

## March 2021 Pharmacy & Therapeutics Committee Decisions

UCare’s Pharmacy and Therapeutics Committee (P&T) is a group of physicians and pharmacists that meet throughout the year to make changes to UCare formularies (approved drug list). These changes are reviewed based on clinical evidence, safety, and therapeutic guidelines. All changes that are recommended by P&T for the Medicare formularies are tentative until UCare receives final CMS approval.

**Key:**

Medicare: UCare Medicare, UCare Medicare with Fairview and North Memorial, UCare Group Medicare, EssentiaCare, Minnesota Senior Health Options (MSHO) & Connect + Medicare

Medicaid: PMAP, MnCare, MSC+ & Connect

Exchange: UCare Individual and Family Plans

F: Formulary

NF: Non-formulary

PA: Prior Authorization

QL: Quantity Limit

ST: Step Therapy

New Drug Review			
Drug	Indication	Formulary Coverage	Effective Date
Onureg (azacitidine) <b>PROTECTED CLASS</b>	Continued treatment of acute myeloid leukemia (AML) in adults who achieve first complete remission (CR) or CR with incomplete blood count recovery (CRi) following intensive induction chemotherapy and are unable to complete intensive curative therapy.	Medicare: Formulary w/PA Medicaid: Formulary w/PA Exchange: Formulary w/PA	5/1/2021
Sevenfact (coagulation VIIa, recomb-jncw)	for the treatment and control of bleeding episodes occurring in adults and adolescents (≥ 12 years of age) with hemophilia A or B with inhibitors.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary  *Covered under the medical benefit	N/A
Winlevi (clascoterone)	for the topical treatment of acne vulgaris in patients ≥ 12 years of age.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Lampit (nifurtimox)	for the treatment of Chagas disease (American Trypanosomiasis) caused by Trypanosoma cruzi in pediatric patients (birth to < 18 years of age and weighing ≥ 2.5 kg)	Medicare: Formulary Medicaid: Formulary Exchange: Formulary	5/1/2021

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Imcivree (setmelanotide acetate)	for chronic weight management in adults and pediatric patients $\geq 6$ years of age with obesity due to proopiomelanocortin (POMC), proprotein convertase subtilisin/kexin type 1 (PCSK1), or leptin receptor (LEPR) deficiency confirmed by genetic testing and interpreted as pathogenic, likely pathogenic, or of uncertain significance	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Oxlumo (lumasiran sodium)	the treatment of primary hyperoxaluria type 1 (PH1) to lower urinary oxalate levels in pediatric and adult patients	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary  *Covered under the medical benefit	N/A
Zokinvy (lonafarnib)	Indicated for the following conditions in patients $\geq 12$ months of age with BSA $\geq 0.39$ m <sup>2</sup> : To reduce risk mortality in Hutchinson-Gilford Progeria Syndrome (HGPS), and treatment of processing-deficient progeroid laminopathies with either heterozygous LMNA mutation with progerin-like protein accumulation or homozygous/compound heterozygous ZMPSTE24 mutations	Medicare: Formulary w/PA Medicaid: Formulary w/PA Exchange: Formulary w/PA	5/1/2021
Gimoti (metoclopramide hcl)	the relief of symptoms in adults with acute and recurrent diabetic gastroparesis	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Gavreto (pralsetinib) <b>Protected Class</b>	the treatment of metastatic rearranged during transfection (RET) fusion-positive non-small cell lung cancer (NSCLC) in adults as detected by an FDA-approved test.	Medicare: Formulary w/PA Medicaid: Formulary w/PA Exchange: Formulary w/PA	5/1/2021
Danyelza (naxitamab-gqqk) <b>Protected Class</b>	indicated in combination with granulocyte-macrophage colony-stimulating factor (GM-CSF) for relapsed or refractory high-risk neuroblastoma in the bone or bone marrow following a partial response, minor response, or stable disease, in patients $\geq 1$ year of age.	Medicare: Formulary Medicaid: Non-Formulary Exchange: Non-Formulary  *Covered under the medical benefit.	5/1/2021

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Eysuvis (loteprednol etabonate)	short-term (up to 2 weeks) treatment of the signs and symptoms of dry eye disease.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
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**Formulary changes for New Generics, New Indications and Miscellaneous Previously Reviewed drugs are effective 5/1/2021.**

### New Generics Review

Drug	Current formulary status	Recommendation
Abiraterone (Zytiga)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Asenapine (Saphris)	Medicare - F, Medicaid - NP, HIX - F	Medicare - F, Medicaid - NF, HIX - F
Emtricitabine- tenofovir pediatric dosage (Truvada)	Medicare - F, Medicaid - NF, HIX - F	Medicare - F, Medicaid - F, HIX - F
Nitazoxanide (Alinia)	Medicare - F, Medicaid - NF, HIX - NF	Medicare - F, Medicaid - NF, HIX - NF
Alvimopan (Entereq)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Meloxicam (Vivlodex)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Ivermectin lotion (Sklice)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF

### New Indications Review

Drug	Current formulary status	Recommendation
Inclusig	Medicare - F, Medicaid - F, HIX - NF	Medicare - F, Medicaid - F, HIX - F
Arcalyst	Medicare - F, Medicaid - NF, HIX - F	Medicare - F, Medicaid - NF, HIX - F
Tagrisso	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Xpovio	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Kalydeco	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Symdeko	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Trikafta	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Vaxchora	Medicare - NF, Medicaid - NF, HIX - F	Medicare - NF, Medicaid - NF, HIX - F
Xalkori	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Spritam	Medicare - F, Medicaid - F, HIX - NF	Medicare - F, Medicaid - F, HIX - NF
Carbaglu	Medicare - F, Medicaid - F, HIX - NF	Medicare - F, Medicaid - F, HIX - NF
Endurant	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Vandazole	Medicare - F, Medicaid - F, HIX - NF	Medicare - F, Medicaid - F, HIX - NF
Lupron Depot	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Plegrity	Medicare - F, Medicaid - NP, HIX - F	Medicare - F, Medicaid - NP, HIX - F
Entresto	Medicare - F, Medicaid - NP, HIX - F	Medicare - F, Medicaid - NP, HIX - F
Kineret	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Gocovri	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Benlysta	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF

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Xeomin	Medicare - NF, Medicaid - NF, HIX - F	Medicare - NF, Medicaid - NF, HIX - F
Fibryga	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - F, Medicaid - F, HIX - F
Enhertu	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Darzalex Faspro	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Opdivo	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Nplate	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Libtayo	Medicare - NF, Medicaid - NF, HIX - F	Medicare - NF, Medicaid - NF, HIX - F
Botox	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Zirabev	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Panzyga	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Imfinzi	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF

### Miscellaneous Previously Reviewed Items

Drug	Rationale/Alternative	Recommendation
Dormy DR 80mg (doxycycline hyclate)	Doxycycline hyclate DR 100mg	NF all lines of business
Hemady 20mg (dexamethasone)	dexamethasone	NF all lines of business
Menquadfi (meningitis vax)	Menactra, Menveo	<b>F all lines of business</b>
Alkindi sprinkle (hydrocortisone)	Hydrocortisone	NF all lines of business
Vaxelis (DPT/HepB/Pol/HIB)	Pentacil, Daptacel, Quadracel, Engerix	<b>F all lines of business</b>
Sutab (sod sulf/KCL/Mag)	Gavilyte, PEG 3350, Golytely	NF all lines of business
Conjupri (lex-amlodipine)	Amlodipine	NF all lines of business
Qdolo (tramadol solution)	tramadol	NF all lines of business
Levothyroxine capsule	Levothyroxine tablet	NF all lines of business
Nyvepria (pegfilgrastim)	Fulphila, Udenyca, Ziextenzo	NF all lines of business
Naproxen CR	naproxen	NF all lines of business

### Additional Items Reviewed

Item	Action
Hemophilia Products	<ul style="list-style-type: none"> <li>Added Novoseven RT to Health Exchange formulary</li> </ul>
Tyrosine Kinase Inhibitors	<ul style="list-style-type: none"> <li>Added Iclusig to formulary with PA</li> </ul>
Diabetes DME	<ul style="list-style-type: none"> <li>Removed Step therapy requirement for Dexcom for Health Exchange and aligned PA Criteria with Medicare local LCD.</li> <li>Added Inpen for all lines of business.</li> <li>Added Omnipod to all lines of business with PA</li> </ul>

**March 2021 Pharmacy & Therapeutics  
Committee Decisions**

New Medical Drug Policies	<ul style="list-style-type: none"><li>• Approved policies for Amondys 45, Breyanzi, Cosela, Evkeeza, Margenza and Imcivree</li></ul>
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