

WEIGHT LOSS AGENTS

PRIOR AUTHORIZATION IS REQUIRED.

Criteria for Approval of Prior Authorization*

For a nonpreferred agent, a trial of two preferred agents is required. Preferred agents include:

- phentermine-topiramate (Qsymia capsules or tablets)
- naltrexone-bupropion (Contrave tablets)
- liraglutide (Saxenda pen injectors)
- semaglutide (Wegovy pen injectors)

The member must meet **one** of the following:

- Has a BMI of 30 or greater
- Has a BMI of 27-29 **and** one of the following comorbidities:
 - Diabetes mellitus
 - Hypertension
 - Hyperlipidemia
 - Coronary Artery Disease (e.g., heart bypass surgery, CABG, history of a MI, stroke, angina)
 - Obstructive sleep apnea

The prescriber attests to the following:

- Member is actively involved in a dietary/behavior modification program for weight loss.
- Member is actively following a fitness exercise regimen.

Important Reminders for Submitting a Prior Authorization

- Include the patients BMI and any qualifying comorbidities.
- Document if the member is actively involved in a dietary and fitness program.
- Note that missing information may result in a denial.
- Resubmit any additional information directly to pharmacy for review within 24 hours.

Electronic Prior Authorization with CoverMyMeds

CoverMyMeds helps patients get their medication by streamlining the prior authorization process for providers and pharmacists. Start today by creating a free account or logging in to your existing account at CoverMyMeds.com.

We're here to help.

Visit HighmarkHealthOptions.com to view the preferred drugs, the most up-to-date criteria, and to access drug specific request forms. For more information, call Pharmacy Services at 1-844-325-6251, Monday–Friday, 8 a.m. to 7 p.m.

* As of July 2023