



December 1, 2020

January 1, 2020 all MCO's were required to adopt the Illinois HFS Preferred Drug List to align with the Fee for Service program. Those members that enrolled in the MCO and stabilized on specific medications were grandfathered for an initial one-year period. Beginning January 1, 2021, the following agents will no longer be grandfathered. The list below details which agents will no longer be grandfathered and the preferred drugs for transitioning members to new options.

Link to CountyCare Formulary for review:

http://www.countycare.com/Media/Default/pdf/2020/CCX01_CCX1A_10012020_v11_October20.pdf

GENERIC NAME	THERAPEUTIC CLASS	DRUG ALTERNATIVE	PA REQUIRED (YES/NO)
D-AMPHETAMINE SULFATE	ADRENERGICS, AROMATIC, NON-CATECHOLAMINE	GENERIC AMPHETAMINE/DEXTROAMPHETAMINE and BRAND VYVANSE	NO
ENZALUTAMIDE	ANTIANDROGENIC AGENTS	GENERIC BICALUTAMIDE AND FLUTAMIDE AND NILUTAMIDE	NO
ABIRATERONE ACETATE	ANTIANDROGENIC AGENTS	GENERIC ABIRATERONE ACETATE	NO
UMECLIDINIUM BROMIDE	ANTICHOLINERGICS, ORALLY INHALED LONG ACTING	BRAND ATROVENT AND BRAND SPIRIVA AND GENERIC IPRATROPIUM	NO
ACLDINIUM BROMIDE	ANTICHOLINERGICS, ORALLY INHALED LONG ACTING	BRAND ATROVENT AND BRAND SPIRIVA AND GENERIC IPRATROPIUM	NO
CLONAZEPAM	ANTICONSULSANT - BENZODIAZEPINE TYPE	GENERIC CLONAZEPAM	NO
GABAPENTIN	ANTICONSULSANTS	GENERIC GABAPENTIN	NO
PREGABALIN	ANTICONSULSANTS	GENERIC PREGABALIN	NO
ALOGLIPTIN BENZ/METFORMIN HCL	ANTIHYPYERGLY, (DPP-4) INHIBITOR & BIGUANIDE COMB.	BRAND TRADJENTA AND GENERIC METFORMIN	NO
PRAMLINTIDE ACETATE	ANTIHYPYERGLYCEMIC, AMYLIN ANALOG-TYPE	BRAND BYETTA	NO
ALOGLIPTIN BENZOATE	ANTIHYPYERGLYCEMIC, DPP-4 INHIBITORS	BRAND TRADJENTA AND BRAND JANUVIA	NO
REPAGLINIDE	ANTIHYPYERGLYCEMIC, INSULIN-RELEASE STIMULANT TYPE	GENERIC NATEGLINIDE	NO
PIOGLITAZONE HCL/METFORMIN HCL	ANTIHYPYERGLYCM,INSUL-RESP.ENHANCER & BIGUANIDE CMB	BRAND AVANDIA AND GENERIC METFORMIN	NO
IPRATROPIUM/ALBUTEROL SULFATE	BETA-ADRENERGIC AND ANTICHOLINERGIC COMBINATIONS	BRAND BEVESPI	NO
FLUTICASONE/SALMETEROL	BETA-ADRENERGIC AND GLUCOCORTICOID COMBINATIONS	BRAND DULERA AND WIXELA	NO
FLUTICASONE/VILANTEROL	BETA-ADRENERGIC AND GLUCOCORTICOID COMBINATIONS	BRAND DULERA AND WIXELA	NO
BECLMETHASONE DIPROPIONATE	GLUCOCORTICIDS, INHALED	BRAND FLOVENT DISKUS/HFA AND BRAND ASMANEX TWISTHALER	NO
BUDESONIDE	GLUCOCORTICIDS, INHALED	BRAND FLOVENT DISKUS/HFA AND BRAND ASMANEX TWISTHALER	NO
MEDROXYPROGESTERONE ACET	PROGESTINS	GENERIC MEDROXYPROGESTERONE ACETATE	NO
RIVASTIGMINE	CHOLINESTERASE INHIBITORS	GENERIC DONEPEZIL	NO
GALANTAMINE HYDROBROMIDE	CHOLINESTERASE INHIBITORS	GENERIC DONEPEZIL	NO
RIVASTIGMINE TARTRATE	CHOLINESTERASE INHIBITORS	GENERIC DONEPEZIL	NO
MILNACIPRAN HCL	FIBROMYALGIA AGENTS,SEROTONIN-NOREPINEPH RU INHIB	GENERIC DULOXTINE	NO
CYCLOSPORINE, MODIFIED	IMMUNOSUPPRESSIVES	GENERIC CYCLOSPORINE, MODIFIED	NO
MYCOPHENOLATE MOFETIL	IMMUNOSUPPRESSIVES	GENERIC MYCOPHENOLATE MOFETIL	NO
INSULIN GLARGINE,HUM.REC.ANLOG	INSULINS	BRAND LANTUS AND BRAND LEVEMIR	NO
INSULIN LISPRO	INSULINS	BRAND HUMALOG AND GENERIC INSULIN LISPRO	NO
INSULIN ASPART	INSULINS	BRAND HUMALOG AND GENERIC INSULIN LISPRO	NO
HUM INSULIN NPH/REG INSULIN HM	INSULINS	BRAND HUMULIN 70/30	NO
INSULN ASP PRT/INSULIN ASPART	INSULINS	BRAND HUMALOG MIX 75/25, HUMALOG MIX 50/50	NO
NPH, HUMAN INSULIN ISOPHANE	INSULINS	BRAND HUMULIN N	NO
INSULIN REGULAR, HUMAN	INSULINS	BRAND HUMULIN R	NO
INSULIN ASPART (NIACINAMIDE)	INSULINS	BRAND HUMALOG AND GENERIC INSULIN LISPRO	NO
INSULIN GLULISINE	INSULINS	BRAND HUMALOG AND GENERIC INSULIN LISPRO	NO
SARILUMAB	INTERLEUKIN-6 (IL-6) RECEPTOR INHIBITORS	BRAND HUMIRA AND CIMZIA AND ENBREL	YES (HUMIRA, CIMZIA, ENBREL)
OMALIZUMAB	MONOCLONAL ANTIBODIES TO IMMUNOGLOBULIN E(IGE)	BRAND NUCALA* (For Asthma indication only*)	YES (NUCALA)
FLUTICASONE FUROATE	NASAL ANTI-INFLAMMATORY STEROIDS	GENERIC FLUTICASONE PROPRIONATE (NASAL)	NO
CLOSTAZOL	PLATELET AGGREGATION INHIBITORS	GENERIC PENTOXIFYLLINE	NO
PRASUGREL HYDROCHLORIDE	PLATELET AGGREGATION INHIBITORS	BRAND BRILINTA AND BRAND CLOPIDOGREL	YES
METHYLPHENIDATE HCL	TX FOR ATTENTION DEFICIT-HYPERACT(AHDH)/NARCOLEPSY	GENERIC METHYLPHENIDATE IR AND BRAND CONCERTA	NO
SOLIFENACIN SUCCINATE	URINARY TRACT ANTISPASMODIC, M(3) SELECTIVE ANTAG.	GENERIC OXYBUTYNIN AND GENERIC SOLIFENACIN	NO
TOLTERODINE TARTRATE	URINARY TRACT ANTISPASMODIC/ANTIINCONTINENCE AGENT	GENERIC OXYBUTYNIN AND GENERIC SOLIFENACIN	NO
TROSPIMUM CHLORIDE	URINARY TRACT ANTISPASMODIC/ANTIINCONTINENCE AGENT	GENERIC OXYBUTYNIN AND GENERIC SOLIFENACIN	NO
FLAVOXATE HCL	URINARY TRACT ANTISPASMODIC/ANTIINCONTINENCE AGENT	GENERIC OXYBUTYNIN AND GENERIC SOLIFENACIN	NO



We look forward to working with you to ensure uninterrupted care for our members. Please contact CountyCarePharmacy@cookcountyhhs.org for additional information or assistance.