnesium oxide 420 mg tablet](#)
[magnesium oxide 500 mg tablet](#)
[malathion 0.5 % lotion](#)
[Matulane 50 Mg Capsule](#)

- Brand & Generic Name Search
 - Enter the brand or generic name of a drug in the **Brand & Generic Name Search**. If a drug cannot be located, then the drug is not on IEHP’s formulary



Drug Search
IEHP Medi-Cal Formulary Search

Alphabetical Search
A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Brand & Generic Name Search
Metformin Search

Therapeutic Class Search

- Select appropriate strength desired.

Drug Search [Main Content](#)

IEHP Medi-Cal Formulary Search

[Start Over](#)

Please select a drug from the list below to continue.

[alogliptin 12.5 mg-metformin 1,000 mg tablet](#)
[alogliptin 12.5 mg-metformin 500 mg tablet](#)
[glipizide 2.5 mg-metformin 250 mg tablet](#)
[glipizide 2.5 mg-metformin 500 mg tablet](#)
[glipizide 5 mg-metformin 500 mg tablet](#)
[glyburide 1.25 mg-metformin 250 mg tablet](#)
[glyburide 2.5 mg-metformin 500 mg tablet](#)
[glyburide 5 mg-metformin 500 mg tablet](#)
[metformin 1,000 mg tablet](#)
[metformin 500 mg tablet](#)
[metformin 850 mg tablet](#)
[metformin er 500 mg tablet,extended release 24 hr](#)
[metformin er 750 mg tablet,extended release 24 hr](#)

- Therapeutic Class Search
 - Select a desired drug from the list.

Drug Search

IEHP Medi-Cal Formulary Search

Alphabetical Search

[A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#)

Brand & Generic Name Search

Therapeutic Class Search

- Select a subclass category from the list provided to view the list of drugs within that class.

Drug Search

IEHP Medi-Cal Formulary Search

[Start Over](#)

Please select a subclass from the list below to continue.













- [Agents To Treat Hypoglycemia \(Hyperglycemics\)](#)
- [Androgen - Single Agents](#)
- [Antidiuretic And Vasopressor Hormones](#)
- [Antihyperglycemic - Alpha-Glucosidase Inhibitors](#)
- [Antihyperglycemic - Dipeptidyl Peptidase-4 \(Dpp-4\) Inhibitors](#)
- [Antihyperglycemic - Sglt-2 Inhibitor And Biguanide Combinations](#)
- [Antihyperglycemic - Sodium Glucose Cotransporter-2 \(Sglt2\) Inhibitors](#)
- [Antihyperglycemic - Sulfonylurea And Biguanide Combinations](#)
- [Antihyperglycemic - Sulfonylurea Derivatives](#)
- [Antihyperglycemic-Dipeptidyl Peptidase-4\(Dpp-4\)Inhibitor And Biguanide](#)
- [Antithyroid Agents, Thionamides - Imidazole Derivatives](#)
- [Antithyroid Agents, Thionamides - Thiouracil Derivatives](#)

- All formulary medication within the selected therapeutic class will populate






Search Results [Main Content](#)

[Start Over](#)




Selection
 Therapeutic Class Search: analgesic, anti-inflammatory or antipyretic/analgesic or antipyretic non-narcotic
 14 drug(s) found
 To view other medications in a therapeutic class, click any class hyperlink in your search results.

Brand Name <small>Generic Name</small>	Therapeutic Class <small>Sub-class</small>	Dose/Strength	Status	Notes & Restrictions
acetaminophen 120 mg rectal suppository 	Analgesic, Anti-Inflammatory Or Antipyretic Analgesic Or Antipyretic Non-Narcotic	SUPPOSITORY 120 mg		 more info
acetaminophen 160 mg/5 ml (5 ml) oral solution 	Analgesic, Anti-Inflammatory Or Antipyretic Analgesic Or Antipyretic Non-Narcotic	SOLUTION 160 mg/5 mL (5 mL)		 more info
acetaminophen 160 mg/5 ml oral elixir 	Analgesic, Anti-Inflammatory Or Antipyretic Analgesic Or Antipyretic Non-Narcotic	ELIXIR 160 mg/5 mL		 more info
acetaminophen 160 mg/5 ml oral liquid 	Analgesic, Anti-Inflammatory Or Antipyretic Analgesic Or Antipyretic Non-Narcotic	LIQUID 160 mg/5 mL		 more info









- Once the desired medication has been selected, you will be navigated to the formulary table. The Formulary table is comprised of the following sections:
 - Brand Name
 - Therapeutic Class
 - Dose/Strength
 - Status
- Formulary without Prior Authorization:** If the Notes & Restrictions field is empty, the medication is covered without a prior authorization needed.
- Formulary with Prior Authorization:** Please consult the **Medi-Cal PA Drug Criteria Summary Table** for additional criteria information.
- Formulary with Code 1:** Click on “more info” under Notes & Restrictions field to view the Code 1 criteria. The pharmacy can override the rejection without needing a prior authorization if Code 1 criteria is met
- Notes & Restrictions:** Click on “more info” to view details of various restrictions and prescriber notes
- When submitting an authorization for a medication that has a restriction, please address the restriction upon submission. If a pharmacy is still receiving a claim rejection for a medication that does not have a restriction, please submit the authorization with documentation of the type of rejection the pharmacy is receiving.

Brand Name	Therapeutic Class	Dose/Strength	Status	Notes & Restrictions
Generic Name	Sub-class			
alogliptin 12.5 mg tablet 	Endocrine Antihyperglycemic - Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors	TABLET 12.5 mg	 Formulary	 more info  more info  more info

Definition of Status

Icon	Status	Definition
	Formulary	Formulary without Prior Authorization
	Formulary - Prior Authorization	Formulary with Prior Authorization
	Formulary - Code 1 Drug	Formulary with Code 1

Definition of Restrictions

Icon	Restriction	Definition
	12 MO	Up to a 12-month Supply Allowed
	Age Restriction	Age Restriction
	Generic Indicator	Generic Indicator
	Prescriber Note	Prescriber Note
	Prior Authorization	Prior Authorization
	Quantity Limit	Quantity Limit
	Specialty Pharmacy	Specialty Pharmacy
	Step Therapy	Step Therapy

If the strength desired is not available, please consult the **Medi-Cal PA Drug Criteria Summary Table**. If it is still not available, please submit authorization with justification of need versus using the available formulary strengths.

For all questions, comments, or concerns regarding the PA Drug Treatment Criteria table, please call (888) 860-1297.