

West Virginia Bureau for Medical Services

Preferred Drug List Changes

P&T Meeting Date: April 27, 2022

PDL Changes Effective Date: July 1, 2022



July, 2022

WEST VIRGINIA MEDICAID PHARMACY DEPARTMENT

<https://dhhr.wv.gov/bms/BMS%20Pharmacy>
<http://www.dhhr.wv.gov/bms/Pharmacy>

PROVIDER SERVICES

888-483-0793
888-483-0801 (Pharmacy)
304-348-3360
Monday – Friday
8:00 am until 5:00 pm

PHARMACY HELP DESK & PHARMACY PRIOR AUTHORIZATION (RATIONAL DRUG THERAPY PROGRAM)

800-847-3859 (Phone)
800-531-7787 (Fax)
Monday – Saturday
8:30 am until 9:00 pm
Sunday 12:00 pm until 6:00 pm

MEMBER SERVICES

888-483-0797
304-348-3365
Monday – Friday
8:00 am until 5:00 pm

PREFERRED DRUG LIST

For a copy of the most recent preferred drug list, visit:

<https://dhhr.wv.gov/bms/BMS%20Pharmacy/Pages/Preferred-Drug-List.aspx>

Hepatitis C PA Criteria Changes

At the May 25th DUR board meeting the committee members voted to change the criteria for the Hepatitis C category.

The changes highlighted requirements for a specialist consult for uncomplicated patients namely those who are over 18, treatment-naïve, non-cirrhotic, HBV and HIV negative, and non-pregnant.

The updated criteria can be seen below and can be found at the link below:

Criteria for Approval

- 1) If all of the following are met, a consult is not required*: Patient is 18 years of age or older, treatment-naïve, non-cirrhotic, HBV-negative, HIV negative, and non-pregnant. *While a consult is not required, it is highly recommended that the prescriber is educated in the treatment and diagnosis of Hepatitis C through an academic/training mentorship program such as Project ECHO and/or WVHAMP.

Therapy requested for a patient who does not meet all the above criteria, for re-treatment or for a patient experiencing cirrhosis must be prescribed by, or in conjunction with, a gastroenterologist, hepatologist or infectious disease physician. For these patients, consults are permitted, including those through Project ECHO and WVHAMP, however the date of the consult and the contact information for all physicians involved must be submitted with the request for prior authorization; **AND**

In addition to the above, the requirement for sobriety has been removed.

Link to the updated criteria is here:

<https://dhhr.wv.gov/bms/BMS%20Pharmacy/Documents/Drug%20PA%20Criteria/Hepatitis%20C%20Criteria%20updated%205.26.2022.pdf>

Apretude Overview

On July 1st Apretude (cabotegravir) will be added to the WV PDL as a preferred product. Apretude is the first long-acting injectable medication for pre-exposure prophylaxis (PrEP) for HIV. Along with Apretude, two oral medications: Descovy and Truvada are also indicated for HIV PrEP. Truvada is also available in generic form (emtricitabine/tenofovir).

Apretude is a HIV-1 integrase strand transfer inhibitor. It is indicated for at-risk adults and adolescents weighing at least 35kg for pre-exposure prophylaxis (PrEP) to reduce the risk of sexually acquired HIV-1 infection. Individuals must have a negative HIV-1 test prior to initiating Apretude (with or without an oral lead-in with oral cabotegravir) for HIV-1 PrEP.

Apretude is a physician administered gluteal IM injection. It comes in a single-dose vial of 600 mg/3 mL and is given as a 600 mg dose at months 1 and 2 and then bimonthly for maintenance dosing. A lead in with oral cabotegravir is optional.

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<p>STATE MAXIMUM ALLOWABLE COST (SMAC)</p> <p>SMAC Review Form: https://dhhr.wv.gov/bms/BMS%20Pharmacy/SMAC/Pages/default.aspx</p> <p>Please refer questions to Change Healthcare at 1-855-389-9504 or e-mail to: PBA_WVSMAC@changehealthcare.com</p>	<p>Due to the risk of development of drug resistance and to ensure adequate reduction of risk for acquiring HIV providers should carefully select individuals who agree to the required dosing and testing schedule.</p> <p>Apretude comes with a box warning the risk of drug resistance in undiagnosed HIV infection. The most common adverse effect was injection site reaction.</p> <p>Apretude's safety and efficacy were assessed by 2 randomized, double-blind, controlled trials (HPTN 083 and HPTN 084). Apretude was studied against an active comparator (Truvada). The primary analysis demonstrated the superiority of Apretude compared with Truvada with an 88% reduction in the risk of acquiring incident HIV-1 infection (study HPTN 084) and with a 66% reduction in the risk of acquiring HIV-1 infection (study HPTN 083).</p> <p>Apretude is now available without a prior authorization requirement.</p>
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Upcoming PDL Changes

The following changes will be made to the Preferred Drug List (PDL), effective July 1st, 2022, having received approval by the P&T Committee, BMS, and Secretary of DHHR.

For a comprehensive PDL, refer to: <https://dhhr.wv.gov/bms/BMS%20Pharmacy/Pages/Preferred-Drug-List.aspx>

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
Anticonvulsants	lacosamide tablets
Antiretrovirals-Products for PrEP	Apretude (cabotegravir)
Hypoglycemics, Insulin	Novolin N (insulin)
Immunomodulators, Atopic Dermatitis	Adbry (tralokinumab)
Ophthalmics, Glaucoma Agents	pilocarpine
Oral and Topical Contraceptives	*See bottom of page

NEW NON-PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
Anticonvulsants	Eprontia solution (topiramate)

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NEW NON-PREFERRED DRUGS

THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
Anticonvulsants	Vimpat (lacosamide) tablets
Dry Eye Products	cyclosporine droperette
Dry Eye Products	Tryvaya (varenicline)
Growth Hormone	Skytrofa (lonapegsomatropin)
Lipotropics, Other	fenofibrate micronized 30 and 90 mg
NSAIDS	EC-naproxen DR tablet
NSAIDS	Elyxyb (celecoxib)
NSAIDS	Indocin suspension (indomethacin)
NSAIDS	Lofena (diclofenac)
NSAIDS	naproxen suspension
Ophthalmics, Glaucoma Agents	brimonidine-timolol
Skeletal Muscle Relaxants	baclofen solution
Oral and Topical Contraceptives	*See bottom of page

Oral and Topical Contraceptives

Moving to Preferred on 7/1/2022

AFIRMELLE	EMOQUETTE	levonorgestrel-ethinyl estradiol (generic
ALTAVERA	ENSKYCE	Loseasonique) 3MO
APRI	ERRIN	LILLOW
AUROVELA	ESTARYLLA	LO LOESTRIN FE
AVIANE	ESTROSTEP FE	LUTERA
AYUNA	FALMINA	LYLEQ
AZURETTE	FEMYNOR	LYZA
BEYAZ	HAILEY FE	MARLISSA
BLISOVI FE	HEATHER	MICROGESTIN FE
CAMILA	INCASSIA	MILI
CAMRESE 3MO	ISIBLOOM	MONO-LINYAH
CHATEAL	JENCYCLA	MY CHOICE
CHATEAL EQ	JOLESSA 3MO	MY WAY
CYCLAFEM	JULEBER	NATAZIA
CYRED	JUNEL FE	NEW DAY
CYRED EQ	KARIVA	NIKKI
DEBLITANE	KURVELO	NORA-BE
desogestrel-ethinyl estradiol	LESSINA	norethindrone
desogestrel-ethinyl estradiol/ethinyl estradiol	LEVONEST	norethindrone-e.estradiol-iron
	levonorgestrel	norethindrone-ethinyl estradiol

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norgestimate-ethinyl estradiol	TARINA FE 1-20 EQ	TRI-VYLIBRA LO
NORLYDA	TAYTULLA	TULANA
NYLIA	TRI FEMYNOR	VIENVA
NYMYO	TRI-ESTARYLLA	VIORELE
OCELLA	TRI-LINYAH	VOLNEA
OPCICON ONE-STEP	TRI-LO-ESTARYLLA	VYLIBRA
ORSYTHIA	TRI-LO-MARZIA	XULANE PATCH
PORTIA	TRI-LO-MILI	YASMIN 28
PREVIFEM	TRI-LO-SPRINTEC	YAZ
SHAROBEL	TRI-MILI	ZOVIA 1-35
SIMLIYA	TRI-NYMYO	ZOVIA 1-35E
SPRINTEC	TRI-PREVIFEM	ZUMANDIMINE
SRONYX	TRI-SPRINTEC	
TARINA FE	TRI-VYLIBRA	

Moving to Non-Preferred 7/1/2022

ALYACEN	GEMMILY	LOJAIMIESS 3MO
AMETHIA 3MO	GENERESS FE CHEW TAB	LORYNA
ARANELLE	HAILEY	LOSEASONIQUE 3MO
ASHLYNA 3MO	HAILEY 24 FE	LOW-OGESTREL
AUROVELA 24 FE	ICLEVIA 3MO	LO-ZUMANDIMINE
AUROVELA FE	INTROVALE 3MO	MERZEE
BALCOLTRA	JAIMIESS 3MO	MICROGESTIN
BALZIVA	JASMIEL	MICROGESTIN 24 FE
BLISOVI 24 FE	JUNEL	MINASTRIN 24 FE CHEW TAB
BRIELLYN	JUNEL FE 24	MIRCETTE
CAMRESE LO 3MO	KAITLIB FE	NECON
CAZIAN	KALLIGA	NEXTSTELLIS
CHARLOTTE 24 FE CHEW TAB	KELNOR 1-35	norethindrone-e.estradiol-iron
CRYSSELLE	KELNOR 1-50	norethindrone-e.estradiol-iron chew tab
DASETTE	LARIN	NORTREL
DAYSEE 3MO	LARIN 24 FE	OPTION 2
drosiprenone-ethy estra-levomef	LARIN FE	PHEXXI VAGINAL GEL
drosiprenone-ethinyl estradiol	LARISSIA	PHILITH
ECONTRA EZ	LAYOLIS FE CHEW TAB	PIMTREA
ECONTRA ONE-STEP	LEENA	PIRMELLA
ELINEST	levonorgestrel-ethinyl estradiol (generic	QUARTETTE
ELLA	Jolessa) 3 MO	RECLIPSEN
ENPRESSE	LEVORA-28	RIVELSA 3MO
ethynodiol-ethinyl estradiol	LOESTRIN	SAFYRAL
FAYOSIM 3MO	LOESTRIN FE	SEASONIQUE 3MO

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SETLAKIN 3MO
SIMPESSE 3MO
SLYND
SYEDA
TARINA 24 FE
TAYSOFY
TILIA FE
TRI-LEGEST FE
TRIVORA-28
TWIRLA PATCH
TYBLUME CHEW TAB
TYDEMY
VELIVET
VESTURA
VYFEMLA
WERA
WYMZYA FE CHEW TAB
ZAFEMY

