#### November/December 2021



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#### Statin Reference Guide

Recently, Network Health compiled a guide to help our providers address challenges with prescribing statins. This *Statin Provider Reference Guide* discusses these topics.

- 1. Responses to commonly encountered statin misconceptions
- 2. Patient-centered rechallenge strategies
- 3. Detailed information regarding Statin Use in Persons with Diabetes (SUPD)
- Links to Statin Therapy for Patients with Cardiovascular Disease (SPC) and Statin Therapy for Patients with Diabetes (SPD) quality measures
- 5. Recognized statin exclusions
- 6. How to visibly document therapy failures

View the <u>Statin Provider Reference Guide</u> to find tips for prescribing statins from your partners at Network Health.

Our Response to COVID-19

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For Network Health's most up-to-date information about the COVID-19 vaccine,

visit networkhealth.com/coronavirus-vaccine.

#### New Generic Medication Available in 2021

The table below highlights the generic medications the Food and Drug Administration (FDA)'s Center for Drug Evaluation and Research (CDER) approved in 2021. Newly approved generics are a great step toward creating affordable treatment options. However, newly approved generics are only about 10 percent less costly than brands when the new generics first come out. Over time, when more manufacturers produce the new generic medication, pricing competition increases. Multiple manufacturers of a new generic product create larger reductions in generic medication prices.

Long-standing generic medications offer the most value when compared to brand medications, resulting in lower tier placement on a patient's pharmacy formulary. Even so, there may still be significant cost variability depending on the manufacturer and retail pharmacy. An excellent resource for consumers to price out medications is GoodRx.com.

While generic medications tend to be a cost-savings option, some patients may feel

hesitant about switching off a brand medication to the generic equivalent. An article titled *Discussing Brand Versus Generic Medications* was published in U.S. Pharmacist, and it provides talking points and resources for discussing the difference between brand and generic medications with patients.

#### FDA's List of New Generic Medications Available in 2021\*

Brand	Generic Name	Approval Date
Zomig®	Zolmitriptan nasal spray	September 2021
Sutent <sup>®</sup>	Sunitinib capsules	August 2021
Chantix <sup>®</sup>	Varenicline tablets	August 2021
Epaned <sup>®</sup>	Enalapril solution	August 2021
Durezol <sup>®</sup>	Difluprednate ophthalmic drops	August 2021
Duexis <sup>®</sup>	Ibuprofen/famotidine tablets	August 2021
Brovana <sup>®</sup>	Arformoterol inhalation solution	June 2021
Perforomist	Formoterol inhalation solution	June 2021
Kaletra <sup>®</sup>	Lopinavir/ritonavir tablets	June 2021
Thiola <sup>®</sup>	Tiopronin tablets	April 2021
Lyrica <sup>®</sup> CR	Pregabalin ER tablets	April 2021
Absorica <sup>®</sup>	Isotretinoin capsules	March 2021
Hysingla <sup>®</sup> ER	Hydrocodone bitartrate ER	March 2021
Zyclara <sup>®</sup>	Imiquimod cream	January 2021
Tirosint <sup>®</sup>	Levothyroxine capsules	January 2021

<sup>\*</sup>Current as of December 15, 2021. List of available generic medications may change.

# Tips to Reduce Cost When Facing Formulary Tier Changes: Onglyza®, Farxiga®, Dofetilide, ProAir®, Ventolin® and Proventil

Network Health reviews our medication formulary annually to make therapeutically and financially sound tier choices. Medications may increase tiers from year to year, increasing the prescription cost to our members. When this happens, letters are mailed to most members affected by tier increases. In some instances, our pharmacist team reaches out to members directly to discuss tier changes, alternative options and offers to reach out to providers if members would like help communicating information. Below, you will find commonly used medications that have tier increases this year and options to minimize the financial burden.

#### Onglyza

Onglyza is a dipeptidyl peptidase-4 (DPP-4) diabetic medication. Onglyza increases from Tier 3 in 2021 to Tier 4 in 2022. Tier 4 medications usually have a deductible and a higher

copayment after the deductible is met. Members will notice the deductible charge on their first Onglyza fill in 2022 and an ongoing higher copayment after the deductible is met. Fortunately, the medication Januvia®, also in the DPP-4 class of diabetic medications, is a comparable product that will continue to be Tier 3 in 2022.

#### **Farxiga**

Farxiga is a sodium glucose cotransporter-2 (SGLT2) inhibitor diabetic medication. Farxiga increases from Tier 3 in 2021 to Tier 4 in 2022. Tier 4 medications usually have a deductible and a higher copayment after the deductible is met. Members will notice the deductible charge on their first Farxiga fill in 2022 and an ongoing higher copayment after the deductible is met. Fortunately, Invokana® and Jardiance®, both in the SGLT2 class of diabetic medications, are comparable products that will continue to be Tier 3 in 2022.

#### **Dofetilide**

Dofetilide is a generic medication for Tikosyn®, used for irregular heartbeat. Dofetilide increases from a Tier 2 medication in 2021 to Tier 3 in 2022. Tier 3 medications usually have a higher copayment. Some plans have a deductible for medications on Tier 3 and higher. For those plans with deductible on Tier 3 and higher, members will notice the deductible charge on their first dofetilide fill in 2022 and an ongoing higher copayment after the deductible is met. Instead of recommending a different medication, using a discount card like GoodRx® reduces dofetilide medication cost considerably. It may require the patient switching to a pharmacy with the lowest price, however, the savings can be substantial.

#### **Proair, Ventolin and Proventil Inhalers**

Proair, Ventolin and Proventil are brand name albuterol inhalers, and all have a generic inhaler available. Proair, Ventolin and Proventil increase from Tier 3 in 2021 to Tier 4 in 2022. Tier 4 medications usually have a deductible and a higher copayment after the deductible is met. Members will notice the deductible charge on their first fill in 2022 and an ongoing higher copayment after the deductible is met. Fortunately, generic albuterol inhalers offer a great value at Tier 2. One other notable is that Express Scripts Mail Order Pharmacy uses ProAir as their house generic when filling generic albuterol prescriptions. For that reason, members using Express Scripts Mail Order Pharmacy may still receive ProAir for a Tier 2 copayment.

Educate your patients to be informed consumers, so they know how choices impact prescription costs. Make sure to periodically ask about prescription affordability. An individual's financial situation and available cost saving opportunities change over time. If you have any questions pertaining to this article email <a href="mailto:pharmacists@networkhealth.com">pharmacists@networkhealth.com</a>.

#### eviCore Prior Authorization Program Expansion

Network Health is expanding the Part D medical oncology prior authorization programs with eviCore healthcare. Beginning January 1, 2022, for Medicare members only, eviCore will be completing the prior authorization requests for Part D medications related to oncology indications. Please note that all non-oncology drug requests will continue to be submitted through Express Scripts.

#### **Important Notes**

- Services performed without prior authorization will not be reimbursed and you may not seek reimbursement from members.
- Services performed in conjunction with an inpatient stay, observation or emergency room visit are not subject to authorization requirements.

eviCore's Clinical Guidelines and request forms are available on <u>their website</u> or on their <u>Network Health-specific page</u>.

Beginning November 15, 2021, the eviCore client and provider services department will be available to answer your questions and provide additional information. They can be reached at 800-646-0418 (option 4), Monday–Friday from 7 a.m. to 4 p.m.

You are highly encouraged to attend one of the online orientation sessions below. During these sessions, we will have a detailed discussion about the prior authorization requirements for Medicare Part D oncology and how to navigate the <a href="eviCore website">eviCore website</a>. Time and participation permitting, these training sessions will be followed by a question-and-answer session. We encourage you to attend one of these informative sessions to ensure you understand the prior authorization process.

#### Registration

All online orientation sessions require advance registration. Each online orientation session is at no cost to you and will last approximately one hour. All sessions are scheduled in Central Time.

Name of Session	Date	Time
Network Health Medicare Part D Oncology Provider Orientation	December 16, 2021	noon
Network Health Medicare Part D Oncology Provider Orientation  January 6, 2022		1 p.m.

#### **How to Register**

Please read the following instructions to register and participate in a session.

- 1. Once you have decided upon a provider-specific session, please click here.
- 2. Click on the menu bar on the far-left side, then choose **Webex Training**.
- Under Live Sessions, click the Upcoming tab, then enter the desired topic name exactly as below and search for your session.
  - Network Health Medicare Part D Oncology Provider Orientation
- 4. Click **Register** next to the session(s) with the date and time you wish to attend.

5. Complete the registration information.

After you have registered for the conference, you'll receive an email containing the phone number, meeting number, conference password, and a link to the web portion of the session.

**Please keep the registration email** so you have the link to the web conference and the call-in number for the session in which you will be participating.

If you are unable to participate in a session, you can obtain a copy of the presentation as well as other important documents <a href="https://example.com/products/reader/">here</a>. Documents are available in PDF format. If you need Adobe Reader, you can download it from <a href="https://www.adobe.com/products/reader/">www.adobe.com/products/reader/</a>.

## Pharmacy and Therapeutic Changes for November 2021

#### **New Drug Additions**

Comment Preferred Brand Non-Preferred Brand Preferred Specialty Non-Preferred Specialty

Brexafemme <sup>®</sup> QL <sup>1</sup>	M, C	
Lumakras™ PA		M, C
Myfembree®		M, C
Rezurock <sup>™</sup> PA,QL <sup>1</sup>		M, C
Truseltiq <sup>™</sup> PA, QL1		M, C

C indicates commercial preferred drug list (PDL) status

M indicates Medicare PDL status

PA indicates that prior authorization is required

**QL** indicates a quantity limit

#### Footnotes:

1. Quantity limit only applies to commercial line of business

#### **Medicare Quantity Level Limit Updates**

Medication	Dosage	Quantity/Supply
Buprenorphine	75 mcg, 150 mcg, 300 mcg, 450 mcg, 600 mcg, 750 mcg, 900 mcg film	60/30 days over time
Sajazir™	30 mg/3 ml syringe	27/30 days
Sunitinib	12.5 mg, 25 mg, 37.5 mg, 50 mg capsule	28/28 days

#### **Commercial Quantity Level Limit Updates**

Medication	Dosage	Quantity/Supply
Ambien®	5 mg, 10 mg, CR 6.25 mg, CR 12.5 mg tablet	15/30 days changing to to 30/30 days
Almotriptan	12.5 mg tablet	Updating from 24/28 days to 12/fill
Almotriptan	6.25 mg tablet	Updating from 18/28 days to 6/fill
Amerge®	1 mg, 2.5 mg tablet	Updating from 18/28 days to 9/fill
Axert®	12.5 mg tablet	Updating from 24/28 days to 12/fill
Axert	6.25 mg tablet	Updating from 18/28 days to 6/fill
Ayvakit™	25 mg and 50 mg tablet	30/30 days
Belsomra®	5 mg, 10 mg, 15 mg, 20 mg tablet	15/30 days changing to 30/30 days
Brexafemme	150 mg tablet	4/fill
Butorphanol	10 mg/ml spray	Updating from 2/fill to 5/fill
Bylvay <sup>TM</sup>	200 mcg pellet	120/30 days
Bylvay	400 mcg capsule	150/30 days
Bylvay	600 mcg pellet	30/30 days
Bylvay	1,200 mcg capsule	60/30 days
Cosentyx®	75 mg/0.5 ml syringe	1/28 days

Doxepin	3 mg, 6 mg tablet	15/30 days changing to 30/30 days
Edluar® SL	5 mg, 10 mg tablet	15/30 days changing to 30/30 days
Eletriptan	20 mg and 40 mg tablet	Updating from 18/28 days to 6/fill
Eszopiclone	1 mg, 2 mg, 3 mg tablet	15/30 days changing to 30/30 days
Everolimus	2 mg, 3 mg, 5 mg, 10 mg tablet	30/30 days
Frova®	2.5 mg tablet	Updating from 27/28 days to 9/fill
Frovatriptan	2.5 mg tablet	Updating from 27/28 days to 9/fill
Imitrex®	25 mg, 50 mg, 100 mg tablet	Updating from 18/28 days to 9/fill
Imitrex	20 mg nasal spray	Updating 18/28 days to 9/fill
Imitrex	4 mg/0.5 ml and 6 mg/0.5 ml cartridges	Updating 16/28 days to 1/fill
Imitrex	4 mg/0.5 ml and 6 mg/0.5 ml pen injection	Updating 16/28 days to 1/fill
Imitrex	5 mg nasal spray	Updating 36/28 days to 6/fill
Ivermectin/stromectol	3 mg tablet	20/365 days with specific override criteria: For the treatment of a parasitic infection for which ivermectin is indicated (strongylodiasis, onchoceriasis, lymphatic filariasis, cutaneous larva migrans, ascariasis, scabies and lice), an additional 20 tabletss will be allowed. Note: there will be no quantity level limit exceptions allowed for the treatment or prevention of Sars-CoV-2 infection (COVID-19)
Lunesta®	1 mg, 2 mg, 3 mg tablet	15/30 days changing to 30/30 days
Lupkynis™	7.9 mg capsule	180/30 days
Maxalt®	10 mg tablet	Updating 36/28 days to 18/fill
Maxalt MLT	10 mg tablet	Updating 36/28 days to 18/fill
Naratriptan	1 mg and 2 mg tablet	Updating 18/28 days to 9/fill

Onzetra® Xsail® 11 mg/nosepiece Updating 32/28 days to 16/fill  Oseltamivir 30 mg, 45 mg, 75 mg capsule Updating from 34/fill to 10/fill  Ozempic® 0.25-0.5 mg dose pen 1.5/30 days  1 mg/dose (2 mg/1.5 ml pen), 1 mg/dose (4 3/30 days
Osentamivii   75 mg capsule   Opdating from 34/iiii to 10/iiii
Ozempic dose pen 1.5/30 days  1 mg/dose (2 mg/1.5 ml pen), 1 mg/dose (4 3/30 days
Ozempic mg/1.5 ml pen), 1 mg/dose (4 3/30 days
mg/3 ml pen)
Ramelteon 8 mg tablet 15/30 days changing to 30/30 days
Relpax® 20 mg and 40 mg tablet Updating 18/28 days to 6/fill
Reyvow® 100 mg tablet Updating 16/28 days to 8/fill
Reyvow 50 mg tablet Updating 8/28 days to 8/fill
Rezurock <sup>TM</sup> 200 mg tablet 30/30 days
Rizatriptan 5 mg and 10 mg tablet/ODT Updating 36/28 days to 18/fill
Rozerem 8 mg tablet 15/30 days changing to 30/30 days
Silenor® 3 mg, 6 mg tablet 15/30 days changing to 30/30 days
Seconal 100 mg capsule Updating from 30/fill to no quantity level limit
Sumatriptan 20 mg nasal spray Updating 18/28 days to 6/fill
Sumatriptan  4 mg/0.5 ml and 6 mg/0.5 ml Updating 16/28 days to 1/fill cartridges
Sumatriptan  4 mg/0.5 ml and 6 mg/0.5 ml Updating 16/28 days to 1 fill injection
Sumatriptan 5 mg nasal spray Updating 36/28 days to 6/fill
Sumatriptan 6 mg/0.5 ml syringe Updating 16/28 days to 2/fill
Sumatriptan 6 mg/0.5 ml vial Updating 16/28 days to 1/fill

Sumatriptan	25 mg, 50 mg, and 100 mg tablet	Updating 18/28 days to 9/fill
Sumatriptan- naproxen	85—500 mg tablet	Updating 18/28 days to 9/fill
Sunitinib malate	12.5 mg capsule	90/fill
Sunitinib malate	25 mg, 37.5 mg, 50 mg capsule	30/fill
Tamiflu®	30 mg, 45 mg, 75 mg capsule	Updating from 34/fill to 10/fill
Tosymra®	10 mg nasal spray	Updating 24/28 days to 6/fill
Treximet®	85-500 mg tablet	Updating to 9/fill
Trikafta®	100-50-75 mg/150 mg	84/28 days
Trikafta	50-25-37.5/75 mg	84/28 days
Truseltiq <sup>™</sup>	100 mg daily dose pack	21/21 days
Truseltiq	125 mg, 50 mg daily dose pack	42/21 days
Truseltiq	75 mg daily dose pack	63/21 days
Xofluza®	20 mg, 40 mg, 80 mg tablet	2/fill
Zaleplon	5 mg, 10 mg capsule	15/30 days changing to 30/30 days
Zolmitriptan	2.5 mg and 5 mg nasal spray	Updating 18/28 days to 6/fill
Zolmitriptan	2.5 mg tablet and ODT	Updating 18/28 days to 6/fill
Zolmitriptan	5 mg tablet and ODT	Updating 18/28 days to 6/fill
Zolpidem	5 mg, 10 mg, ER 6.25 mg, ER 12.5 mg	15/30 days changing to 30/30 days
Zolpidem SL	1.75 mg, 3.5 mg	5/30 days changing to 30/30 days
Zomig®	2.5 mg and 5 mg nasal spray	Updating 18/28 days to 6/fill

Zomig	2.5 mg and 5 mg tablet and ZMT	Updating 18/28 days to 6/fill
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#### **Step Therapy Updates**

#### Medicare

- Atypical antipsychotics Medicare closed only Updating for January 1, 2022 to remove olanzapine/fluoxetine from step therapy criteria following CMS review; also updated medications impacted
- Inhaled nasal corticosteroid therapy Medicare closed only For January 1, 2022, removing second-line products listed on closed formulary, as these will be non-formulary in 2022

#### Commercial

• Atypical Antipsychotics - Adding Invega Hafyera™ as second line agent

#### **Prior Authorization Updates**

#### **Commercial and Medicare**

- **Itraconazole** Updated products covered by each line of business
- Kuvan® (sapropterin) Updated language for Medicare based on CMS request that criteria may not require 30 percent reduction in blood phenylalanine for approval of therapy continuation
- Mepolizumab recombinant Added new FDA-approved diagnosis, chronic rhinosinusitis with nasal polyposis
- Iclusig® (ponatinib) For January 1, 2022, updating criteria based on CMS review; includes additional updated FDA-approved indications
- Austedo® (deutetrabenazine) Updated prescriber options for tardive dyskinesia to include a neurologist per CMS request
- **Dupixent**® (dupilumab) Updated prerequisite therapy
- Palynziq® Updated maintenance therapy language specific to Medicare, based on CMS request that criteria may not require a 20 percent reduction in blood phenylalanine levels
- **Tibsovo®** (ivosidenib) Based on CMS request, updating off-label indications, as cholangiocarcinoma is now an FDA approved indication
- **Tegsedi**® (**inotersen**) For January 1, 2022, removing reference to history of liver transplantation. Per CMS' review, a history of liver transplantation is not a contraindication to therapy according to FDA-approved labeling. In patients with a history of liver transplant, monitor ALT, AST and total bilirubin monthly
- Orladeyo<sup>™</sup> (berotralstat) Based on CMS review, for January 1, 2022, updating other criteria to remove requirement for Medicare members that functional C1-INH protein level be less than 50 percent of normal values

- **Signifor®** (pasireotide) For January 1, 2022 separating criteria on Signifor from Signifor LAR, placing them on separate PA policies. Removing off-label use for treatment of Endogenous Cushing's Syndrome or when awaiting surgery or therapeutic response after radiotherapy
- **Kerendia**® (finerenone) New prior authorization
- Rezurock<sup>TM</sup> (belumosudil) New prior authorization

#### Medicare

- Dalfampridine® Updating continuation of therapy language because the use of "may" was deemed vague by CMS
- **Thalomid® (thalidomide)** Based on CMS review, updating multiple myeloma criteria to meet FDA-labeling
- Lenvima® Added new FDA-approved diagnosis as first-line treatment of adult
  patients with advanced renal cell carcinoma when used in combination with Keytruda®
- Rylaze<sup>™</sup> (asparaginase erwinia chrysanthemi-(recombinant)-rywn New prior authorization
- Welireg<sup>™</sup> (belzutifan) New prior authorization
- Exkivity<sup>™</sup> (mobocertinib) New prior authorization
- Tivdak<sup>TM</sup> (tisotumab vedotin-tftv) New prior authorization

#### **Commercial**

- Basal insulins For January 1, 2022, Semglee® will be the preferred product and Basaglar® will be non-preferred
- **Tecfidera**® For January 1, 2022, adding prior authorization to step through generic alternatives (dimethyl fumarate or glatiramer)
- Oxervate<sup>™</sup> (cenegermin-bkbj) New prior authorization for January 1, 2022

# Contact Network Health Pharmacy Department

A pharmacist at Network Health is always available to help your office staff with any pharmacy-related questions. The pharmacist contact information is listed below.

- General pharmacist email pharmacists@networkhealth.com
- Beth Coopman <u>bcoopman@networkhealth.com</u>
- Gary Melis gmelis@networkhealth.com
- Anna Peterson Sanders <u>apeterso@networkhealth.com</u>
- Ted Regalia tregalia@networkhealth.com
- Andy Wheaton <u>awheaton@networkhealth.com</u>

• Sarah Wilczek <u>swilczek@networkhealth.com</u>





# Pharmacy Review Preferred Drug If you have questions shout the 2021 or List

If you have questions about the 2021 or 2022 pharmacy prescription benefits for Network Health members, or questions about websites where members can obtain information on patient assistance programs to help cover cost of medications, please contact Gary Melis

at gmelis@networkhealth.com or 920-720-1696. Gary is available for office visits to discuss any pharmacy-related topics with your staff.

Network Health's most up-to-date Preferred Drug List can be found at <u>networkhealth.com/look-up-medications</u>. Members must select their plan from the dropdown to access the appropriate drug list for that plan.

If you are not a current subscriber to The Script and you would like to be added to the mailing list, please <u>email us today.</u>

Current and archived issues of *The Pulse*, *The Script* and *The Consult* are available at:

networkhealth.com/provider-resources/news-and-announcements.



Don't forget to check us out on social media



networkhealth.com 1570 Midway Place Menasha, WI 54952 800-826-0940 or 920-720-1300





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