Upcoming GLP-1 changes for Fallon Health MassHealth ACO plans

Berkshire Fallon Health Collaborative, Fallon 365 Care, and Fallon Health-Atrius Health Care Collaborative

Key dates:

- **10/1/2024 through 12/31/2024:** Zepbound, Wegovy, and Saxenda will be preferred and covered with prior authorization (PA).
- **10/1/2024:** Removal of step-through Wegovy and Saxenda for Zepbound PA criteria.
- **1/1/2025:** All members currently stable on Wegovy or Saxenda (with the exception of those 12-17 years old) will need to switch to Zepbound.
- **Prior to 1/1/2025:** Providers can submit a new prior authorization to transition members to Zepbound. PA duration will be 6 months.
- **12/31/2024:** Fallon Health will proactively end-date prior authorizations for Wegovy and Saxenda, and enter prior authorizations for Zepbound with a start date of 1/1/2025. The end date will be 6 months after the approval date of their Wegovy/Saxenda PA that was termed.
  Provider will need to send a new prescription for Zepbound to the member's pharmacy.

  For example, a member approved for Wegovy on 10/1/2024 with an end date on PA of 3/31/2025:
  - Wegovy PA will be end-dated 12/31/2024. Zepbound PA approval will start 1/1/2025 and have an end date of 3/31/2025.
- **1/1/2025:** Zepbound will be the only covered anti-obesity GLP1. Wegovy will only be allowed for members 12-17 years old, or if they meet the cardiovascular prior authorization criteria.

January 6, 2025 rollout:

- Oral phentermine trial will be required for new starts (no GLP1 therapy in previous 90 days) on GLP-1 for obesity (inadequate response, adverse reaction, and contraindication details listed below)
- Generic phentermine will no longer require prior authorization for members ≥ 12 years old
- Lomaira will not have PA for members ≥ 12 and ≤ 17 years old
- Wegovy and Saxenda will be available on PA for members 12-17 years old without a step-through Zepbound
- Clinical criteria for Wegovy for cardiovascular indication will be posted on the MassHealth Drug List

Inadequate response to phentermine *(adequate trial = claims for 90 out of 120 days)*	Adverse reaction to phentermine	Contraindication to phentermine
• Insufficient clinical response defined as < 5% reduction in bodyweight from baseline despite initial trial of ≥ 3 months of treatment with the maximally tolerated dose of phentermine • Plateaued clinical response defined as no weight loss for at least ≥3 months of treatment with the maximally tolerated dose of phentermine	Would accept <u>any</u> history of adverse reaction (even if member trialed >12 months ago) Defined as "medical records documenting an adverse reaction to phentermine that is allergic in nature, or cannot be expected or managed during the course of therapy"	• *Cardiovascular: Coronary artery disease, history of stroke, arrhythmia, congestive heart failure,* ***uncontrolled*** *hypertension (BP ≥140/90 despite pharmacotherapy)* • *Hyperthyroidism* • *Glaucoma* • *Psychiatric/behavioral health: History of psychosis, bipolar disorder with mania, uncontrolled anxiety despite pharmacotherapy, substance use disorder, concomitant use with stimulants*

Communication Plan:

- Members with active prior authorizations for Wegovy or Saxenda (excluding age 12 -17 years of age) will be receiving a letter stating their PA will be terminated as of 12/31/24 and that Zepbound will be available to them as of 1/1/2025 (provider must send in prescription for Zepbound to the pharmacy)
- Providers that have a patient who will need to be switched to Zepbound will receive a letter from Fallon Health with member information
- First round of letters will go out on or around 11/1/2024
- Fallon Health will send member impact reports to each ACO
- MassHealth will publish a prescriber eLetter to mass.gov