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Medicaid Update

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Medical Pharmacy Prior Authorization Programs Update

On May 12, 2022, the New York State (NYS) Medicaid Drug Utilization Review Board (DURB) approved the following prior authorization (PA) programs with implementation dates proposed by the Commissioner of Health. The recommendations of the DUR Board recommendations and have approved changes to the Preferred Drug Program (PDP) and the Medicaid Fee-for-Service (FFS) Program.

Effective August 15, 2022, PA requirements will change for some drugs in the following PDP classes:

- Cholesterol Absorption Inhibitors
- Antiangiogenic Agents
- Movement Disorder Agents
- Opioid Agonists
- Dipeptidyl Peptidase-4 (DPP-4) Inhibitors
- Glucagon-like Peptide-1 (GLP-1) Agonists
- Antihypertensives
- Anticholinergic/COPD Agents

Effective August 15, 2022, criteria for the following drugs will include **Sprevato® (oxaliplatin) tablet 50mg**:

- PA will be required when Sprevato® (oxaliplatin) is prescribed to confirm the following requirements have been met: **Lynparza® (olaparib) tablets and tablets film-coated**: Lynparza is indicated for the treatment of adult patients who have a deleterious or suspected deleterious germline or somatic BRCA-mutated advanced metastatic castration-resistant prostate cancer (mCRPC) who have progressed following prior treatment with enzalutamide or abiraterone acetate.
- The patient is a minimum of 18 years of age.
- The patient has a diagnosis of Metastatic Colorectal Cancer (mCRC).
- The patient has tumor tissue with a documented mutation in the following genes: KRAS, NRAS, BRAF.
- The patient has received at least two prior chemotherapy regimens for treatment of mCRC.
- The patient is ineligible for Vectibix® (panitumumab) or Erbitux® (cetuximab) because of a documented allergy to the active ingredient or to any of the excipients in the product.
- The patient is not pregnant or breastfeeding.
- The patient does not have a documented allergy to platinum compounds.
- The patient does not have a documented allergy to Sprevato® (oxaliplatin).
- The patient does not have a documented allergy to any of the excipients in Sprevato®.
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