



To: MaineCare Providers
From: Anne-Marie Toderico, Director of Pharmacy
Date: April 13, 2023
Re: PDL Update for April 14, 2023

MaineCare PDL Update for April 14, 2023

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

- Briumvi
- Ermeza
- Imjudo
- Lytgobi
- Rezlidhia
- Rolvedon
- Sezaby
- Stimufend
- Xaciato

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

- Eluryng: Quantity limit allowing 1 every 28 days without PA.

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

- Hemgenix® is an adeno-associated viral vector-based gene therapy for IV infusion after dilution. For treatment of adults with Hemophilia B (congenital Factor IX deficiency) who: Currently use Factor IX prophylaxis therapy, or have current or historical life-threatening hemorrhage, or have repeated, serious spontaneous bleeding episodes
- Leqembi: 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.

- Livmarli: Clinical PA required for appropriate diagnosis and for the treatment of patients \geq 3 months of age.
- Relyvrio: Clinical PA for indication required.
- Sunlenca: Clinical PA is required. DDI: Combined P-gp, UGT1A1 and strong CYP3A inhibitors may significantly increase plasma concentrations of Sunlenca®. Concomitant administration of Sunlenca® with these inhibitors is not recommended. In combination with other antiretroviral(s) for the treatment of HIV-1 infection in heavily treatment-experienced adults with multidrug resistant HIV-1 infection failing their current antiretroviral regimen due to resistance, intolerance, or safety considerations.
- Xelstrym: For the treatment of patients 6 years of age and older.

The following medication (s) have recently been removed from the MaineCare PDL.

- Clobex Shampoo 0.05%
- Colocort Enema
- Pancreaze
- Sklice