

## Drug Formulary Update, April 2012

Updates to the HealthPartners Drug Formularies are listed below.

Updates for the Commercial Drug Formularies and the Minnesota Health Care Programs (Medicaid and Minnesota Care “State Programs”) Drug Formulary are listed first, and then changes for the Medicare Drug Formulary.

<b>Commercial and Minnesota Health Care Programs</b>
--

These changes are effective April 1, 2012, and apply to PreferredRx, GenericsPlusRx, and HealthPartners Minnesota Health Care Programs (Medicaid and Minnesota Care “State Programs”) Drug Formularies.

Medication	Status	Notes				
Abatacept (Orencia)	NF	Orencia is a specialty medication for rheumatoid arthritis, now available in a new SQ formulation. Orencia is reserved for <i>prescribing by Rheumatology, for patients who have tried and failed (or with medical contra-indications to) Enbrel and Humira.</i>				
ADHD Medications	QL	Quantity limits have been added for ADHD Medications. Daily quantity limits and formulary status is shown in this table.				
		generic name	Brand Name	Dosage Form	Daily Limit	Formulary Status
		amphetamine-dextroamphetamine	Adderall XR	ER capsule	3	F
			Adderall	Tablet	6	F
		methylphenidate	Concerta	ER tablet	3	F
			Ritalin	Tablet	6	F
			Ritalin SR	ER tablet	4	F
			Metadate CD	MR capsule	3	
			Ritalin LA	MR capsule	3	NF
			Daytrana	Patch	3	NF
			lisdexamfetamine	Vyvanse	Capsule	3
		dexmethylphenidate	Focalin	Tablet	6	F
			Focalin XR	MR capsule	3	NF
		dextroamphetamine	Dexedrine	ER capsule	6	F
			Dextrostat	Tablet	6	F
		atomoxetine	Strattera	Capsule	3	F
guanfacine	Intuniv	ER tablet	3			
clonidine	Kapvay	SR tablet	4			

(continued on next page)

Medication	Status	Notes
ADHD Medications (continued from previous page)	QL	<p>Daily Quantity Limits are the maximum number of pills allowed per day. For example, a limit of three means that up to three pills per day is covered.</p> <p>Coverage for patients currently using greater quantities has been extended through May 31 2012. These members will receive a letter from HealthPartners notifying them of changes.</p> <p>Providers are asked to write for lower quantities when possible (e.g. one Adderall XR 30mg capsule rather than three capsules of Adderall XR 10mg), and to contact HealthPartners for unique situations that require greater quantities.</p> <p>The formulary status is also included in the above table. Several medications have a different status on the Drug Formularies.</p> <p>Metadate CD is on-formulary for PreferredRx and GenericsPlusRx, but non-formulary for State Programs.</p> <p>Intuniv is on formulary for children and adolescents <math>\geq</math> 17 years of age.</p> <p>Kapvay is PA for PreferredRx, NF for GenericsPlusRx, and PA for State Programs.</p>
Aliskiren (Tekturna) and combinations	NF	<p>Aliskiren products are now non-formulary.</p> <p>Changes were prompted by a recent safety advisory that suggests that aliskiren should not be given concurrently with ACE inhibitors or with ARB medications in patients with diabetes.</p> <p>Affected products are aliskiren (Tekturna), Tekturna HCT (a combination with hydrochlorothiazide), Valtorna (with Diovan), Tekamlo (with amlodipine), and Amturnide (with amlodipine and hydrochlorothiazide).</p> <p>Current members have been grandfathered to allow continued therapy. Providers are encouraged to review therapy for patients receiving these products.</p>
Aprepitant (Emend)	F	Emend has been added to GenericsPlusRx, and is now on formulary for all Commercial and State Program Formularies.
Bromocriptine (Cycloset)	PA	This new form of bromocriptine is indicated for diabetes. Cycloset is reserved for <i>patients with inadequate control after two or more oral diabetes medications.</i>
Clobazam (Onfi)	PA	Onfi is a new seizure medication, for Lennox-Gastaut syndrome. Onfi will be reserved for <i>prescribing by Neurology.</i>
Dronedarone (Multaq)	PA	Prior authorization criteria were modified to reflect recent FDA Safety Alerts. Multaq is reserved for <i>prescribing by cardiology, for patients with paroxysmal or persistent atrial fibrillation (non-permanent atrial fibrillation), after first-line medications (such as amiodarone, flecainide, propafenone, and sotalol).</i>
Linezolid (Zyvox)	PA	Zyvox is an antibiotic, now reserved for <i>prescribing by Infectious Disease providers.</i>
Rivaroxaban (Xarelto)	NF	The new indication for atrial fibrillation was reviewed. Xarelto will remain non-formulary. These new oral anticoagulants will be re-reviewed later this year.
Ruxolitinib (Jakafi)	PA	Jakafi is a specialty medication for myelofibrosis, reserved for <i>patients with intermediate or high-risk myelofibrosis with constitutional symptoms, and palpable splenomegaly of at least 5 cm below the costal margin.</i> Approvals will be provided for six months of therapy. Reauthorizations will be approved every six months for demonstrated, sustained reductions in spleen size and/or volume or improvement in symptoms.

Medication	Status	Notes
Sirolimus (Rapamune)	F	Rapamune is an immunosuppressant medication.
Suboxone (buprenorphine/naloxone)	QL	A quantity limit is being added for Suboxone, commonly used for treating opioid dependence. Prescriptions will be limited to the maximum approved dosage of 24mg per day (#3 per day of the 8mg/ 2mg strength, and #12 per day of the 2mg/ 0.5mg strength). Greater amounts can be requested when necessary. Coverage for patients currently using higher dosages has been extended through May 31 2012. These members will receive a letter from HealthPartners notifying them of changes. Providers are asked to prescribe within FDA-approved dosing guidelines, and to contact HealthPartners for unique situations that require higher dosages.
Tadalafil (Cialis)	NF	The new indication for benign prostatic hypertrophy was reviewed. Cialis will remain non-formulary.

### Medicare Drug Formulary

Changes are effective April 1.

Medication	Status	Notes
Bromocriptine (Cycloset)	T2 PA	This new form of bromocriptine is indicated for diabetes. Cycloset is reserved for patients with a diagnosis of type 2 diabetes mellitus, and inadequate glycemic control after the use of two oral diabetes medications.
Sirolimus (Rapamune)		Rapamune is an immunosuppressant medication. Information about “Medicare covered transplant” is needed to determine Medicare B versus Medicare D coverage. The 0.5mg tablet and the oral solution are T2, and the 1mg and 2mg tablet are T4.

For Medicare: T1, covered generic T2, covered Brand T3, covered Brand T4, specialty

### Formulary Information and Requests

Formulary Information is available at [HealthPartners.com/ Provider/ Pharmacy Services](http://HealthPartners.com/Provider/Pharmacy%20Services), including the [Drug Formularies](#).

Pharmacy Customer Service is available to providers (physicians and pharmacies) from 8AM - 6PM CST, Monday through Friday. After hours calls are answered by our Pharmacy Benefit Manager.

- Fax - 952-853-8700 or 1-888-883-5434. Telephone - 952-883-5813 or 1-800-492-7259.
- Mail - HealthPartners Pharmacy Services, 8170 33rd Avenue S, PO Box 1309, Mpls, MN 55440.