



**Changes to the CalOptima Health Medi-Cal Physician Administered Drug (PAD) PA List and
OneCare Formulary
Pharmacy & Therapeutics Committee Meeting
May 18, 2023**

Effective Dates	Brand Name†	Generic Name	Drug Class	Strength	Dosage Form	Committee Action for Medi-Cal PAD PA List	Committee Action for OneCare Formulary
7/1/23	Tazorac	tazarotene	Topical Skin Product	0.05 %, 0.1 %	Cream, Gel	N/A	Formulary QL: 60/30 days
7/1/23	Zoryve	roflumilast	Plaque Psoriasis	0.3 %	Cream	N/A	PA Required
7/1/23	Sotyktu	deucravacitinib	Plaque Psoriasis	6 mg	Tablet	N/A	PA Required QL: 30/30 days
7/1/23	Relyvrio	sodium phenylbutyrate/taurursodiol	ALS	3 g/1 g	Packet	N/A	PA Required QL: 56/28 days
7/1/23	Toviaz	fesoterodine ER	Muscarinic Antagonist	4 mg, 8 mg	Tablet	N/A	Formulary QL: 30/30 days
7/1/23	Gelnique	oxybutynin	Muscarinic Antagonist	10 %	Gel	N/A	Non-Formulary
7/1/23	Oxytrol	oxybutynin	Muscarinic Antagonist	3.9 mg/24 hour	Patch	N/A	Non-Formulary
7/1/23	Vesicare	solifenacin	Muscarinic Antagonist	5 mg, 10 mg	Tablet	N/A	Formulary QL: 30/30 days
7/1/23	Myrbetriq	mirabegron	Beta-3 Adrenergic Agonist	25 mg, 50 mg	Tablet	N/A	Change in Step Therapy
7/1/23	Jaypirca	pirtobrutinib	Antineoplastic	50 mg, 100 mg	Tablet	N/A	PA Required NSO QL: 30/30 days (50 mg), 60/30 days (100 mg)
7/1/23	Lunsumio	mosunetuzumab	Antineoplastic	1 mg/mL	Solution	PA Required	PA Required NSO
7/1/23	Orserdu	elacestrant hydrochloride	Antineoplastic	86 mg, 345 mg	Tablet	N/A	PA Required NSO QL: 30/30 days (345 mg), 90/30 days (86 mg)
7/1/23	Sunlenca	lenacapavir	Antiretroviral	300 mg, 463.5 mg/1.5 mL	Tablet, Solution	PA Required	Tablet: Formulary QL: 4/2 days (4 tablet blister pack) and 5/8 days (5 tablet blister pack)



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							Injection: PA Required NSO
7/1/23	Vegzelma	bevacizumab-adcd	Antineoplastic	25 mg/mL	Solution	PA Required	PA Required NSO

ALS=Amyotrophic Lateral Sclerosis, ER=Extended Release, N/A=Not Applicable, PA = Prior Authorization, QL = Quantity Limit, NSO=New Starts Only