



January 2009 Pharmacy Therapeutics and New Technology Committee Meeting

These changes apply to all LA Care Lines of Business (LA Care Medi-Cal, Healthy Kids, and Healthy Families) unless specified. Changes apply to all strengths and oral dosage forms, unless specified. Effective 02/25/09.

Drug	Committee Decision
Singulair	Age restriction modified from Age ≥ 15 to AGE ≥ 10 . If member is ≥ 10 years old, requires trial of oral inhaled corticosteroid.
Oxybutynin ER	Step therapy added; requires trial of Oxybutynin IR. If ≥ 65 years old, step therapy not required.
Enablex	Remove from formulary; allow grandfathering.
Serevent Diskus	Remove from formulary; allow grandfathering.
Foradil	Remove from formulary; allow grandfathering.
Stalevo	All strengths should be on formulary with Step Therapy of generic carbidopa/levodopa
Prezista 400mg	Add to formulary with PA for HK/HF only; carve-out medication for Medi-Cal.
Topical Benzoyl Peroxide Products	Add all generic federal legend and OTC benzoyl peroxide products to formulary.