Provider Bulletin

News and Information

36

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Medical Drug Prior Authorization for 2024 and Preferred Product Step Therapy Information

2024 Medical Benefit Drug Prior Authorization

Continuing for 2024, Care Continuum will perform authorization reviews for participating providers for all lines of business.

Non-participating and MultiPlan providers will submit prior authorizations directly to UCare. The authorization request form for non-participating and MultiPlan providers has been updated. Please see the UCare provider website for the most current form.

Visit the UCare.org <u>Provider Pharmacy page</u> for Medical Injectable Drug Prior Authorization resources.

Summary of Medical Drug Prior Authorization Changes for 2024

Below is a summary of the 2024 medical drugs, by therapeutic category, that require prior authorization for all UCare lines of business.

- Biosimilar Step: 24 drugs
- Enzyme Replacement: 12 drugs
- Hematology: 12 drugs
- Hereditary Angioedema: 8 drugs
- Immunologicals: 6 drugs
- Infertility: 4 drugs
- Inflammatory Conditions: 12 drugs
- Multiple Sclerosis: 4 drugs
- Oncology: 102 drugs
- Ophthalmic Agents: 7 drugs
- Rare/Miscellaneous Conditions: 54 drugs
- Somatostatin Analogs: 2 drugs
- Viscosupplements: 13 drugs

Generally, criteria confirm appropriate diagnosis, appropriate prescriber and appropriate dose. Some criteria may require use of a clinically appropriate trial of a previous medication, concurrent use with other agents as required per the drug label, and confirmation of necessary lab and genetic testing.



Preferred Product Step Therapy for Medical Drugs in 2024

Several biosimilars are available in the marketplace for medical drugs. UCare will require a trial of a preferred biosimilar (or preferred product) first, prior to use of the reference list product or non-preferred biosimilar in most categories in the following table. Based on available rebates and utilization of the on-body injector, Neulasta and Neulasta Onpro were moved to preferred product status in the Pegfilgrastim category in 2022. Due to lack of availability of Ziextenzo in the current marketplace, this product has been moved to non-preferred status and Nyvepria has been moved to preferred status. UCare will continue to monitor for drug shortages and update preferred products as needed to meet the needs of members and community providers.

Drug Name	Preferred Products	Non-preferred Products
Pegfilgrastim	Udenyca, Nyvepria, Neulasta	Fulphila, Fylnetra, Stimufend, Ziextenzo
Infliximab	Avsola, Inflectra	Remicade, Renflexis, Infliximab authorized generic
Rituximab	Truxima, Ruxience	Rituxan, Riabni
Trastuzumab	Kanjinti, Trazimera	Herceptin, Ogivri, Ontruzant, Herzuma
Filgrastim	Zarxio	Neupogen, Granix, Nivestym, Releuko
Epoetin	Retacrit	Procrit, Epogen
Bevacizumab	Mvasi, Zirabev	Avastin, Alymsys, Vegzelma

Biosimilar Step Therapy Program Details

Step therapy requirement would be for members new to therapy only.

- 365-day lookback for Medicare and 180-day lookback for Medicaid and Health Exchange.
- UCare will grandfather members who we have a history of use with the reference list product within the lookback period timeframes.

Questions?

Providers with questions are encouraged to:

- Visit the UCare.org <u>Provider Pharmacy page</u> for 2024 pharmacy information or <u>ucare.org/providers</u>.
- Watch for additional Provider Bulletins:
 - UCare Selects Navitus Health Solutions as New Pharmacy Benefit Manager for 2024
 - Pharmacy Formulary and Benefit Changes for 2024
- Call UCare's Provider Assistance Center at 612-676-3300 or 1-888-531-1493 toll free.

