



September 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
Aduhelm	Aduhelm, an amyloid beta-directed antibody, is indicated for the treatment of Alzheimer’s disease. Treatment with Aduhelm should be initiated in patients with mild cognitive impairment or mild dementia stage of disease, the population in which treatment was initiated in clinical trials.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary (Covered under medical benefit for Medicaid only)	N/A
Nulibry (fosdenopterin hydrobromide)	To reduce the risk of mortality in patients with molybdenum cofactor deficiency (MoCD) Type A.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary (Covered under medical benefit)	N/A
Pepaxto (melphalan flufenamide hcl) PROTECTED CLASS	indicated in combination with dexamethasone for the treatment of relapsed or refractory multiple myeloma in adults who have received at least four prior lines of therapy and whose disease is refractory to at least one proteasome inhibitor, one immunomodulatory agent, and	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary (Covered under medical benefit)	N/A

September 2021 Pharmacy & Therapeutics Committee Decisions

	one CD38-directed monoclonal antibody.		
Qelbree (viloxazine hcl)	treatment of attention deficit hyperactivity disorder (ADHD) in pediatric patients 6 to 17 years of age	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Myfembree (relugolix/estradiol/norethin drone)	for the management of heavy menstrual bleeding associated with uterine leiomyomas (fibroids) in premenopausal women.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Margenza (margetuximab-cmkb) PROTECTED CLASS	treatment of metastatic HER2-positive breast cancer in adults in combination with chemotherapy and in patients who have received two or more prior anti-HER2 regimens, at least one of which was for metastatic disease	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary (Covered under medical benefit with PA)	N/A
Fotivda (tivozanib hcl) PROTECTED CLASS	treatment of adults with relapsed or refractory advanced renal cell carcinoma (RCC) following two or more prior systemic therapies	Medicare: Formulary w/PA Medicaid: Formulary w/PA Exchange: Formulary w/PA	10/1/2021
Zegalogue (dasiglucagon hcl)	treatment of severe hypoglycemia in adults and pediatric patients ≥ 6 years of age with diabetes suppressed (HIV-1 RNA < 50 copies/mL) on a stable ARV regimen with no history of treatment failure and with no known or suspected resistance to cabotegravir or rilpivirine.	Medicare: Formulary Medicaid: Formulary Exchange: Formulary	10/1/2021
Nextstellis (drospirenone/estetrol)	Indicated for use by females of reproductive potential to prevent pregnancy	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Ponvory (ponesimod)	the treatment of relapsing forms of multiple sclerosis (MS) to include clinically isolated syndrome, relapsing remitting disease, and active secondary progressive disease in adults.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Ukoniq (umbralisib) PROTECTED CLASS	the treatment of adults with relapsed or refractory follicular	Medicare: Formulary w/PA Medicaid: Formulary w/PA	10/01/2021

September 2021 Pharmacy & Therapeutics Committee Decisions

	lymphoma who have received at least three prior lines of systemic therapy; and adults with marginal zone lymphoma (MZL) who have received at least one prior anti-CD20-based regimen.	Exchange: Formulary w/PA	
Jemperli (dostarlimb-gxly) PROTECTED CLASS	Mismatch repair deficient (dMMR) recurrent or advanced endometrial cancer	Medicare: Formulary Medicaid: Formulary Exchange: Formulary	10/01/2021
Rybrevant (amivantamab-vmjw) PROTECTED CLASS	locally advanced or metastatic non-small cell lung cancer (NSCLC) in adults with EGFR exon 20 insertion mutations, whose disease has progressed on or after platinum-based chemotherapy.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary (Covered under medical benefit)	N/A
Abecma (idecabtagene vicleucel) Protected Class	Abcema is indicated for the treatment of adults who have relapsed or refractory multiple myeloma that has been treated at least four times.	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary (Covered under medical benefit)	N/A
Bronchitol (mannitol)	Add-on maintenance therapy to improve pulmonary function in patients ≥ 18 years of age with Cystic Fibrosis (CF).	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A
Wegovy (semaglutide)	as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adults with an initial body mass index (BMI) of ≥ 30 kg/m ² (obesity); or ≥ 27 kg/m ² (overweight) in the presence of at least one weight-related comorbid condition (e.g., hypertension, type 2 diabetes mellitus, or dyslipidemia).	Medicare: Non-Formulary Medicaid: Non-Formulary Exchange: Non-Formulary	N/A



September 2021 Pharmacy & Therapeutics Committee Decisions

Formulary changes for New Generics, New Indications and Miscellaneous Previously Reviewed drugs are effective 10/1/2021.

New Generics Review

Drug	Current formulary status	Recommendation
Isotretinoin capsule (Absorica)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - F, Medicaid - F, HIX - F
Calcitonin-salmon solution (Miacalin)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Bepotastine eye drops (Bepreve)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Rufinamide (Banzel)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Aformoterol neb (Brovana)	Medicare - NF, Medicaid - NP, HIX - F	Medicare - NF, Medicaid - NP, HIX - F
Formoterol neb (Perforomist)	Medicare - F, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF

New Indications Review

Drug	Current formulary status	Recommendation
Natroba (spinosad topical suspension, 0.9%)	Medicare - NF, Medicaid - P, HIX - NF	Medicare - NF, Medicaid - P, HIX - NF
Ferriprox (deferiprone tablets)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Keytruda (pembrolizumab injection for intravenous use)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
KedRAB (rabies immune globulin [human] solution for wound infiltration and intramuscular injection)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Opdivo (nivolumab injection for intravenous use)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF

September 2021 Pharmacy & Therapeutics Committee Decisions

Yervoy (ipilimumab injection for intravenous use)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Ocaliva (obeticholic acid tablets)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Zipsor (diclofenac potassium 25 mg capsule)	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Zeposia (ozanimod capsules)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Nurtec ODT (rimegepant orally disintegrating tablets)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Cosentyx (secukinumab injection for subcutaneous use)	Medicare - F, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
Ultomiris (ravulizumab-cwvz injection for intravenous use)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - F, Medicaid - NP, HIX - NF
Trikafta (elexacaftor/tezacaftor/ivacaftor tablets; ivacaftor tablets co-packaged)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Epclusa (sofosbuvir/velpatasvir tablets)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Mavyret (glecaprevir and pibrentasvir tablets)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Farxiga(dapagliflozin tablets)	Medicare - NF, Medicaid - P, HIX - F	Medicare - NF, Medicaid - P, HIX - F
Noxafil (posaconazole delayed-release tablets)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Ayvakit (avapritinib tablet)	Medicare - F, Medicaid - F, HIX - F	Medicare - F, Medicaid - F, HIX - F
Astepro Allergy (azelastine HCl 0.15% nasal spray)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Toviaz (fesoterodine fumarate extended-release tablets)	Medicare - NF, Medicaid - NP, HIX - NF	Medicare - NF, Medicaid - NP, HIX - NF
Pradaxa (dabigatran etexilate capsules)	Medicare - F, Medicaid - P, HIX - NF	Medicare - F, Medicaid - P, HIX - NF

September 2021 Pharmacy & Therapeutics Committee Decisions

Opdivo	Medicare - NF, Medicaid - NF, HIX - NF	Medicare - NF, Medicaid - NF, HIX - NF
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Miscellaneous Previously Reviewed Items

Drug	Rationale/Alternative	Recommendation
Prolate solution (Oxycodone/APAP)	Oxycodone solution Oxycodone/APAP tablets	NF all lines of business
Roszet tablet (ezetimibe/rosuvastatin)	Ezetimibe rosuvastatin	NF all lines of business
Kloxxado nasal spray	Double strength Narcan; same cost	Medicare: F, Medicaid: NF, HIX: F
Clenia Plus suspension (sulfacetamide sodium/sulfur)	Sulfacetamide sodium	Medicare: NF, Medicaid: NF, HIX: NF
Varenicline tartrate	Chantix on backorder; FDA coordinated Canadian equivalent (Apo-varenicline)	Medicare: F, Medicaid: NF, HIX: F

Additional Items Reviewed

Item	Action
UCare Medicare Part D Transition Policy	<ul style="list-style-type: none"> Approved policy
Opioid Drug Management Program Policy	<ul style="list-style-type: none"> Approved policy
Ivermectin	<ul style="list-style-type: none"> Added PA requirement for all UCare plans
Weight Loss Drugs	<ul style="list-style-type: none"> Added Phentermine to Medicaid formulary with PA due to legislature change that now allows coverage
Medical Drug Authorization Requirements	<ul style="list-style-type: none"> 195 drugs require authorization for 2022
2021 Biosimilar Step Therapy Requirements	<ul style="list-style-type: none"> Reviewed cost effectiveness of Biosimilar Step Therapy Program

September 2021 Pharmacy & Therapeutics Committee Decisions

2022 Chemotherapy Medical drug Policy Additions	<ul style="list-style-type: none">• Adding policies for Abraxane, Istodax, Proleukin, Valstar, Vyxeos and Yondelis
2022 Botulinum Toxin Policy Addition	<ul style="list-style-type: none">• Adding UM program for Myobloc and Dysport with Botox and Xeomin as preferred agents.
2022 Hyaluronic Acid Policy Addition	<ul style="list-style-type: none">• Adding UM program for hyaluronic acid with Synvisc, Synvisc-One and Euflexxa as preferred agents.
2022 VEGF Inhibitor Policy Addition	<ul style="list-style-type: none">• Adding UM program for Eylea, Lucentis and Beovu
New Medical Drug Policies	<ul style="list-style-type: none">• Added policy for Rylaze, Nexviazyme and Saphnelo