

Glucagon – like Peptide – 1 (GLP-1) Receptor Agonists Drug Use Criteria

Created: December 2017

Reviewed: April 2019, October 2020, September 2021, August 2022

Includes:

Byetta ®	<i>Exenatide</i>
Trulicity ®	<i>Dulaglutide</i>
Bydureon ® Pen/Vial	<i>Exenatide Microspheres</i>
Victoza ®	<i>Liraglutide</i>
Adlyxin ®	<i>Lixisenatide</i>
Ozempic ®	<i>Semaglutide</i>
Rybelsus ®	<i>Semaglutide</i>

**Saxenda and Wegovy are not a covered benefit on OHP as medications are approved for chronic weight management only.*

GUIDELINE FOR USE:

Initial Request:

1. Is the medication being used for treatment of Type 2 Diabetes Mellitus? *Use for chronic weight management alone is not a covered benefit on OHP.*
 - a. Yes: go to #2
 - b. If no, deny as not meeting criteria. Medications for weight loss are not a covered benefit under the Oregon Health Plan. Off-label or experimental use of medication is not a covered benefit on Oregon Health Plan.
2. Has member tried and failed metformin or have contraindications to metformin? ** Does fill history support dose optimization and adherence?*
 - a. Yes: Go to #3
 - b. If no, deny as not meeting criteria. Please optimize dose of metformin.
3. Is HgA1c level >7.0%
 - a) If yes, approve up to 3 months.
 - c). If no, deny as criteria not met. Endocrinology consult is a covered benefit.

Renewal Request:

1. Is there clinical documentation supporting response to therapy including reduction in HgA1c?
 - a. If yes, approve for 6 fills.
 - b. If no, deny as not meeting criteria. Recommend changing treatment plan to optimize HgA1c reduction.

Rationale:

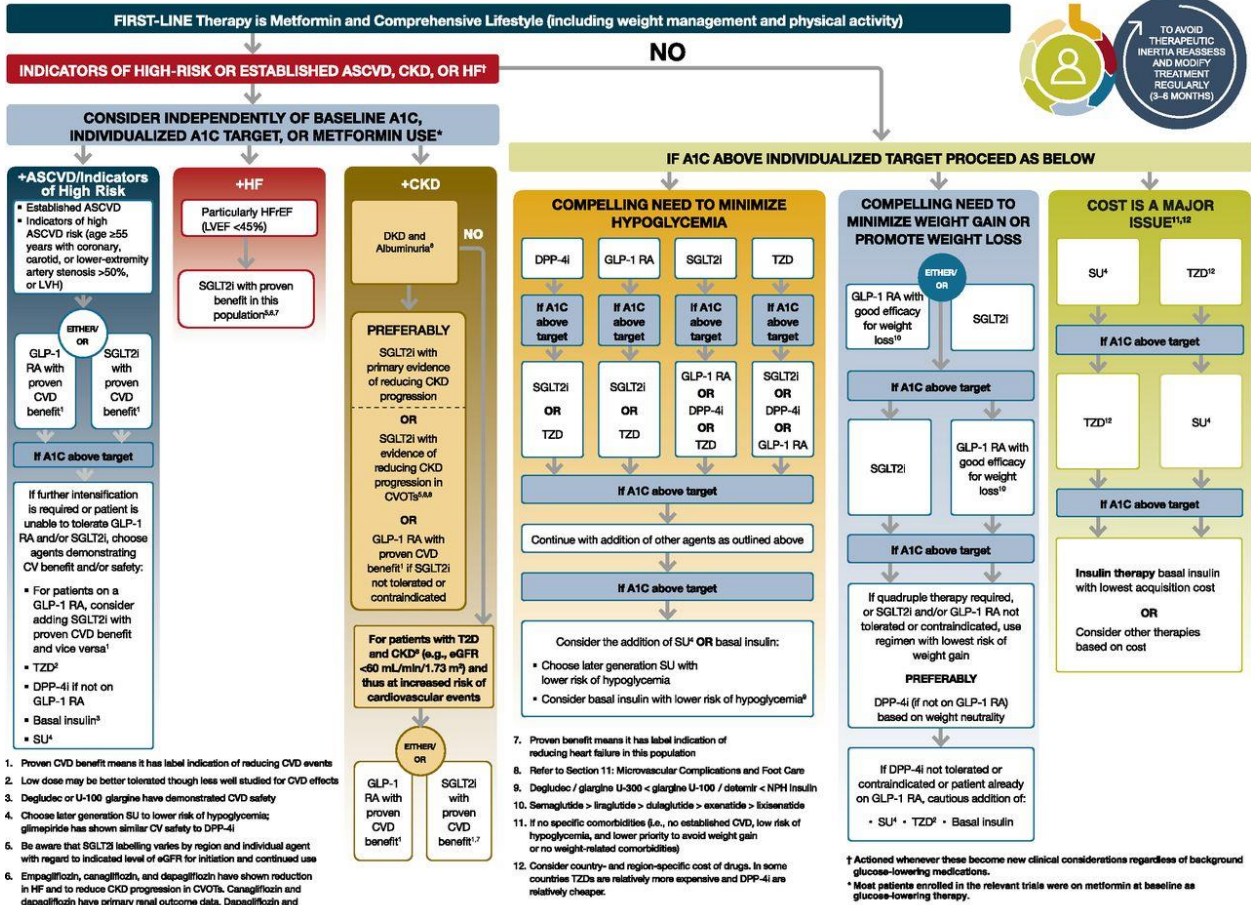
To promote cost-effective and safe step-therapy management for type 2 diabetes mellitus. To ensure optimization of least costly formulary alternatives including metformin and sulfonylureas prior to initiating therapy with more costly GLP-1 agonists. Adherence and dose optimization will be reviewed using prescription refill history for consideration of coverage for GLP-1 agonists. GLP-1 agonists will not be covered for weight loss as use of medications for weight loss is not a covered benefit on OHP. To ensure engagement with lifestyle modifications to optimize glycemic control from Type 2 diabetic patients.

FDA Approved Indication:

These agents are add-on to lifestyle modifications such as diabetes education or dietary counseling to improve glycemic control in adults with Type 2 diabetes. Liraglutide is also indicated to reduce the risk of major adverse cardiovascular events in type diabetic adults with established cardiovascular disease. Dulaglutide has another indication of risk reduction of major cardiovascular events in adults with type 2 diabetes mellitus with cardiovascular disease or multiple cardiovascular risk factors. Semaglutide has an additional indication of risk reduction of major cardiovascular events in adults with type 2 diabetes mellitus and established cardiovascular disease.

References:

1. American Diabetes Association (ADA). Standards of Medical Care in Diabetes – 2021. Diabetes Care 2021 Jan; 44(Supplement 1): S111-S124.
2. Byetta Prescribing Information. Revised 6/2021.
3. Trulicity Prescribing Information. Revised 9/2020.
4. Bydureon Prescribing Information. Revised 12/2020.
5. Victoza Prescribing Information. Revised 11/2020.
6. Adlyxin Prescribing Information. Revised 7/2021.
7. Ozempic Prescribing Information. Revised 4/2021.
8. Wegovy Prescribing Information. Revised 6/2021.
9. Saxenda Prescribing Information. Revised 12/2020.
10. Guideline Note 5, Obesity and Overweight (Medications for weight loss are not a covered benefit of OHP)



Glucose-lowering medication in type 2 diabetes: 2021 ADA Professional Practice Committee (PPC) adaptation of Davies et al. (35) and Buse et al. (36).