

GLP-1/GIP Weight Management Prior Authorization

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| Drug(s) Applied: | Saxenda, Wegovy, Zepbound |
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Rider A Criteria:

Drug(s) Applied will be approved when the requested medication is being used for an FDA approved indication and all of the following criteria are met:

I. Initial Approval Criteria

A. Obesity in patients 18 years and older as indicated by chart notes within past 3 months:

1. Weight loss drugs are NOT restricted from coverage under the patient's benefit **and**
2. Patient is new to therapy or attempting a repeat weight loss course of therapy
Note: new to therapy is less than 16 weeks (4 months) for Saxenda or less than 52 weeks (1 year) for Wegovy and Zepbound **and**
3. Patient has either a BMI greater than or equal to 40 kg/m², or a BMI greater than or equal to 30 kg/m² with at least one weight-related comorbidity/risk **and**
4. Patient has been on a Curative weight loss program and behavioral modifications for a minimum of 6 months from baseline (prior to initiation of pharmacotherapy) and has experienced weight loss of less than 1 pound per week while on a weight loss regimen from baseline (prior to initiation of pharmacotherapy) and will continue to participate in the Curative weight loss program **and**
5. Patient had an inadequate response to a trial of Contrave, Qsymia or phentermine and has failed to achieve ≥ 5 % weight loss after completion of treatment (minimum 12 weeks trial) (documentation of baseline BMI including height and weight must be provided), or has an intolerance to Contrave, Qsymia and phentermine **and**
6. Patient will NOT be using the requested agent in combination with another weight loss agent (e.g., Contrave, phentermine, Qsymia) or with another GLP-1 receptor agonist agent **and**
7. Patient does NOT have any FDA labeled contraindications to the requested agent

Approval Duration: 3 months for Wegovy and Zepbound; 4 months for Saxenda

B. Obesity in patients 12-17 years old as indicated by chart notes within past 3 months:



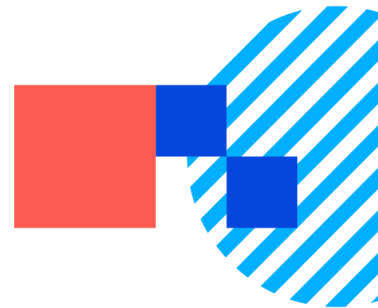
1. Weight loss drugs are NOT restricted from coverage under the patient's benefit **and**
2. Patient is new to therapy or attempting a repeat weight loss course of therapy
Note: new to therapy is less than 20 weeks (5 months) for Saxenda or less than 52 weeks (1 year) for Wegovy and Zepbound **and**
3. ONE of the following:
 - a) Patient is 17 years of age or over and has either a BMI greater than or equal to 40 kg/m², or a BMI greater than or equal to 30 kg/m² with at least one weight-related comorbidity/risk **or**
 - b) Patient is 12 to 16 years of age and has either a BMI greater than or equal to 95th percentile for age and sex, or a BMI greater than or equal to 30 kg/m² **and**
4. Patient has been on a Curative weight loss program and behavioral modifications for a minimum of 6 months from baseline (prior to initiation of pharmacotherapy) and has experienced weight loss of less than 1 pound per week while on a weight loss regimen from baseline (prior to initiation of pharmacotherapy) and will continue to participate in the Curative weight loss program **and**
5. Patient had an inadequate response to a trial of Contrave, Qsymia or phentermine and has failed to achieve ≥ 5 % weight loss after completion of treatment (minimum 12 weeks trial) (documentation of baseline BMI including height and weight must be provided), or has an intolerance to Contrave, Qsymia and phentermine **and**
6. Patient will NOT be using the requested agent in combination with another weight loss agent (e.g., Contrave, phentermine, Qsymia) or with another GLP-1 receptor agonist agent **and**
7. Patient's age is within FDA labeling for the requested indication for the requested agent or there is support for using the requested agent for the patient's age for the requested indication **and**
8. Patient does NOT have any FDA labeled contraindications to the requested agent

Approval Duration: 3 months for Wegovy and Zepbound; 5 months for Saxenda

II. Continued Therapy Approval

A. Obesity in patients 18 years and older as indicated by chart notes within past 3 months:

1. Weight loss drugs are NOT restricted from coverage under the patient's benefit **and**
2. Patient is continuing current weight loss course of therapy **and**



3. ONE of the following:
 - a) For Wegovy and Zepbound, patient has achieved and maintained a weight loss greater than or equal to 5% from baseline (prior to initiation of pharmacotherapy) and are maintained on dosing of Wegovy 1.7mg or 2.5mg or Zepbound 5mg, 10mg, or 15 mg **or**
 - b) For Saxenda, patient has achieved and maintained a weight loss greater than or equal to 4% from baseline (prior to initiation of pharmacotherapy) **and**
4. Patient had either a BMI greater than or equal to 40 kg/m², or a BMI greater than or equal to 30 kg/m² with at least one weight-related comorbidity/risk prior to starting current pharmacotherapy **and**
5. Patient is actively enrolled and has been on a Curative weight loss program and behavioral modifications for a minimum of 6 months from baseline (prior to initiation of pharmacotherapy) and will continue to participate in the Curative weight loss program **and**
6. Patient had an inadequate response to a trial of Contrave, Qsymia or phentermine and has failed to achieve $\geq 5\%$ weight loss after completion of treatment (documentation of baseline BMI including height and weight must be provided), or has an intolerance to Contrave, Qsymia and phentermine prior to starting current pharmacotherapy **and**
7. Patient will NOT be using the requested agent in combination with another weight loss agent (e.g., Contrave, phentermine, Qsymia) or with another GLP-1 receptor agonist agent **and**
8. Patient does NOT have any FDA labeled contraindications to the requested agent

Approval Duration: 3 months for Wegovy and Zepbound; 4 months for Saxenda
Lifetime maximum benefit of 24 months coverage for injectable GLP-1 drugs

B. Obesity in patients 12-17 years old as indicated by chart notes within past 3 months:

1. Weight loss drugs are NOT restricted from coverage under the patient's benefit **and**
2. Patient is continuing current weight loss course of therapy **and**
3. Current BMI is greater than 95th percentile for age and sex **and**
4. ONE of the following:
 - a) For Wegovy and Zepbound, patient has achieved and maintained a weight loss greater than or equal to 5% from baseline (prior to initiation of pharmacotherapy) and are maintained on dosing of Wegovy 1.7mg or 2.5mg or Zepbound 5mg, 10mg, or 15 mg **or**
 - b) For Saxenda, patient has achieved and maintained a weight loss greater



than or equal to 1% from baseline (prior to initiation of pharmacotherapy)
and

5. Patient is actively enrolled and has been on a Curative weight loss program and behavioral modifications for a minimum of 6 months from baseline (prior to initiation of pharmacotherapy) and will continue to participate in the Curative weight loss program **and**
6. Patient had an inadequate response to a trial of Contrave, Qsymia or phentermine and has failed to achieve $\geq 5\%$ weight loss after completion of treatment (documentation of baseline BMI including height and weight must be provided), or has an intolerance to Contrave, Qsymia and phentermine prior to starting current pharmacotherapy **and**
7. Patient will NOT be using the requested agent in combination with another weight loss agent (e.g., Contrave, phentermine, Qsymia) or with another GLP-1 receptor agonist agent **and**
8. Patient's age is within FDA labeling for the requested indication for the requested agent or there is support for using the requested agent for the patient's age for the requested indication **and**
9. Patient does NOT have any FDA labeled contraindications to the requested agent

Approval Duration: 3 months for Wegovy and Zepbound; 5 months for Saxenda
Lifetime maximum benefit of 24 months coverage for injectable GLP-1 drugs

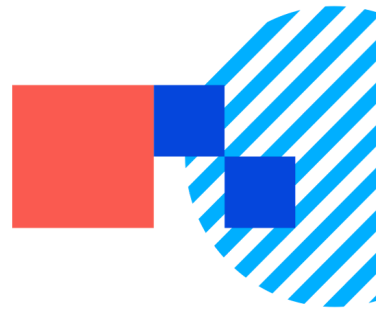
Rider B Criteria:

Drug(s) Applied will be approved when the requested medication is being used for an FDA approved indication and all of the following criteria are met:

III. Initial Approval Criteria

A. Overweight/ Obesity

1. Weight loss drugs are NOT restricted from coverage under the patient's benefit **and**
2. Patient is new to therapy or attempting a repeat weight loss course of therapy **and**
3. ONE of the following:
 - a) Patient is an adult and has either a BMI greater than or equal to 30 kg/m², or a BMI greater than or equal to 27 kg/m² with at least one weight-related comorbidity/risk **or**
 - b) Patient is 12 years of age or older and has a BMI greater than or equal to 30 kg/m²



Approval Duration: 7 months

IV. Continued Therapy Approval

A. Overweight/ Obesity

1. Weight loss drugs are NOT restricted from coverage under the patient's benefit **and**
2. Patient is continuing current weight loss course of therapy **and**
3. ONE of the following:
 - a) Patient is an adult and had either a starting BMI greater than or equal to 30 kg/m², or a starting BMI greater than or equal to 27 kg/m² with at least one weight-related comorbidity/risk **or**
 - b) Patient is 12 years of age or older and had a starting BMI greater than or equal to 30 kg/m²

Approval Duration: 7 months

Policy Owned by: Curative PBM team