

Vumerity® (diroximel fumarate) Effective 01/01/2022

| Plan | MassHealth UPPL Commercial/Exchange | | Prior Authorization Quantity Limit Step Therapy |
|--------------------------|--|---------------------|---|
| Benefit | Pharmacy Benefit Medical Benefit | Program Type | |
| Specialty Limitations | This medication has been designated specialty and must be filled at a contracted specialty pharmacy. | | |
| | Medical and Specialty Medications | | |
| Contact | All Plans | Phone: 877-519-1908 | Fax: 855-540-3693 |
| Information | Non-Specialty Medications | | |
| | All Plans | Phone: 800-711-4555 | Fax: 844-403-1029 |
| Exceptions | N/A | | |

Overview

Vumerity is FDA approved for treatment of relapsing forms of multiple sclerosis, including clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease, in adults.

Coverage Guidelines

Authorizations requests will be reviewed on a case by case basis for members new to the plan who are currently receiving treatment with the requested medication, excluding when the product is obtained as samples or via manufacturer's patient assistance programs.

OR

Authorization may be granted for members when all the following criteria are met, and documentation is provided:

Vumerity[®] (diroximel fumarate)

- 1. The member has a diagnosis of Clinically Isolated Syndrome (CIS) OR Relapse-remitting Multiple Sclerosis (RRMS) OR Active Secondary-Progressive MS (SPMS)
- 2. The prescriber is a neurologist or medication is being prescribed in consultation with a neurologist
- 3. Quantity requested is \leq 4 capsules/day

Continuation of Therapy

Reauthorization requires physician attestation of continuation of therapy and positive response to therapy.

Limitations

1. Initial authorizations and reauthorizations will be granted for 12 months

References

- 1. Vumerity (diroximel fumarate) [prescribing information]. Cambridge, MA: Biogen Inc; August 2020.
- 2. Vumerity (diroximel fumarate) [prescribing information]. Cambridge, MA: Biogen Inc; January 2021.

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc. and Mass General Brigham Health Insurance Company.

Review History

11/17/2021 – Created and Reviewed Nov P&T; Vumerity moved from non-formulary. Effective 01/01/2022.