



## Managed Medi-Cal Prescription Drug Carve-Outs Provider Reference Sheet

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### What is a carve-out medication?

Carve-out medications are drugs that are **NOT** covered by Alameda Alliance for Health (Alliance) but may be covered by Medi-Cal directly and billed through the Medi-Cal Fee-For-Service (FFS) program. The “carve-out” drug will be billed to the state by the members’ pharmacy **OR** from the provider office for medical billing of injectable or infusion. (See attached list for specific drugs).

### There are four (4) classes of medication that are carved out:

1. Human Immunodeficiency Virus (HIV) and AIDS treatment and prevention
2. Hemophilia treatments and medications
3. Certain psychotherapeutic drugs
4. Drugs that help treat substance abuse (e.g., Suboxone, Narcan, Naltrexone, Antabuse)

**Carve-out drugs are identified by active ingredients and not by indication. For example, if tenofovir was billed for Hepatitis B rather than HIV, the Alliance will deny it because it is a carve-out and needs to be billed for FFS.**

### What is the process for a carve-out drug paid claim?

- Pharmacy or provider’s office bills FFS:
  - Pharmacies will submit the claim using:  
**BIN: 610442; PCN: 147CAPA.**
  - Pharmacies will encounter Argus error code 012: This item is **EXCLUDED** under this plan.
  - Medi-Cal will bill with a specific J-code
  - *Please note that the Alliance and our pharmacy benefit manager, PerformRx, cannot assist with resolving carve-out drug claim issues since the claim is not billed to us. We can only direct you to call the Medi-Cal Pharmacy Help Desk toll-free at **1.800.572.9315**.*
- Some drugs may require approval through **Treatment Authorization Request (TAR)**. Pharmacies and provider offices can now electronically fax the form to the state.
  - If the pharmacy or provider’s office are unable to electronically fax the form, they may print out the form and manually fax the form to: **1.800.829.4325** or **1.800.641.1021**
  - The form is available on the state website: **files.medi-cal.ca.gov/pubsdoco/forms.asp**
  - Pharmacies, provider offices, or patients can check the TAR status by calling the Medi-Cal Pharmacy Help Desk toll-free at **1.800.572.9315**.
- Pharmacies and provider offices will know when they receive a paid claim upon submitting the claim to Medi-Cal and can notify the member.

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**Questions?** Please call the Alliance Pharmacy Services Department  
Monday – Friday, 7:30 am – 5 pm  
Phone Number: **1.510.747.4541**  
**www.alamedaalliance.org**

ALAMEDA  
**Alliance**  
FOR HEALTH

The following medications are carved-out from Medi-Cal Managed Care Plans and should be billed directly to Medi-Cal fee-for-service (FFS). This list does not include all carved out drugs. Questions about drugs not included on this list should be directed to the Alliance Pharmacy Services Department at 1.510.747.4541. Highlighted drugs are new additions to the list. Last Updated: 10/11/2019

**ANTI-PSYCHOTICS\***

Aripiprazole (**Abilify**)  
Aripiprazole lauroxil (**Aristada Initio**)\*  
Asenapine (**Saphris**)  
Brexpiprazole (**Rexulti**)\*  
Cariprazine (**Vraylar**)\*  
Chlorpromazine (**Thorazine**)  
Clozapine (**Clozaril, Fazaclio**)  
Fluphenazine PO/IV (**Prolixin**)\*  
Haloperidol (**Haldol**)  
Iloperidone (**Fanapt**)  
Loxapine (**Loxitane**)  
Lurasidone (**Latuda**)  
Molindone  
Olanzapine (**Zyprexa, Zyprexa Relprevv**)  
Paliperidone (**Invega, Invega Sustenna, Invega Trinza**)\*  
Perphenazine (**Trilafon**)  
Phenelzine Sulfate\*  
Pimavanserin (**Nuplazid**)\*  
Pimozide (**Orap**)\*  
Quetiapine (**Seroquel, Seroquel XR**)  
Risperidone (**Risperdal, Risperdal Consta**)\*  
Risperidone ER injectable suspension (**Perserix**)\*  
**Risperidone microsphere\***  
Thioridazine (**Mellaril**)\*  
Trifluoperazine (**Stelazine**)  
Ziprasidone HCl (**Geodon**)  
Ziprasidone Mesylate (**Geodon IM**)\*

**ANTI-RETROVIRALS (HIV)**

Abacavir Sulfate (**Ziagen**)  
Abacavir/Dolutegravir/Lamivudine (**Triumeq**)  
Abacavir/Lamivudine (**Epzicom**)  
Atazanavir Sulfate (**Reyataz**)  
Atazanavir/Cobicistat (**Evotaz**)  
Bictegravir/Emtricitabine/Tenofovir/Alafenamide (**Biktarvy**)  
Cobicistat (**Tybost**)  
Darunavir Ethanolate (**Prezista**)

**ANTI-RETROVIRALS (HIV) (continued)**

Darunavir/Cobicistat (**Prezcobix**)  
Darunavir/Cobicistat/Emtricitabine/Tenofovir Alafenamide (**Symtuza**)  
Delavirdine Mesylate (**Rescriptor**)  
Dolutegravir (**Tivicay**)  
Dolutegravir/Lamivudine (**Dovato**)  
Dolutegravir/Rilpivirine (**Juluca**)  
Doravine (**Pifeltro**)  
Doravirine/Lamivudine/Tenofovir disoproxil fumarate (**Delstrigo**)  
Efavirenz (**Sustiva**)  
Efavirenz/Emtricitabine/Tenofovir (**Atripla**)  
Efavirenz/Lamivudine/Tenofovir Disoproxil Fumarate (**Symfi LO, Symfi**)  
Elvitegravir (**Vitekta**)  
Elvitegravir/Cobicistat/Emtricitabine/Tenofovir alafenamide (**Genvoya**)  
Elvitegravir/Cobicistat/Emtricitabine/Tenofovir Disoproxil Fumarate (**Stribild**)  
Emtricitabine (**Emtriva**)  
Emtricitabine/Rilpivirine/ Tenofovir (**Complera**)  
Emtricitabine/Rilpivirine/Tenofovir alafenamide (**Odefsev**)\*  
Enfuvirtide (**Fuzeon**)\*  
Etravirine (**Intelence**)  
Fosamprenavir Calcium (**Lexiva**)  
Ibalizumab-uiyk (**Trogarzo**)  
Indinavir Sulfate (**Crixivan**)  
Lamivudine (**Epivir**)  
Lamivudine/Tenofovir disoproxil fumarate (**Cimduo**)\*  
Lopinavir/Ritonavir (**Kaletra**)  
Maraviroc (**Selzentry**)  
Nelfinavir Mesylate (**Viracept**)  
Nevirapine (**Viramune**)  
Raltegravir Potassium (**Isentress**)  
Rilpivirine Hydrochloride (**Edurant**)  
Ritonavir (**Norvir**)  
Saquinavir (**Fortovase**)  
Saquinavir Mesylate (**Invirase**)  
Stavudine (**Zerit**)  
Tenofovir Alafenamide (**Vemlidy**)  
Tenofovir Disoproxil Fumarate (**Viread**)  
Tenofovir Disoproxil/Emtricitabine (**Truvada**)

**ANTI-RETROVIRALS (HIV) (continued)**

Tipranavir (**Aptivus**)  
Zidovudine/Lamivudine (**Combivir**)  
Zidovudine/Lamivudine/ Abacavir (**Trizivir**)

**DRUG DEPENDENCY TREATMENT**

Acamprosate (**Campral**)  
Buprenorphine (**Subutex, Butrans, Belbuca**)  
Buprenorphine ER injection (**Sublocade**)  
Buprenorphine implant (**Probuphine**)\*  
Buprenorphine/Naloxone (**Suboxone**)  
Disulfiram (**Antabuse**)  
Lofexidine HCl (**Lucemyra**)\*  
Naloxone HCl Injection (**Narcan, Evizio**)  
Naloxone Nasal Spray (**Narcan Nasal**)  
Naltrexone PO/IV (**Revia, Vivitrol**)

**ERECTILE DYSFUNCTION**

Sildenafil (**Viagra**)\*\*  
Tadalafil (**Cialis**)\*\*  
Vardenafil (**Levitra**)\*\*

**MISCELLANEOUS DRUGS**

Amantadine (**Symmetrel**)  
Amantadine HCl ER (**Gocovri**)\*  
Benztropine (**Cogentin**)  
Selegiline (**transdermal-Emsam**)\*  
Trihexyphenidyl (**Artane**)

**MOOD DISORDER**

Isocarboxazid (**Marplan**)\*  
Lithium (**Eskalith, Eskalith CR**)  
Olanzapine/Fluoxetine (**Symbyax**)\*  
Phenelzine (**Nardil**)\*  
Thiothixene (**Navane**)  
Tranylcypromine (**Parnate**)\*

\*Some medications may require approval through a Treatment Authorization Request (TAR). Antipsychotics for members under 18 years of age requires a TAR.

\*\*Excluded from Medi-Cal Benefit.

Forms are available at [files.medi-cal.ca.gov/pubsdoco/forms.asp](https://files.medi-cal.ca.gov/pubsdoco/forms.asp). TAR requests should be faxed to 1.800.829.4325 or 1.800.641.1021. TAR Status Request Line: 1.800.572.9315.

PO = Oral, IV = Intravenous, IM = Intramuscular



## BLOOD FACTORS; COAGULATION FACTORS

### Blood Factor for Hemophilia-Associated Disorders

- *Anti-inhibitor*
  - **Brand Names:** Feiba NF Immuno\*
- *Antihemophilic Factor VIII/Von Willebrand Factor Complex (human)*
  - **Brand Names:** Alphanate, Wilate
- *Antihemophilic Agent/monoclonal antibody*
  - **Brand Names:** Hemlibra (Emicizumab)\*
- *Factor VIIa (recombinant):*
  - **Brand Names:** Novoseven\*
- *Factor VIII (human);*
  - **Brand Names:** Advate\*, Adynovate\*, Hemofil M\*, Humate-P\*, Koate-DVI\*, Monoclote-P\*, Obizur\*
- *Factor VIII (recombinant);*
  - **Brand Names:** Advate\*, Afstyla\*, Eloctate, Helixate\*, Idelvion\*, Jivi, Kogenate\*, Kovaltry, Novoeight\* Nuwiq, Xyntha
- *Factor IX (human);*
  - **Brand Names:** Bebulin\*, Profilnine
- *Factor IX (non-recombinant);*
  - **Brand Names:** Alphanine, Mononine\*
- *Factor IX (recombinant);*
  - **Brand Names:** Alprolix, Benefix, Idelvion\*, Ixinity\*, Rebinyn\*, Rixubis\*
- *Factor X (human);*
  - **Brand Names:** Coagadex\*
- *Factor XIII (human);*
  - **Brand Names:** Corifact\*
- *Factor XIIIa (recombinant);*
  - **Brand Names:** Tretten\*
- *Von Willebrand Factor (human)*
  - **Brand Names:** Humate\*, Vonvendi\*

**NOTE:** Not all factor products listed, but **all are carved out.**

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