

## Clinical criteria updates for specialty pharmacy

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The following clinical criteria documents were endorsed at the February 21, 2020 clinical criteria meeting. To access the clinical criteria information please click [here](#).

### Revised clinical criteria effective March 3, 2020

(The following criteria was reviewed and may have word changes or clarifications, but had no significant changes to the policy position or criteria.)

- ING-CC-0140: Zulresso (brexanolone)

### Revised clinical criteria effective March 23, 2020

(The following criteria were revised to expand medical necessity indications or criteria.)

- ING-CC-0002: Colony Stimulating Factor Agents
- ING-CC-0090: Ixempra (ixabepilone)
- ING-CC-0091: Lartruvo (olaratumab)
- ING-CC-0094: Alimta (pemetrexed disodium)
- ING-CC-0119: Yervoy (ipilimumab)
- ING-CC-0121 Gazyva (obinutuzumab)
- ING-CC-0123: Cyramza (ramucirumab)
- ING-CC-0124: Keytruda (pembrolizumab)
- ING-CC-0125: Opdivo (nivolumab)
- ING-CC-0130: Imfinzi (durvalumab)
- ING-CC-0131: Besponsa (inotuzumab ozogamicin)

### Revised clinical criteria effective March 23, 2020

(The following criteria were reviewed and may have word changes or clarifications, but had no significant changes to the policy position or criteria.)

- ING-CC-0044: Eteplirsen (Exondys 51®)

- ING-CC-0067: Prostacyclin Infusion and Inhalation Therapy
- ING-CC-0072: Selective Vascular Endothelial Growth Factor (VEGF) Antagonists
- ING-CC-0075: Rituximab Agents for Non-Oncology Indications
- ING-CC-0085: Actimmune (interferon gamma-1B)
- ING-CC-0086: Spravato (esketamine) Nasal Spray
- ING-CC-0088: Elzonris (tagraxofusp-erzs)
- ING-CC-0089: Mozobil
- ING-CC-0096: Asparagine Specific Enzymes: Oncaspar (pegaspargase), Erwinaze (asparaginase [erwinia chrysanthemi])
- ING-CC-0103: Faslodex (fulvestrant)
- ING-CC-0108: Halaven (eribulin)
- ING-CC-0110: Perjeta (pertuzumab)
- ING-CC-0113: Sylvant (siltuximab)
- ING-CC-0115: Kadcyla (ado-trastuzumab)
- ING-CC-0117: Empliciti (elotuzumab)
- ING-CC-0120: Kyprolis (carfilzomib)
- ING-CC-0122: Arzerra (ofatumumab)
- ING-CC-0126: Blincyto (blinatumomab)
- ING-CC-0129: Bavencio (avelumab)
- ING-CC-0132: Mylotarg (gemtuzumab ozogamicin)
- ING-CC-0152: Vyondys 53 (golodirsen)

#### **Archived clinical criteria effective March 23, 2020**

- ING-CC-0138: Asparlas (calaspargase pegol-mknl)

#### **Revised clinical criteria effective July 1, 2020**

(The following criteria listed below might result in services that were previously covered now being considered either not medically necessary and/or investigational.)

- ING-CC-0078: Orencia (abatacept)

#### **New clinical criteria effective August 1, 2020**

(The criteria below is new and may result in services previously covered now being considered either not medically necessary and/or investigational.)

- ING-CC-0155: Etyol (amifostine)
- ING-CC-0156: Reblozyl (luspatercept)
- ING-CC-0157: Padcev (enfortumab vedotin)
- ING-CC-0158: Enhertu (fam-trastuzumab deruxtecan-nxki)
- ING-CC-0159: Scenesse (afamelanotide)
- ING-CC-0160: Vyepi (eptinezumab-jjmr)

### **Revised clinical criteria effective August 1, 2020**

(The following criteria listed below might result in services that were previously covered now being considered either not medically necessary and/or investigational.)

- ING-CC-0002: Colony Stimulating Factor Agents
- ING-CC-0015: Infertility and HCG Agents
- ING-CC-0033: Xolair (omalizumab)
- ING-CC-0038: Human Parathyroid Hormone Agents
- ING-CC-0043: Monoclonal Antibodies to Interleukin-5
- ING-CC-0049: Radicava (edaravone)
- ING-CC-0062: Tumor Necrosis Factor Antagonists
- ING-CC-0088: Elzonris (tagraxofusp-erzs)
- ING-CC-0094: Alimta (pemetrexed disodium)
- ING-CC-0099: Abraxane (paclitaxel, protein bound)
- ING-CC-0109: Zaltrap (ziv-aflibercept)
- ING-CC-0112: Xofigo (Radium Ra 223 Dichloride)
- ING-CC-0118: Radioimmunotherapy: Zevalin; azedra; Lutathera
- ING-CC-0119: Yervoy (ipilimumab)
- ING-CC-0123: Cyramza (ramucirumab)
- ING-CC-0125: Opdivo (nivolumab)
- ING-CC-0135: Melanoma Vaccines

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