Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

Conjugated equine estrogensbazedoxifene tablets (Duavee)

Notes:

- Quantity Limits: Yes
- 1 Formulary oral or transdermal estrogen at dose approximately equivalent to 0.45 mg conjugated equine estrogens: estradiol tablet 0.75 mg (Estrace), weekly patch 0.0375 mg (Climara), biweekly patch 0.0375 mg (Dotti) or transdermal gel packet 0.75 mg (Divigel).
- ² Formulary progestogens such as medroxyprogesterone acetate (Provera), micronized progesterone (Prometrium), norethindrone tablet (NoraBE and generics), norethindrone acetate (Aygestin and generics), levonorgestrel IUD (Mirena)
- Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation or can likely be relieved by adjusting the dose and/or frequency or trial of another medication in the class. Also excludes product dosage form issues that can be resolved with education, changes to timing of dose and/or frequency or switching to a different product or manufacturer.

<u>Initiation (new start) criteria</u>: Non-formulary conjugated equine estrogens-bazedoxifene (Duavee) will be covered on the prescription drug benefit for <u>12 months</u> when the following criteria are met:

- Patient has vasomotor symptoms of menopause severe enough to interfere with daily activities and/or sleep
- Patient has an intact uterus
- Patient has a contraindication to progestogens OR patient is stable on a systemic estrogen at a dose approximately equivalent to 0.45 mg conjugated equine estrogens and has tried and failed 2 different progestogens^{1,2} due to intolerance³ to the progestogen component (bleeding, breast tenderness, cognitive or mood symptoms)

<u>Criteria for current and new Kaiser Permanente members already taking the medication who have not been reviewed previously</u>: Non-formulary conjugated equine estrogens-bazedoxifene (Duavee) will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Vasomotor symptoms are partially or fully resolved
- Patient has an intact uterus
- Patient has a contraindication to progestogens OR patient has tried and failed 1 progestogen² due to intolerance³ to the progestogen component (bleeding, breast tenderness, cognitive or mood symptoms)

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Revised: 3/13/25 Effective: 5/15/25 All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest



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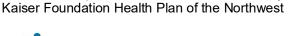
NOTE: If information is not available in Care Everywhere and patient is unable to verify in an interview, the patient or new provider will need to request outside records from previous provider(s).

<u>Continued use criteria (12 months after approval)</u>: Non-formulary <u>conjugated</u> <u>estrogens-bazedoxifene (Duavee)</u> will be covered on the prescription drug benefit for <u>12 months</u> when the following criteria are met:

- Vasomotor symptoms are partially or fully resolved
- Starting at 60 years of age: If symptoms have fully resolved, then trial off to determine if symptoms return and drug treatment is still medically necessary. Repeat a trial off every 2 years.

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