



To: MaineCare Providers
From: Anne-Marie Toderico, Director of Pharmacy
Date: November 22, 2021
Re: PDL Update for **11/29/2021**

MaineCare PDL Update for November 29, 2021

The following medication(s) have been recently added/changed to the MaineCare PDL as **preferred** and will **not** require prior authorization.

- Cefpodoxime
- Cefpodoxime Proxetil Tab
- Cefpodoxime Proxetil Sus
- Kloxxado

The following medication(s) have recently been added to the MaineCare PDL as **preferred** and with new PDL criteria:

- Epidiolex is for the treatment of seizures associated with Lennox-Gastaut syndrome (LGS), Dravet syndrome (DS) or TS (Tuberous Sclerosis Complex) in patients 1 years of age and older.
- Myfembree will be limited to 24 months due to the risk of continued bone loss, which may not be reversible.

The following medication(s) have been recently added/changed to the MaineCare PDL as **non-preferred** and will require prior authorization.

- Brexafemme
- Kerendia
- Rylaze
- Empaveli
- Lumakras
- Tuseltiq
- Exservan
- Ozobax
- Zegalogue
- Jemperli
- Rybeviant
- Zynlonta

The following medication(s) have recently been added to the MaineCare PDL as **non-preferred** and with new PDL criteria:

- Zegalogue is indicated for the treatment of patients ≥ 6 years of age.
- Elepsia XR is indicated as adjunctive therapy 12 and older.

- Aduhelm: Testing to rule out reversible causes of dementia (CBC, CMP, TSH, B12, urine drug screen, RPR/VDRL), folate (if alcohol abuse is present), HIV (if risk present) and an assessment including a review of current medications as a cause of intellectual decline. Prescribed by or in consultation with a neurologist or geriatrician or geriatric psychiatrist. Diagnosis of Alzheimer's disease defined as: Confirmed presence of amyloid pathology and mild cognitive impairment or mild dementia stage of disease, consistent with Stage 3 and Stage 4 Alzheimer's disease OR Confirmed presence of amyloid pathology and prodromal or mild dementia stage of disease, consistent with Stage 3 and Stage 4 Alzheimer's disease. Testing: Clinical Dementia Rating (CDR) global score of 0.5 or 1.0 OR Repeatable Battery for Assessment of Neuropsychological Status (RBANS) delayed memory index score \leq 85 OR Mini-Mental State Examination (MMSE) score of 20-30 OR Montreal Cognitive Assessment (MoCA) score \leq 22. Member is age 50 or older. Obtain recent (within one year) brain magnetic resonance imaging (MRI) prior to initiating treatment. Provider attestation to obtain MRIs prior to the 7th infusion (first dose of 10 mg/kg) and 12th infusion (sixth dose of 10 mg/kg). Member does NOT have history or increased risk of amyloid related imaging abnormalities-edema (ARIA-E), which includes brain edema or sulcal effusions and amyloid related imaging abnormalities hemosiderin deposition (ARIA-H), which includes microhemorrhage and superficial siderosis. Member does NOT have hypersensitivity to any components of Aduhelm. Failure of or inability to tolerate at least two other preferred Alzheimer therapies for at least four months each, one of which should include a combination of a cholinesterase inhibitor with memantine. If the initial drug utilized is the combination of a cholinesterase inhibitor and memantine, then only that single trial of two drugs is required.
- Emflaza: For the treatment of Duchenne muscular dystrophy (DMD) in patients 2years of age and older and a documented intolerance of oral corticosteroid.
- Cabenuva: Medical necessity rationale documented that cannot be met with preferred and/or more cost-effective medications which does NOT include convenience or adherence (member must be virologically suppressed to qualify for Cabenuva therapy and therefore substantially compliant).
- Kionex Sus, Plan B, Gelnique Gel Md Pmp, Pedi-Dri Powd, Parnate Tabs, Clobex Lotn, O-Cal Prenatal, O-Cal Fa (Oral) Tablet, Cenestin Tabs, Estropipate Tabs, Nutracort Lotn, Elocon, Flurosyn Crea, Phisohex Liqd, Bydureon, Erythromycin Pads and Alora have been removed from the PDL.