

## Summary of Utilization Management (UM) Program Changes

**March #3 2022**

Brand Name	Generic Name	Utilization Update Summary	Type	Effective Date
<p><i>Skytrofa</i> <i>Omnitrope</i></p>	<p>lonapegsomatropin-tcgd somatropin</p>	<p>Skytrofa: Treatment of pediatric patients 1 year and older who weigh at least 11.5 kg and have growth failure due to inadequate secretion of endogenous growth hormone (GH) (given as a weekly SC injection).</p> <p>Skytrofa will be added into the existing Growth Hormones guideline. Initial criteria requires:</p> <p>1) One of the following:</p> <p style="padding-left: 20px;">a) One of the following: i) History of neonatal hypoglycemia associated with pituitary disease, or ii) Diagnosis of panhypopituitarism;</p> <p style="text-align: center;">OR</p> <p style="padding-left: 20px;">b) All of the following:</p> <p style="padding-left: 40px;">i) Diagnosis of pediatric GH deficiency as confirmed by one of the following:</p> <p style="padding-left: 60px;">A) Height is documented by one of the following (utilizing age and gender growth charts related to height): Height is &gt; 2.0 standard deviations [SD] below midparental height, or Height is &gt; 2.25 SD below population mean (below the 1.2 percentile for age and gender), or</p> <p style="padding-left: 60px;">B) Growth velocity is &gt; 2 SD below mean for age and gender, or</p> <p style="padding-left: 60px;">C) Delayed skeletal maturation of &gt; 2 SD below mean for age and gender (e.g., delayed &gt; 2 years compared with chronological age);</p> <p style="padding-left: 40px;">ii) Documentation of one of the following:</p> <p style="padding-left: 60px;">A) Both of the following: Patient is male and Bone age &lt; 16 years, or</p> <p style="padding-left: 60px;">B) Both of the following: Patient is female and Bone age &lt; 14 years;</p> <p style="padding-left: 40px;">iii) Both of the following: [Commercial only]</p> <p style="padding-left: 60px;">A) Patient has undergone two of the following provocative GH stimulation tests: Arginine, Clonidine, Glucagon, Insulin, Levodopa, and</p> <p style="padding-left: 60px;">B) Both GH response values are &lt; 10 mcg/L;</p> <p>2) Patient is 1 year of age or older;</p> <p>3) Patient weight is 11.5 kg or greater; and</p> <p>4) Trial and failure of Norditropin AND Nutropin</p> <p>5) Prescribed by an endocrinologist.</p> <p>Omnitrope will require a trial and failure of Norditropin and Nutropin as it is no longer a preferred product.</p>	<p>Update</p>	<p>6/1/2022</p>
<p><i>Ventolin HFA</i> <i>ProAir Respiclick</i> <i>Levalbuterol HFA</i> <i>Step Therapy</i></p>	<p>albuterol</p>	<p>For approval of these branded albuterol inhalers, a trial of a generic albuterol inhaler is required.</p>	<p>New</p>	<p>6/1/2022</p>