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Our Response to COVID-19

For Network Health's most up-to-date information about the COVID-19 vaccine, visit networkhealth.com/coronavirus-vaccine.

Comparison Between Paxlovid™ and Molnupiravir: The First Oral COVID-19 Antivirals

With the ongoing COVID-19 pandemic, the U.S. Food and Drug Administration (FDA) is consistently looking at different medications to treat patients. Early treatment of COVID-19 can help prevent progression to more serious illness and reduce the burden on the health care system.

The FDA has granted emergency use of authorization (EUA) for the first two oral antivirals: Pfizer Paxlovid (generic name

Pharmacy Review

Preferred Drug List

nirmatrelvir/ritonavir) and Merck Molnupiravir. This article will provide an overview comparison of Paxlovid and Molnupiravir.

Both oral antiviral medications are indicated for the treatment of COVID-19 in patients who meet these criteria.

- Test positive for COVID-19 confirmed by FDA-approved testing
- Are high-risk for progressing to severe COVID-19 including the need for hospitalization, intensive care, ventilation or at risk of death
 - Per the Center for Disease Control and Prevention (CDC), high risk patients include the following.
 - Adults older than 65 years of age
 - Those with cancer
 - Pregnant individuals
 - Obese, or overweight individuals with a body mass index $\geq 25\text{kg/m}^2$
 - Individuals with a chronic disease (chronic kidney disease, chronic liver disease, chronic lung disease)
 - Diabetes (type 1 or type 2)
 - Weakened immune system (Immunocompromised)

While in limited supply at this time, providers and patients can use the following websites to help identify distribution locations.

- <https://www.dhs.wisconsin.gov/covid-19/therapeutics.htm> (Paxlovid and molnupiravir supply in the state of Wisconsin)
- <https://healthdata.gov/Health/COVID-19-Public-Therapeutic-Locator/rxn6-qnx8/data> (Nationwide COVID-19 therapeutic locator)

Brand name/generic name	Paxlovid (Nirmatrelvir 150mg -ritonavir 100mg tablets)	Molnupiravir- 200mg capsules
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Manufacturer	Pfizer	Merck
FDA EUA release date	12/22/2021	12/23/2021

Drug type	Antiviral	Antiviral
Mechanism	Nirmatrelvir stops the virus from replicating by the COVID-19 protein. Ritonavir slows metabolism of nirmatrelvir, thereby increasing the duration of action.	Molnupiravir introduces errors in the COVID-19 genetic code which prevents the virus from replicating.
Duration (Both medications are not authorized for use longer than five consecutive days)	Three tablets (two tablets of nirmatrelvir and one tablet ritonavir) taken together by mouth twice daily for five days, for a total of 30 tablets.	Four 200mg capsules taken by mouth every 12 hours for five days for a total of 40 capsules.
How it is supplied	Five daily dose blister cards	40 count capsules in a bottle
Initiation	Within five days of symptom onset	Within five days of symptom onset
Administration	Take with or without food. Swallow tablets whole, do not chew, break or crush tablets.	Take with or without food. Swallow capsules whole, do not chew, break or crush the capsules.
Missed Dose	Take as soon as possible, if it has been eight hours or more since the missed dose skip dose and resume normal time. Do not take two doses at the same time or extra dose.	Take as soon as possible, if it has been 10 hours or more since the missed dose skip dose and resume normal time. Do not take two doses at the same time or extra dose.
Storage	Store in room temperature in a dry place (Avoid the bathroom)	Store in room temperature in a dry place (Avoid the bathroom)
Renal dose adjustment (eGFR 30 to 60 mL/min)	Two tablets (one tablets of nirmatrelvir and one tablet ritonavir) taken together by	No dose adjustment

	mouth twice daily for five days, for a total of tablets	
Severe hepatic impairment	Should not be used	No dose adjustment
Cost to US government per course *prices from GoodRX	\$530	\$700
Current cost to patient (Subject to change if government's public health emergency ends)	\$0	\$0
Contraindicated drug interactions	Certain medications that inhibit the same group of enzymes (CYP3A4) that break down certain medications such as alfuzosin, pethidine, piroxicam, propoxyphene, ranolazine, amiodarone, dronedarone, flecainide, propafenone, quinidine, colchicine, lurasidone, pimozone, clozapine, dihydroergotamine, ergotamine, methylergonovine, lovastatin, simvastatin, sildenafil, triazolam, oral midazolam, apalutamide, carbamazepine, phenobarbital, phenytoin, rifampin, St. John's Wort	N/A
Warnings	Drug interactions Liver toxicity HIV-1 drug resistances with patients with HIV-1 infection	Possible pregnancy toxicity Bone and cartilage toxicity

Common side effects	Diarrhea, higher blood pressure, muscle ache	Diarrhea, nausea, dizziness
Special Population	No human data on pregnancy or breastfeeding	Not recommended in pregnancy or breastfeeding
Limitation	Must be greater than 12 years old and weigh more than 40kg	Must be greater than 18 years old. No weight limit.
Data supporting the use of medications	EPIc-HR trial: a randomized, double-blind, placebo-controlled clinical trial. Based on the study, those who took Paxlovid within 5 days compared to placebo were 80% less likely to be hospitalized or die due to COVID-19.	MOVE-OUT trial: a randomized, double-blind, placebo-controlled clinical trial. Based on the study, those who took Molnupiravir within 5 days compared to placebo were 30% less likely to be hospitalized or die due to COVID-19.
FDA Approved Links	https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-additional-oral-antiviral-treatment-covid-19-certain	https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-additional-oral-antiviral-treatment-covid-19-certain

Resources:

Centers for Disease Control and Prevention. Clinical Care Guidance COVID-19.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html> Updated Feb 12, 2021. Accessed January 14, 2022.

Centers for Disease Control and Prevention. Medical Conditions COVID-19.

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>. Updated Dec 14, 2021. Accessed January 14, 2022.

FDA. Coronavirus (COVID-19) Update: FDA Authorizes First Oral Antiviral Treatment of COVID-19. <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-first-oral-antiviral-treatment-covid-19> Updated December 22, 2021. Accessed January 14, 2022.

FDA. Coronavirus (COVID-19) Update: FDA Authorizes Additional Oral Antiviral Treatment of COVID-19 in Certain Adults. <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-additional-oral-antiviral-treatment-covid-19-certain> Updated December 23, 2021. Accessed January 14, 2022.

Molnupiravir. In: Lexi-Drugs. Hudson, Ohio: Lexi-Comp, Inc.; Updated December 23, 2021 Accessed January 14, 2022.

Nirmatrelvir and Ritonavir. In: Lexi-Drugs. Hudson, Ohio: Lexi-Comp, Inc.; Updated January 13, 2022 Accessed January 14, 2022.

Pharmacy and Therapeutic Changes for January 2022

New Drug Additions

	Comment	Preferred Brand	Non-Preferred Brand	Preferred Specialty	Non-Preferred Specialty
Kerendia®	QL, PA		M, C		
Saphnelo™	PA ¹			C	
Welireg™	PA ²			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. PA through CCUM. Applies to commercial only.

2. PA through Evicore.

Medicare Quantity Level Limit Updates

Medication	Dosage	Quantity/Supply
Epclusa®	150-37.5 mg pellet pack	28/28 days
Mavyret®	50-20 mg pellet pack	140/28 days
Sajazir™	30 mg/3ml syringe	27/30 days
Trudhesa™	nasal spray	8/28 days

Commercial Quantity Level Limit Updates

Medication	Dosage	Quantity/Supply
Cortrophin™ gel	400 units/5 ml	35/15 days
Epclusa	150-37.5 mg pellet pack	28/fill
Epclusa	200-50 mg pellet pack	56/fill
Hetlioz®	20 mg capsule	Adding QLL of 30/fill
Hetlioz LQ	4 mg/ml suspension	Adding QLL of 1 bottle/fill
Oseltamivir	30 mg	Updating from 10/fill to 20/fill
Tamiflu®	30 mg	Updating from 10/fill to 20/fill
Ubrelvy™	100 mg and 50 mg tablet	Updating from 20/28 days to 10/fill
Zaleplon	10 mg	Updating from 30/30 to 60/30

For any drug not specifically identified within quantity level limit review criteria, global quantity level limit criteria will direct to not override the quantity limit. The denial message will include: The quantity requested exceeds the plan's limitation. Coverage cannot be authorized at this time.

Step Therapy Updates

Medicare

- **Anticonvulsant therapy** - Medicare open formulary only - Added **Eprontia™** as second line therapy on open formulary only (excluded on closed). Also, general policy maintenance to reflect 2022 formulary submission accepted by CMS.
- **Atypical antipsychotics** - Medicare open formulary only - Added **Lybalvi®** as second line agent. Also, general document clean-up to reflect current formulary medications tied to this step therapy.
- **Atypical antipsychotics** - Medicare closed formulary only - Added **Lybalvi** as second line agent. Also, general document clean-up to reflect current formulary medications tied to this step therapy.
- **GLP-1 therapy** - Medicare open and closed formulary - Annual review and includes update to remove **Tanzeum™**, as product is no longer available.

Commercial

- **Atypical Antipsychotics** - Added **Lybalvi** as step 2 therapy. Also, general policy maintenance, updated list to reflect only those medications that are part of the step therapy program

Prior Authorization Updates

Commercial and Medicare

- **Cabometyx® (cabozantinib)** - Added new FDA indication for differentiated thyroid carcinoma
- **Xyrem® (sodium oxybate), Xywav® (calcium, magnesium, potassium and sodium oxybate)** - Added new FDA-approved diagnosis of idiopathic hypersomnia for Xywav
- **Dupixent® (dupilumab)** - Updating atopic dermatitis BSA involvement to 10% or greater; updating age on asthma indication from 12 to 6 years old based on updated FDA labeling
- **Skytrofa (lonapegsomatropin-tcgd)** - New prior authorization for Medicare and commercial
- **Livmarli™ (maralixibat chloride)** - New prior authorization for Medicare and commercial
- **Opzelura™ (ruxolitinib)** - New prior authorization for Medicare and commercial
- **Tavneos® (avacopan)** - New prior authorization for Medicare and commercial

Medicare

- **Scemblix® (asciminib)** - New prior authorization for Medicare
- **Fyarro™ (sirolimus protein-bound particles for injectable suspension)** - New prior authorization for Medicare

Commercial

- **Self-administered drugs place of service** - Added new drug, **Skytrofa®**, on self-administered prior authorization; additional maintenance of document to add/delete medications relevant to the policy
- **Diabetic test strips** - Updated to include approval of test strips related to continuous glucose monitors and for members with visual impairment

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 pharmacist@networkhealth.com
- Beth Coopman bcoopman@networkhealth.com
- Gary Melis gmelis@networkhealth.com
- Anna Peterson Sanders apeterso@networkhealth.com
- Ted Regalia tregalia@networkhealth.com
- Andy Wheaton awheaton@networkhealth.com
- Sarah Wilczek swilczek@networkhealth.com



Pharmacy Review Preferred Drug

List

If you have questions about the 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 networkhealth.com/look-up-medications. 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 email us today.

Current and archived issues of *The Pulse*, *The Script* and *The Consult* are available at: [_networkhealth.com/provider-resources/news-and-announcements](https://networkhealth.com/provider-resources/news-and-announcements).



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