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## Our Response to Coronavirus

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

visit networkhealth.com/coronavirus-vaccine.

## National Prescription Drug Take Back Day is April 24, 2021

#### Why is drug disposal so important?

- Proper disposal helps minimize the risk of accidental poisoning, overdose and abuse
- Improper disposal—such as flushing medications—can contaminate the water supply
- Medications thrown away in the trash can be retrieved and illegally sold or abused

Help protect our community by reminding your patients to regularly inventory their medications and dispose of unused and expired medications. Patients can find a convenient drug take back location using the interactive map located at <a href="mailto:doseofrealitywi.gov/drug-takeback/find-a-take-back-location/">doseofrealitywi.gov/drug-takeback/find-a-take-back-location/</a>.

Patients can also contact their local pharmacy or police

**Updates** 

**Step Therapy Updates** 

Contact Network Health Pharmacy Department

Pharmacy
Review Preferred
Drug List

department for information about drug disposal options available throughout the year.

## Real Time Benefit Tool (RTBT)

The Real Time Benefit Tool is available now in many electronic health record (EHR) systems. This tool allows a prescriber to review the cost of medications prior sending the prescription to the pharmacy. The goal is to bring cost transparency into focus when making medication decisions, so the patient can afford and as a result, he or she will remain adherent to the chosen medication.

We would love to hear from your practice how this effort is going. What have you found that works? What are the limitations? What suggestions do you have for improvement? If your clinic has established a successful workflow for RTBT implementation, what does it look like? Please reach out to the Network Health pharmacists

at <a href="mailto:pharmacist@networkhealth.com">pharmacist@networkhealth.com</a> to provide feedback about your experiences.

# Updates to the Pharmacy Explanation of Benefits (EOB)

New in 2021, Part D EOBs will be available for Network Health Medicare Advantage Plan members to view electronically through their member portal. This gives them a convenient way to review their claims while also saving money and producing less waste.

To help members with medication cost concerns, both electronic and mailed EOBs now feature an area listing preferred medication alternatives, if there is a lower cost option available. This gives our members the opportunity to review and discuss potential

alternatives with their prescriber to determine whether an equally effective, less expensive medication may be an appropriate replacement.

Also new for 2021, Network Health Medicare EOBs include drug price change information. This lets members know if the total cost of each of their medications has stayed the same, increased or decreased throughout the year. By providing this information, we're promoting informed consumerism and price transparency.

The price changes reflect any changes in prescription cost compared to the first fill of that drug during the plan year. If there was no price change, the EOB shows 0% price change. If there is a price increase, it's designated with a plus sign, "+", and the percent the price increased. For a price reduction, it's designated with a minus sign, "-", and the percent the price decreased. If it's the first time the medication is filled the price change designation will be "N/A" as there is no previous fill for price comparison.

## Pharmacy and Therapeutic Changes for March 2021

### **New Drug Additions**

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

Gavreto™	PA <sup>1</sup>		M, C
Gimoti™			$M^2$
Kesimpta <sup>®</sup>			M, C
Lampit <sup>®</sup>	QLL	M, C	
Mycapssa <sup>®</sup>	PA		M, C
Ongentys <sup>®</sup>		M, C	
Onureg <sup>®</sup>	PA <sup>4</sup>		M, C

 ${\bf C}$  indicates commercial preferred drug list (PDL) status  ${\bf M}$  indicates Medicare PDL status

PA indicates that prior authorization is required

QL indicates a quantity limit

#### Footnotes:

- 1. Commercial PA will go through eviCore, Medicare PA will go through Express Scripts
- 2. Excluded from commercial line of business
- 3. Quantity limit only with Medicare line of business
- 4. PA only with commercial line of business and will go through eviCore

## **Medicare Quantity Level Limit Updates**

meloxicam	5 mg capsules	30 capsules/30 days
Dificid®	40 mg/ml suspension	136 ml/10 days
abiraterone	500 mg tablet	120 tablets/30 days
Iclusig®	10, 30 mg tablet	30 tablets/30 days
zolmitriptan	2.5 mg, 5 mg nasal spray	18 sprays/28 days
Aranesp®		Removing QLLs (document cleanup)
Zuplenz®		Removing QLLs (document cleanup)
Tanzeum™		Removing QLLs (product no longer available)

## **Commercial Quantity Level Limit Updates**

meloxicam	5 mg capsules	30 capsules/fill
abiraterone	500 mg tablets	60 tablets/fill
asenapine	2.5 mg tablet SL 5 mg tablet SL 10 mg tablet SL	60 tablets/fill
Dificid	40 mg/ml suspension	136 ml/10 days

nitazoxanide	500 mg tablet	6 tablets/3 days
Nubeqa <sup>®</sup>	300 mg tablet	120 tablets/fill
Onureg	300 mg tablet	14 tablets/fill
Inqovi <sup>®</sup>	35-100 mg tablet	5 tablets/fill
Evrysdi <sup>TM</sup>	0.75 mg/ml oral solution	240 mls/30 days
Enbrel®	25 mg/0.5 ml	8 syringes/28 days
Breztri™	160-9-4.8 HFA	1/fill
Nurtec <sup>™</sup> ODT	75 mg tablet	16 tablets/30 days
RediTrex <sup>®</sup>	7.5 mg/0.3 ml syringe 10 mg/0.4 ml syringe 12.5 mg/ ml syringe 15 mg/0.6 ml syringe 17.5 mg/0.7 ml syringe 20 mg/0.8 ml syringe 22.5 mg/0.9 ml syringe 25 mg/ml syringe	4 syringes/28 days

## **Prior Authorization Updates**

#### **Commercial and Medicare**

- Xolair® (omalizumab) Added FDA indication for nasal polyps
- Gilotrif®, Tagrisso® (EGFR mutations) Added Tagrisso criteria to approve for NSCLC, EGFR mutation positive, when being used as adjuvant therapy after tumor resection
- Nucala® (mepolizumab) recombinant Added new FDA indication for hypereosinophilic syndrome
- Afinitor® (everolimus) For breast cancer indication, adding male gender as third qualifying option
- Lonsurf® (trifluridine and tipiracil) Updated criteria to include additional prerequisite therapies for colorectal cancer; this was previously approved by CMS for our 2021 formulary
- Tegsedi<sup>®</sup> (inotersen) Updated reference to peripheral neuropathy to polyneuropathy based on FDA labeling
- Xospata® (gilteritinib) Added coverage for lymphoid, myeloid or mixed lineage neoplasms per NCCN update
- **Piqray**® (alpelisib) Added to allow use for premenopausal women in combination with a GnRH analog
- Orladeyo<sup>™</sup> (berotralstat) New prior authorization
- Winlevi® (clascoterone cream 1%) New prior authorization
- Oxlumo<sup>™</sup> (lumasiran) New prior authorization

#### Medicare

- Kineret® (anakinra) Updated criteria for Still's disease
- Stelara® (ustekinumab) Removed reference to prerequisite trial of Humira® for ulcerative colitis
- **Actemra**<sup>®</sup> (tocilizumab) Updated polyarticular juvenile idiopathic arthritis prerequisite trial to include Xeljanz<sup>®</sup> as an additional option
- Inhaled long-acting muscarinic agents Removed reference to Seebri because it is no longer on formulary
- Pomalyst® (pomalidomide) Added criteria for both HIV-positive and HIV-negative Kaposi sarcoma
- Gavreto<sup>™</sup> (pralsetinib) Updated age restriction and added medullary thyroid cancer and thyroid cancer indications based on new FDA labeling
- **Orgovyx**<sup>TM</sup> (relugolix) New prior authorization

#### **Commercial**

- **Testosterone** Added wording for diagnosis of gender dysphoria in transgender male patients
- Nyvepria<sup>™</sup>, RediTrex (self-administered drugs place of service) Added to self-administrated criteria

## **Step Therapy Updates**

#### **Medicare (open and closed formularies)**

- Anticonvulsant therapy Removed reference to Roweepra
- Ophthalmic prostaglandin therapy
  - Added bimatoprost as first line therapy
  - o Removed Lumigan® from step therapy program to capture additional rebates
- Triptan therapy Adding zolmitriptan nasal spray as second line medication

#### Commercial

- Antispasmodic therapy
  - Added Gemtesa® (vibegron) and VESIcare<sup>TM</sup> LS suspension as second-line drugs
  - Clarified that both brand and generic Enablex<sup>®</sup> (darifenacin) are second-line drugs
- Atypical antipsychotics Clarified that both brand and generic Saphris<sup>®</sup> (asenapine) are covered as second-line drugs

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





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

If you have questions about the 2021 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







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