PROVIDER*Update*

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CONTRACTUAL | SEPTEMBER 19, 2019 | UPDATE 19-701 | 6 PAGES

Medication Trend Updates and Formulary Changes – 3rd Quarter 2019

Review changes that improve patient safety and encourage medication adherence

Stay up to date with info about:

- Safety edits for first-time opioid prescriptions.
- Zero copays to reduce adherence barriers for Medicare Advantage (MA) members.
- Boxed warnings for certain prescription sleeping drugs.
- Changes to the Health Net* commercial *Formulary*, *Medi-Cal Preferred Drug List (PDL*) and Medicare Part D *Formulary* for the third quarter of 2019.

Safety edits to limit first-time opioid prescriptions for on- and off-Exchange commercial members

In 2016, the Centers for Disease Control and Prevention (CDC) provided a checklist for prescribing opioids. This guideline provides recommendations for the prescribing of opioid pain medication for chronic pain (i.e., pain conditions that typically last greater than three months or past the time of normal tissue healing) in outpatient settings outside of active cancer treatment, palliative care and end-of-life care.

The CDC recommends non-pharmacological therapy and non-opioid therapy as preferred treatment for chronic non-cancer pain. However, when opioids are started, clinicians should prescribe no greater quantity than needed for the expected duration of pain severe enough to require opioids. Three days or less will often be sufficient; more than seven days will rarely be needed.

According to the CDC *Morbidity and Mortality Weekly Report* (*MMWR*), the rate of long-term use was relatively low (6.0% on opioids one year later) for persons with at least one day of opioid therapy, but increased to 13.5% for persons whose first episode of use was for ≥ 8 days and to 29.9% when the first episode of use was for ≥ 31 days (https://www.cdc.gov/mmwr/volumes/66/wr/mm6610a1.htm).

To ensure the safe use of prescription opioids, Health Net is limiting first time opioid prescriptions to seven days effective June 20, 2019, for Covered California™ members and June 10 for all other California commercial members.

- Only patients who have not filled an opioid prescription within the past 90 days or who are newly starting opioids (opioid naïve) will be limited to a seven-day supply. The limitation does not apply to patients already taking opioids.
- This policy does not apply to patients in active cancer treatment, hospice, palliative care, end-of-life care, those living in a long-term care facility, or patients already taking opioids. These members can ask for an exception to the coverage decision.
- This policy does not affect patient access to medication-assisted treatment (MAT), such as buprenorphine for the treatment of opioid dependence or addiction. Note:

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- ● Participating Physician Groups
- ○ Hospitals
- ○ Ancillary Providers

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buprenorphine products (Belbuca® and Butrans®) indicated and prescribed to treat pain are subject to the limit.

- If a prescriber believes that an opioid naïve patient will need more than a seven-day supply initially, the provider may request a coverage determination (prior authorization) on behalf of the patient. Additionally, if a provider assesses upon re-evaluation that a patient will need additional opioid therapy, subsequent prescriptions will not be subject to the seven-day supply limit, as the patient will no longer be considered opioid naïve.

Zero copayment program for Medicare Advantage members

Health Net continues to encourage member medication adherence and offers zero copayment on some medications to help alleviate barriers to medication adherence and help members better manage their chronic diseases. Most of the medications listed below – in the statins, anti-diabetic agents (not including insulin), angiotensin-converting enzyme inhibitor (ACEI), and angiotensin II receptor blocker (ARB) medication classes – are included on the Select Care tier without copayments for MA members. Members should contact the Health Net Medicare Programs Member Services Department, as listed on the member identification (ID) card, to ensure deductibles have been met.

Zero-Copayment Medications for Medicare Advantage Members

Class	Medication		
Lipid management (statins)	• atorvastatin calcium tablet • fluvastatin sodium capsule	• lovastatin tablet • pravastatin sodium tablet	• simvastatin tablet
Anti-diabetic agents	• acarbose tablet • glipizide tablet and glipizide SR 24-hour (HR) • glipizide/metformin HCl tablet • metformin HCl tablet	• metformin HCl tablet SR 24 HR (generic for Glucophage XR®) • nateglinide tablet • pioglitazone HCl tablet • pioglitazone HCl/glimepiride tablet	• pioglitazone HCl/metformin HCl tablet • repaglinide tablet • tolazamide tablet • tolbutamide tablet
ACEIs/ARBs	• benazepril HCl tablet • benazepril/HCTZ tablet • benazepril/amlodipine besylate capsule • candesartan cilexetil tablet • candesartan cilexetil/HCTZ tablet • captopril tablet • captopril/HCTZ tablet • enalaprilat injection 1.25 mg/ml	• enalapril maleate tablet • enalapril maleate/HCTZ tablet • fosinopril sodium tablet • fosinopril sodium/HCTZ tablet • irbesartan tablet • irbesartan/HCTZ tablet • lisinopril tablet • lisinopril/HCTZ tablet • losartan potassium tablet	• osartan potassium/HCTZ tablet • moexipril HCl tablet • moexipril/HCTZ tablet • perindopril erbumine tablet • quinapril HCl tablet • quinapril/HCTZ tablet • ramipril capsule • trandolapril tablet • valsartan tablet • valsartan/HCTZ tablet

- SR – sustained release, XR – extended release, HCl – hydrochloride, HCTZ – hydrochlorothiazide

Boxed warning on certain prescription sleeping drugs

On April 30, 2019, the U.S. Food and Drug Administration (FDA) announced that a boxed warning on certain prescription sleeping drugs, including eszopiclone (Lunesta®), zaleplon (Sonata®) and zolpidem (Ambien,® Ambien® CR, Edluar,® Intermezzo, and Zolpimist™), would be added to the prescribing information and the patient Medication Guides for these medicines advising patients about the risk of serious side effects that can lead to death.

The FDA identified 66 cases of complex sleep behaviors occurring with these medicines over the past 26 years that resulted in serious injuries, including death. Serious injuries and death from complex sleep behaviors (including sleepwalking, sleep driving and engaging in other activities while not fully awake) have occurred in patients with and without a history of such behaviors, even at the lowest recommended doses. These incidents can occur after just one dose or after a longer period of treatment. These behaviors can occur after taking these medicines with or without alcohol or other central nervous system depressants that may be sedating, such as tranquilizers, opioids and anti-anxiety medicines. The underlying mechanisms by which these insomnia medicines cause complex sleep behaviors are not completely understood.

Health care professionals should not prescribe eszopiclone, zaleplon or zolpidem to patients who have previously experienced complex sleep behaviors after taking any of these medicines. Advise all patients that, although rare, the behaviors caused by

these medicines have led to serious injuries or death. Tell the patient to discontinue taking these medicines if they experience an episode of complex sleep behavior.

For more information, visit www.fda.gov/drugs/drug-safety-and-availability/fda-adds-boxed-warning-risk-serious-injuries-caused-sleepwalking-certain-prescription-insomnia.

Changes to the Commercial *Formulary, Medi-Cal PDL* and Medicare Part D *Formulary*

The Health Net Pharmacy and Therapeutics (P&T) Committee, which includes practicing physicians, pharmacists and other health care professionals, reviews medications on the *Formulary* for commercial members, *PDL* for Medi-Cal members and the Medicare Part D *Formulary* for Medicare members each quarter to determine medications to stay on or be moved to a different tier. A list of some recent changes is provided in a table beginning on page 4. The list contains brand-name prescription medications, status, other medications choices, and comments for the third quarter of 2019.

Complete lists of the commercial *Formularies, Medi-Cal PDLs* and Medicare Part D *Formularies* are available on the Health Net provider website as listed below under *Pharmacy Information*.

Pharmacy help line

For more information regarding changes to the Health Net commercial *Formulary*, *Health Net Medi-Cal PDL* or Medicare Part D *Formulary*, contact the proper pharmacy telephone numbers listed below:

- **Pharmacy Services (commercial):** 1-800-548-5524, option #3; fax 1-800-314-6223
- **Pharmacy Service Center (Medi-Cal, Medicare and Cal MediConnect):** 1-800-867-6564; fax 1-800-977-8226
- **Health Net Clinical Pharmacy Line (clinical programs):** 1-800-782-2221

Additional information

If you have questions regarding the information contained in this update, contact the applicable Health Net Provider Services Center within 60 days at:

Line of Business	Telephone Number	Provider Portal	Email Address
EnhancedCare PPO (IFP)	1-844-463-8188	provider.healthnetcalifornia.com	provider_services@healthnet.com
EnhancedCare PPO (SBG)	1-844-463-8188	provider.healthnet.com	
Health Net Employer Group HMO, POS, HSP, PPO, & EPO	1-800-641-7761	provider.healthnet.com	
IFP (CommunityCare HMO, PPO, PureCare HSP, PureCare One EPO)	1-888-926-2164	provider.healthnetcalifornia.com	
Medicare (individual)	1-800-929-9224	provider.healthnetcalifornia.com	
Medicare (employer group)	1-800-929-9224	provider.healthnet.com	
Medi-Cal	1-800-675-6110	provider.healthnet.com	N/A

Health Net Commercial *Formulary, Medi-Cal PDL* and Medicare Part D *Formulary* Changes

Medication	Status			Health Net Formulary Alternative(s)			Comments
	Commercial 3-Tier Plan (4-Tier Plan)	Medicare Part D Value[1]	Medi-Cal	Commercial (Tier 1 or 2)	Medicare Part D Value[1] (Tier 1, 2, 3, 4 or 6)	Medi-Cal	
ORAL MEDICATIONS							
Daurismo™ (glasdegib) tablet	Tier 2* (SP*)	Tier 5 (*for new starts only)	NF	Venclexta*	Venclexta (*for new starts only)	Venclexta*, **	In combination with low-dose cytarabine, for the treatment of newly-diagnosed acute myeloid leukemia (AML) in adult patients who are age 75 or older or who have comorbidities that preclude use of intensive induction chemotherapy. Limitation(s) of use: Daurismo has not been studied in patients with the comorbidities of severe renal impairment or moderate-to-severe hepatic impairment.
Firdapse® (amifampridine) tablet	Tier 3* (SP*)	Tier 5* (QL)	NF	guanidine, pyridostigmine	guanidine, pyridostigmine	pyridostigmine	Treatment of Lambert-Eaton myasthenic syndrome (LEMS) in adults For Medicare, quantity limit is 8 tablets per day.

Medication	Status			Health Net Formulary Alternative(s)			Comments
	Commercial 3-Tier Plan (4-Tier Plan)	Medicare Part D Value[1]	Medi-Cal	Commercial (Tier 1 or 2)	Medicare Part D Value[1] (Tier 1, 2, 3, 4 or 6)	Medi-Cal	
Vitrakvi® (larotrectinib) capsule and oral solution	Tier 2* (SP*)	Tier 5 (*for new starts only)	NF				Treatment of adult and pediatric patients with solid tumors that: • Have a neurotrophic receptor tyrosine kinase (NTRK) gene fusion without a known acquired resistance mutation, • Are metastatic or where surgical resection is likely to result in severe morbidity, and • Have no satisfactory alternative treatments or that have progressed following treatment
Xospata® (gilteritinib) tablet	Tier 2* (SP*)	Tier 5 (*for new starts only)	NF				Treatment of adult patients who have relapsed or refractory AML with a FMS-like tyrosine kinase 3 (FLT3) mutation as detected by an FDA-approved test

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INTRANASAL PREPARATIONS							
Spravato™ (esketamine) nasal spray	NF (NF)	Tier 5 (*for new starts only)	NF	Selective serotonin reuptake inhibitor (SSRI): citalopram, escitalopram, fluoxetine, paroxetine, sertraline Serotonin-norepinephrine reuptake inhibitor (SNRI): duloxetine, venlafaxine, desvenlafaxine Tricyclic antidepressant (TCA): amitriptyline, amoxapine, desipramine, doxepin, imipramine, nortriptyline Other antidepressants: bupropion, mirtazapine	Selective serotonin reuptake inhibitor: citalopram, escitalopram, fluoxetine, paroxetine, sertraline Serotonin-norepinephrine reuptake inhibitor: duloxetine, venlafaxine, desvenlafaxine Tricyclic antidepressant: amitriptyline, amoxapine, desipramine, doxepin, imipramine, nortriptyline, protriptyline, trimipramine Other antidepressants: bupropion, mirtazapine	Selective serotonin reuptake inhibitor: citalopram, escitalopram, fluoxetine, paroxetine, sertraline Serotonin-norepinephrine reuptake inhibitor: duloxetine, venlafaxine, desvenlafaxine Tricyclic antidepressant: amitriptyline, desipramine, doxepin, imipramine, nortriptyline, protriptyline Other antidepressants: bupropion, mirtazapine	Treatment of treatment-resistant depression (TRD) in adults, in conjunction with an oral antidepressant. Limitation(s) of use: Spravato is not approved as an anesthetic agent. The safety and effectiveness of Spravato as an anesthetic agent have not been established.

[1]Medicare Part D Value Formulary = Health Net Seniority Plus Amber I (HMO SNP), Health Net Seniority Plus Amber II (HMO SNP), Health Net Healthy Heart (HMO)

*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.dhcs.gov for the local telephone number to determine member's coverage eligibility.

- F indicates formulary.
- NF indicates nonformulary. 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.
- QL indicates quantity limit.

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For more information, visit www.fda.gov/drugs/drug-safety-and-availability/fda-adds-boxed-warning-risk-serious-injuries-caused-sleepwalking-certain-prescription-insomnia.

Changes to the Commercial *Formulary, Medi-Cal PDL* and Medicare Part D *Formulary*

A list of recent changes to the Health Net commercial *Formulary, Medi-Cal PDL* and Medicare Part D *Formulary* is available in the complete provider update 19-701, *Medication Trend Updates and Formulary Changes – 3rd Quarter 2019*. The list contains brand-name prescription medications, status, alternatives, and comments.

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Additional information

To obtain a comprehensive description of the above topics, the complete update, 19-701, is available on the Health Net provider portal in the Provider Library under *Updates and Letters* > *2019*; search for provider update 19-701. Providers who do not have access to the Internet may request a print copy of update 19-701 by contacting the Health Net Provider Communications Department by email at provider.communications@healthnet.com.

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