

# On the Horizon Rx

## Volume III



### Preferred drug list updates

Based on recommendations by the Florida Pharmaceutical & Therapeutics Committee, the Agency for Health Care Administration (AHCA) establishes and maintains the Florida Medicaid Preferred Drug List (PDL). The committee met Dec. 10, 2021, and approved changes to the PDL that will go into effect for Healthy Horizons™ in Florida members on Feb. 11, 2022. Members were notified 30 days before the effective date.

Drug name	PDL status before meeting	PDL status after meeting
Analgesics, narcotics long		
Olinvyk pca vial (intravenous)	N/A	Non-PDL
Olinvyk vial (intravenous)	N/A	Non-PDL
Androgenic agents		
Androgel gel packet (transderm)	PDL	Non-PDL
Testosterone gel pump (androgel) (transderm)	N/A	PDL with clinical PA
Anti-allergans, oral		
Oralair (sublingual)	N/A	Non-PDL
Palforzia maintenance sachet (oral)	N/A	Non-PDL
Palforzia titration capsule (oral)	N/A	Non-PDL

**Humana**  
Healthy Horizons™  
in Florida

Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan Inc.

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Drug name	PDL status before meeting	PDL status after meeting
Antihyperuricemics		
Colchicine capsule (ag)(oral)	PDL	Non-PDL
Antivirals, topical		
Acyclovir ointment (topical)	Non-PDL	PDL
Zovirax ointment (topical)	PDL	Non-PDL
Bladder relaxant preparations		
Myrbetriq grandules (oral)	N/A	Non-PDL
COPD agents		
Spiriva respimat (inhalation)	Non-PDL	PDL
GI motility, chronic		
Amitiza (oral)	Non-PDL	PDL
Lubiprostone (ag)(oral)	PDL	Non-PDL
Immunomodulators, lupus		
Benlysta autinjector (sq)	N/A	Non-PDL
Benlysta syringe (sq)	N/A	Non-PDL
Lupkynis (oral)	N/A	Non-PDL
Saphnelo (intravenous)	N/A	Non-PDL
Immunosuppressives, orals		
Rezurock (oral)	N/A	Non-PDL
Iron, oral		
Accrufer (oral)	N/A	Non-PDL
Lipoglycopeptide/vancomycin antibiotics, injectable		
Kimyrsa (intraven)	N/A	Non-PDL
Narcolepsy agents		
Xywav (oral)	N/A	Non-PDL
Ophthalmics, cystinosis		
Cystadrops (ophthalmic)	N/A	Non-PDL
Ophthalmics, glaucoma agents		
Betimol (ophthalmic)	PDL	Non-PDL
Opiate dependence treatments		
Kloxxado spray (nasal)	N/A	PDL
Stimulants and related agents		
Azstarys (oral)	N/A	Non-PDL
Thyroid hormones		
Thiquidity solution (oral)	N/A	Non-PDL

Drug name	PDL status before meeting	PDL status after meeting
Ulcerative colitis agents		
Canasa (rectal)	Non-PDL	PDL
Lialda (oral)	Non-PDL	PDL
Mesalamine (canasa)(ag)(rectal)	PDL	Non-PDL
Mesalamine (canasa)(rectal)	PDL	Non-PDL
Mesalamine (lialda)(ag)(oral)	PDL	Non-PDL
Mesalamine (lialda)(oral)	PDL	Non-PDL
N/A = Not applicable (for new products)		



## COVID-19 vaccine update:

The Centers for Disease Control and Prevention (CDC) now recommends everyone age 5 years and older get a COVID-19 vaccine. Currently, Pfizer-BioNTech is the only manufacturer authorized for children 5–11 years old.

In addition, the FDA has amended the emergency use authorization (EUA) for all COVID-19 vaccines to allow for a single booster dose for everyone older than 18. Teens older than 16 who are high risk can also receive a booster. Administration time is between two and six months depending on the vaccine used for the primary series.

Vaccine	Who should get a booster?	When is a booster necessary?	Which booster?
<b>Pfizer-BioNTech</b>	Adults 18 and older <b>Note:</b> Teens 16 and older can also get a Pfizer booster.	5 months after completing the primary COVID-19 vaccination series.	Pfizer-BioNTech or Moderna are preferred in most* situations.  Teens 12 and older can only get a Pfizer-BioNTech booster at this time.
<b>Moderna</b>	Adults 18 and older	6 months after completing the primary COVID-19 vaccination series.	Pfizer-BioNTech or Moderna are preferred in most* situations.
<b>Johnson &amp; Johnson's Janssen*</b>	Adults 18 and older	2 months after receiving the J&J/Janssen COVID-19 vaccination.	Pfizer-BioNTech or Moderna are preferred in most* situations.

\*Although mRNA vaccines are preferred, the J&J/Janssen COVID-19 vaccine may be considered in some situations (allergy to mRNA vaccines, member preference, accessibility, etc.).



You can find the following information on the CDC website. It is updated frequently as guidance changes:

## Frequently asked questions

### Do booster shots contain the same ingredients as the existing vaccines?

- Yes. COVID-19 booster shots contain the same ingredients (i.e., formulation) as the current COVID-19 vaccines. However, in the case of the Moderna COVID-19 vaccine booster shot, the dose is half of the amount of the vaccine people get for their primary series.

### Does Humana cover Ivermectin for treatment of COVID-19 for Florida Medicaid recipients?

- No. Ivermectin does not have FDA approval or an EAU for treatment of COVID-19 at this time.

## Oral antiviral treatments for COVID-19

The Food and Drug Administration (FDA) issued an EUA for Pfizer's Paxlovid (nirmatrelvir tablets and ritonavir tablets, co-packaged for oral use) for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (age 12 and older weighing at least 88 pounds) who are at high risk for progression to severe COVID-19, including hospitalization and death. Paxlovid is available by prescription only and should be initiated as soon as possible after diagnosis and within five days of onset. Paxlovid is not authorized for pre or post-exposure prevention of COVID-19. It is also not a substitute for vaccination

in those for whom the vaccination and booster are recommended.

Paxlovid consists of nirmatrelvir, which inhibits a SARS-CoV-2 protein to stop the virus from replicating, and ritonavir, which slows down nirmatrelvir's breakdown to help it remain in the body longer at higher concentrations. It is administered as three tablets (two tablets of nirmatrelvir and one tablet of ritonavir) taken together orally twice daily for 5 days. Side effects include impaired sense of taste, diarrhea, elevated blood pressure and muscle aches. The drug is contraindicated in undiagnosed HIV-1 infection or patients with pre-existing liver enzyme abnormalities or liver inflammation/disease or kidney disease.

Paxlovid is not on the Florida Medicaid PDL at this time. We expect to receive more information from AHCA on availability and coverage soon.



Find additional information about oral treatments on the FDA website:

For additional information on the vaccine or tips on how to talk about COVID-19 vaccines with friends and family, click the links below:

## Medication adherence

Humana Pharmacy Solutions (HPS) calculates both Proportion of Days Covered (PDC) and the associated percentages to determine medication adherence. PDC ranges from 0–1 with a value of 1 corresponding to 100% adherence. This metric defines acceptable adherence as more than 0.8 (80%) of days covered.

$$\text{PDC} = \frac{\text{Number of Days in Period "covered"}}{\text{Number of Days in Period}}$$

The latest metrics for October 2021 show our overall adherence remained steady at 0.77 across membership with a 60% adherence rate. Our goal is a PDC of 0.8.

Please continue to counsel Humana Healthy Horizons in Florida-covered patients on the importance of adherence with respect to meeting their therapeutic goals. We need your help in monitoring and driving home the importance of medication adherence to our members.

## 2022 preferred blood glucose meters and strips

As of Jan. 1, 2022, Humana prefers new blood glucose meters and strips for Humana Healthy Horizons in Florida-covered patients. The preferred products are those manufactured by Trividia. Most members already use Trividia blood glucose monitoring products. Those who use non-preferred blood glucose monitors should have received a new blood glucose meter in the mail.

If the member did not receive a new meter, he or she can call the True Metrix Fulfillment Center at **866-788-9618** to have a meter mailed to them (no prescription needed). Prescribers need to call or fax the member's pharmacy with a new testing strip prescription that work for strips to go with the new meter.

### The new Trividia preferred meters and strips include:

- True Metrix Blood Glucose Meter
- True Metrix Air Blood Glucose Meter (blue tooth capability)
- True Metrix Blood Glucose Test Strips

Members can visit [Trividiahealth.com](https://www.trividiahealth.com) to view training videos or call the Trividia Customer Care Team at **800-803-6025** if they need help using the new blood glucose meter.

## Pharmacy references

### Common PDL quick reference

The pharmacy team developed and maintains a reference document called the Common PDL. This quick reference was developed for both prescribers and our internal care teams to outline the most commonly prescribed medications along with less expensive alternatives for our Medicaid population. The common PDL received updates quarterly to align with AHCA's Prescription Drug List changes.

### Updated prior authorization criteria

The Florida Drug Utilization Review (DUR) board recommends new criteria or updates to previous prior authorization criteria as it monitors trends in utilization or as new drugs come to market. AHCA maintains a list of all Pharmacy & Therapeutic-approved drug criteria on its website for your reference.

### Plan preferred brands

Medications on this list have both brand and generic formulations. When prescribed to Florida Medicaid recipients, the **brand-name** formulation must be dispensed because of agency rebate agreements. Please help ensure healthcare providers are aware of this requirement, as it has a significant effect on the cost of medication. The pharmacy team is happy to help recommend a lower-cost alternative to these medications when necessary.

### Summary of drug limitations

Medications on this list are subject to the corresponding age or quantity limitations. A prior authorization is necessary if these limitations are preventing claims from paying at the pharmacy.

### General pharmacy news

Find pharmacy-related safety alerts, drug recall and new generic drug announcements and other medication information.