

Weight Loss Medications
Effective 09/01/2023

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization
Benefit	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit (NLX)		<input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Specialty Limitations	N/A		
Contact Information	Specialty Medications		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	Non-Specialty Medications		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	Medical Specialty Medications (NLX)		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
Exceptions	N/A		

Overview

Alli (orlistat) is for weight loss in overweight adults, 18 years and older, when used along with a reduced-calorie and low-fat diet.

Contrave is a combination of naltrexone, an opioid antagonist, and bupropion, an aminoketone antidepressant, indicated as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adults with an initial body mass index (BMI) of 30 kg/m² or greater (obese) or 27 kg/m² or greater (overweight) in the presence of at least one weight-related comorbidity.

Qsymia is a combination of phentermine, a sympathomimetic amine anorectic, and topiramate extended-release, an antiepileptic drug, indicated as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adults with an initial body mass index (BMI) of 30 kg/m² or greater (obese) or 27 kg/m² or greater (overweight) in the presence of at least one weight-related comorbidity.

Saxenda (liraglutide) is a glucagon-like peptide-1 (GLP-1) receptor agonist indicated as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adult patients with an initial body mass index (BMI) of 30 kg/m² or greater (obese) or 27 kg/m² or greater (overweight) in the presence of at least one weight-related comorbidity.

Wegovy (semaglutide) is a selective glucagon-like peptide-1 (GLP-1) receptor agonist indicated as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adults with an initial BMI of ≥30 kg/m² (obesity), or ≥27 kg/m² (overweight) in the presence of at least one weight-related comorbid condition (eg, hypertension, type 2 diabetes mellitus, dyslipidemia).

Coverage Guidelines

Initial Approval

Authorization may be granted for one of the above listed medications when the following criteria are met:

1. For Wegovy and Saxenda: member is 12 – 17 years of age and the member meets ALL the following criteria:
 - a. Baseline BMI at the 95th percentile or greater for age and sex (obesity)
 - b. Member is currently participating in outpatient weight loss program (e.g., dietary or caloric restrictions, exercise, behavioral support, community-based program) and has failed to lose at least 5% body weight
2. For all medications when member is \geq 18 years of age with ALL of the following:
 - a. Member meets ONE of the following:
 - i. BMI greater than 30kg/m² without comorbid conditions
 - ii. BMI greater than 27Kg/m² with ONE comorbid condition:
 - Coronary heart disease
 - Hypertension
 - Dyslipidemia
 - Type 2 diabetes mellitus
 - Obstructive sleep apnea
 - Obesity hypoventilation syndrome
 - Pseudotumor cerebri
 - Obesity related cardiomyopathy
 - Nonalcoholic steatohepatitis (NASH)
 - b. Documentation that the member is currently participating in an outpatient weight loss program (e.g., exercise, behavioral support, community-based program) and has failed to lose at least 5% of body weight
 - c. Member will maintain a low-calorie diet while on requested medication
 - d. **For Qsymia only:** Members must have tried and failed separate ingredients topiramate and phentermine taken together.

Continuation of Therapy

Reauthorization may be granted if ONE of the following criteria is met:

1. Weight loss is \geq 5% of body weight
2. Weight loss is < 5% of body weight, but weight loss is being maintained (i.e., not gaining weight)

Limitations

1. Initial and reauthorization approvals may be granted for up 90 days at a time

References

1. Alli (orlistat) [prescribing information]. Moon Township, PA: GlaxoSmithKline, Sep 2014.
2. Contrave (naltrexone/bupropion) [prescribing information]. Morristown, NJ: Currax Pharmaceuticals LLC; March 2021
3. Qsymia (phentermine/topiramate) [prescribing information]. Campbell, CA: VIVUS Inc; October 2020.
4. Saxenda (liraglutide) [prescribing information]. Plainsboro, NJ: Novo Nordisk Inc; December 2020



5. le Roux CW, Astrup A, Fujioka K, et al. 3 years of liraglutide versus placebo for type 2 diabetes risk reduction and weight management in individuals with prediabetes: a randomised, double-blind trial. *Lancet* 2017; 389:1399
6. Allison DB, Gadde KM, Garvey WT, et al. Controlled-release phentermine/topiramate in severely obese adults: a randomized controlled trial (EQUIP). *Obesity* (Silver Spring) 2012; 20:330
7. Caixàs A, Albert L, Capel I, Rigla M. Naltrexone sustained-release/bupropion sustained-release for the management of obesity: review of the data to date. *Drug Des Devel Ther* 2014; 8:1419
8. National Institute of Health (NIH): National Heart Lung, and Blood Institute: North American Association for the Study of Obesity. The practical guide: identification, evaluation, and treatment of overweight and obesity in adults. NIH, April 2019.
9. Centers for Disease Control and Prevention. Overweight & obesity. Available at: <https://www.cdc.gov/obesity/index.html> (Accessed on March 06, 2020)
10. Abbott to Voluntarily Withdraw Meridia® (Sibutramine) in the U.S. [press release on the internet]. Abbott Laboratories (US). 2010 October 8 [cited 8 Oct 2010]. Available from: http://www.abbott.us/us/url/pressRelease/en_US/60.5:5/Press_Release_0908.htm
11. Wadden TA, Volger S, Sarwer DB, Vetter ML, Tsai AG, Berkowitz RI et al. A Two-year randomized trial of obesity treatment in primary care practice. *NEJM*. 2011;365(21):1969-79.
12. Perreault, Leigh. Obesity in adults: drug therapy. In Basow DX (Ed). UpToDate [database on the internet]. Waltham (MA): UpToDate, 2018. Available at: <http://www.utdol.com/utd/index.do>
13. Wegovy (semaglutide) [prescribing information]. Plainsboro, NJ: Novo Nordisk Inc; June 2021.

Review History

09/25/2006: Reviewed & Revised

09/24/2007: Reviewed & Revised

09/22/2008: Reviewed

09/21/2009: Reviewed & Revised

09/27/2010: Reviewed & Revised

02/28/2011: Reviewed

02/27/2012: Reviewed

02/25/2013: Reviewed & Revised P&T Mtg

06/03/2013: Updated (Remove Xenical Rx coverage; 04/2013 P&T discussion)

02/24/2014: Reviewed P&T

11/28/2016: Reviewed

11/27/2017: Reviewed P&T

11/26/2018: Updated

07/22/2020: Review and Updated July P&T; removal of Belviq and Belviq XR from criteria due to removal from market. Effective 10/01/20

07/19/2021: Reviewed July P&T; No changes

09/22/2021: Reviewed September P&T; added Wegovy to criteria; references updated. Effective 11/01/2021

03/16/2022: Reviewed and Updated for March P&T; administrative changes to criteria. No clinical changes.

9/21/2022: Reviewed and Updated for Sept P&T; removed requirement of CV risk factors. Removed requirement of 3-month participation in the outpatient weight loss program. 11/1/2022.

6/21/2023: Reviewed and Updated for July P&T; Added age requirement for all medications per FDA label.

Clarified outpatient weight loss program/lifestyle modifications. Effective: 9/1/23

