

PHARMACY BENEFIT PRIOR AUTHORIZATION UPDATES

May 16th 2022

Below are upcoming updates to pharmacy benefit medication prior authorization criteria for Community Health Choice's Marketplace plans.

Drug/Class	Effective Date	Overview
Ozobax (baclofen) susp	6/1/2022	Adding to the formulary with PA (if > 9 years old)
Rinvoq	6/1/2022	Adding Ulcerative Colitis indication to PA form
Lynparza	6/1/2022	Adding new Breast Cancer indication to PA form
Hepatitis C Agents (sofosbuvir/velpatasvir (Epclusa equiv), ledipasvir/sofosbuvir (Harvoni equiv), Mavyret, Vosevi)	6/1/2022	Updating PA criteria to align with treatment guidelines
Humira	6/1/2022	Removing step through traditional DMARDs for Crohn's and UC indications to align with treatment guidelines
Stelara	6/1/2022	Removing step through traditional DMARDs for Crohn's and UC indications to align with treatment guidelines
Topical androgen products (Androderm, testosterone)	6/1/2022	Replacing lab value requirement with provider attestation on PA form
Viibryd	6/1/2022	Removing specialist requirement from PA form
Promacta	6/1/2022	Adding continuation criteria for chronic immune thrombocytopenia
Doptelet	6/1/2022	Adding continuation criteria for chronic immune thrombocytopenia
Tavalisse	6/1/2022	Adding continuation criteria for chronic immune thrombocytopenia
Corlanor	6/1/2022	Adding PA criteria for inappropriate sinus tachycardia and postural orthostatic tachycardia syndrome