

PROVIDER Update



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Medication Trend Updates and Formulary Changes – 2nd Quarter 2019

Review information on updated medication patent expirations and CalViva Health formulary changes for the second quarter of 2019

Stay up to date with:

- New generic medications in 2019.
- Changes to the CalViva Health formulary for the second quarter of 2019.

Patent expiration for brand-name medications

During 2019, the medications listed below are expected to be available as generic equivalents as their patents expire.

Medication Patent Expirations

1st Quarter	Fentora, [®] # Nuvaring [®]
2nd Quarter	Lyrica, [®] Tarceva, [®] Travatan Z, [®] Vesicare [®]
3rd Quarter	N/A
4th Quarter	Jadenu [®]

Nonformulary

Patents are granted by the United States Patent and Trademark Office along the development lifeline of a medication and they expire 20 years from the date of filing. When a brand-name medication loses its patent, lower-priced generics enter the market. Food and Drug Administration (FDA)-approved generic drugs are made under the same strict standards as their brand-name counterparts and are bioequivalent, delivering the same amount of active ingredients into a patient's bloodstream in the same amount of time as their brand-name product.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
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- Ancillary Providers

PROVIDER SERVICES

1-888-893-1569

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CalViva Health formulary changes

The Pharmacy and Therapeutics (P&T) Committee, which includes practicing physicians, pharmacists and other health care professionals, reviews medications on the CalViva Health formulary each quarter to determine medications to stay on or be moved to a different status. A list of some recent changes is provided below. The list contains brand-name prescription medications, status, other medications choices, and comments for the second quarter 2019.

A complete CalViva Health formulary is available on the provider website at provider.healthnet.com under *Pharmacy Information*.

Medication	Status	Formulary Alternative(s)	Comments
ORAL MEDICATIONS			
Copiktra™ (duvelisib) capsule	NF*	CLL/SLL: Imbruvica®* QL** Venclexta®*, ** Zydelig®*, ** Rituxan®*, ** FL: Zydelig*, **	Treatment of adult patients with relapsed or refractory chronic lymphocytic leukemia (CLL) or small lymphocytic lymphoma (SLL) after at least two prior therapies Treatment of adult patients with relapsed or refractory follicular lymphoma (FL) after at least two prior systemic therapies
Doptelet® (avatrombopag) tablet	NF		Treatment of thrombocytopenia in adult patients with chronic liver disease who are scheduled to undergo a procedure
Epidiolex® (cannabidiol) oral solution	NF	clonazepam, felbamate (Felbatol®), lamotrigine, levetiracetam (Keppra), topiramate (Topamax®), valproic acid ** (Depakene®), divalproex sodium (Depakote®), Banzel® **	Treatment of seizures associated with Dravet Syndrome (DS) or Lennox-Gastaut Syndrome (LGS) in patients age 2 and older
Krintafel® (tafenoquine) tablet	F	hydroxychloroquine	Radical cure (prevention of relapse) of Plasmodium vivax malaria in patients age 16 and older who are receiving appropriate antimalarial therapy for acute P. vivax infection. Limitation(s) of use: Krintafel is not indicated for the treatment of acute P. vivax malaria. For Medicare, quantity limit is 2 tablets per 30 days.
Lokelma® (sodium zirconium cyclosilicate) packet for oral suspension	NF	sodium polystyrene sulfonate (Kayexalate)	Treatment of hyperkalemia in adults Limitation(s) of use: Lokelma should not be used as an emergency treatment for life-threatening hyperkalemia because of its delayed onset of action. Step therapy requires a trial of generic Kayexalate first.

Medication	Status	Formulary Alternative(s)	Comments
Lorbrena [®] (lorlatinib) tablet	NF	Alecensa [®] *,** Alunbrig [®] *,** Xalkori [®] *,**	Treatment of patients with anaplastic lymphoma kinase (ALK)-positive metastatic non-small cell lung cancer (NSCLC) whose disease has progressed on the following: <ul style="list-style-type: none"> • Crizotinib and at least one other ALK inhibitor for metastatic disease; or • Alectinib as the first ALK inhibitor therapy for metastatic disease; or • Ceritinib as the first ALK inhibitor therapy for metastatic disease
Mulpleta [®] (lusutrombopag) tablet	NF		Treatment of thrombocytopenia in adult patients with chronic liver disease who are scheduled to undergo a procedure
Nuzyra [™] (omadacycline) tablet	NF	amoxicillin/clavulanate, azithromycin, cefuroxime, clarithromycin, levofloxacin	Treatment of adult patients with the following infections caused by susceptible microorganisms: <ul style="list-style-type: none"> • Community-acquired bacterial pneumonia (CABP) <i>Streptococcus pneumoniae</i>, <i>Staphylococcus aureus</i> (methicillin-susceptible isolates), <i>Haemophilus influenzae</i>, <i>Haemophilus parainfluenzae</i>, <i>Klebsiella pneumoniae</i>, <i>Legionella pneumophila</i>, <i>Mycoplasma pneumoniae</i>, and <i>Chlamydia pneumoniae</i> • Acute bacterial skin and skin structure infections (ABSSSI) <i>Staphylococcus aureus</i> (methicillin-susceptible and -resistant isolates), <i>Staphylococcus lugdunensis</i>, <i>Streptococcus pyogenes</i>, <i>Streptococcus anginosus</i> grp. (includes <i>S. anginosus</i>, <i>S. intermedius</i>, and <i>S. constellatus</i>), <i>Enterococcus faecalis</i>, <i>Enterobacter cloacae</i>, and <i>Klebsiella pneumoniae</i>
Seysara [™] (sarecycline) tablet	NF	doxycycline, minocycline, tetracycline	Treatment of inflammatory lesions of non-nodular moderate to severe acne vulgaris in patients age 9 and older
Talzenna [™] (talazoparib) capsule	NF	Lynparza [®] *,**	Treatment of adult patients with deleterious or suspected deleterious germline BRCA-mutated (gBRCAm) HER2-negative locally advanced or metastatic breast cancer. Select patients for therapy based on an FDA-approved companion diagnostic for Talzenna

Medication	Status	Formulary Alternative(s)	Comments
Vizimpro® (dacomitinib) tablet	NF	Iressa® ** Gilotrif® * ** Tagrisso® *, ** Tarceva® *, **	First-line treatment of patients with metastatic non-small cell lung cancer (NSCLC) with EGFR exon 19 deletion or exon 21 L858R substitution mutations as detected by an FDA-approved test
OPHTHALMIC PREPARATIONS			
Oxervate™ (cenegermin-bkbj) ophthalmic solution	NF		Treatment of neurotrophic keratitis
TOPICAL PREPARATIONS			
Xepi™ (ozenoxacin) cream	NF	mupirocin (Bactroban)	Topical treatment of impetigo due to Staphylococcus aureus or Streptococcus pyogenes in adult and pediatric patients age 2 months and older
INJECTABLE PREPARATIONS			
Ajovy™ (fremanezumab-vfrm) prefilled syringe	NF	Anticonvulsants: divalproex (Depakote), topiramate (Topamax) Beta-blockers: metoprolol, propranolol, timolol Antidepressants/tricyclic antidepressants: amitriptyline (Elavil®), venlafaxine (Effexor®)	Preventive treatment of migraine in adults
Emgality™ (galcanezumab-gnlm) prefilled syringe	NF	Anticonvulsants: divalproex (Depakote), topiramate (Topamax) Beta-blockers: metoprolol, propranolol, timolol Antidepressants/ tricyclic antidepressants: amitriptyline (Elavil), venlafaxine (Effexor)	Preventive treatment of migraine in adults
Gamifant™ (emapalumab-lzsg) single-dose vial	Medical benefit		Treatment of adult and pediatric (newborn and older) patients with primary hemophagocytic lymphohistiocytosis (HLH) with refractory, recurrent or progressive disease or intolerance with conventional HLH therapy
Onpatro™ (patisiran) single-dose vial	Medical benefit		Treatment of the polyneuropathy of hereditary transthyretin-mediated amyloidosis in adults

Medication	Status	Formulary Alternative(s)	Comments
Takhzyro™ (lanadelumab-fylo) single-dose vial	NF	Cinryze®*,**	For prophylaxis to prevent attacks of hereditary angioedema (HAE) in patients age 12 and older
Tegsedi™ (inotersen) prefilled syringe	NF		Treatment of the polyneuropathy of hereditary transthyretin-mediated amyloidosis in adults

*Prior authorization (PA) is required to verify member eligibility and that the member satisfies clinical protocols to ensure appropriate use of the medication.

**CCS = California Children's Services: refer to www.dhs.gov for the local telephone number to determine member's coverage eligibility.

- F indicates formulary.
- NF indicates nonformulary; NP indicates nonpreferred. These medications require member-specific medical reasons why formulary medications cannot be considered. Requests are reviewed via Health Net's prior authorization process.
- SP indicates specialty tier.
- AL indicates age limit.
- EST indicates electronic step therapy.
- QL indicates quantity limit.

Additional Information

If you need additional information regarding the CalViva Health formulary, contact the Pharmacy Department by telephone at 1-800-867-6564, press option #2, or by fax at 1-800-977-8226. For all other questions contact CalViva Health at 1-888-893-1569.

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Summary Update: Medication Trend Updates and Formulary Changes – 2nd Quarter 2019

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Additional Information

To obtain a comprehensive description of the above topics, the complete update, 19-439, is available on the provider portal, at provider.healthnet.com, in the Provider Library under *Updates and Letters > 2019*; search for provider update 19-439. Providers who do not have access to the Internet may request a print copy of update 19-439 by contacting the Provider Communications Department by email at provider.communications@healthnet.com.

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