

December 6, 2023

New CareAdvantage D-SNP Formulary Change Effective 1/1/2024

Dear providers,

In 2024 the Health Plan of San Mateo (HPSM) will be making some changes to the drug formulary to provide more cost-effective alternatives for our members. Starting 1/1/2024, the Health Plan of San Mateo (HPSM) will be removing Victoza from its formulary for patients who are enrolled in the CareAdvantage Dual Special Needs Plan (D-SNP). This letter is to inform you of this change as it may affect a drug your patient is taking.

What you need to know: Patients who have previously received Lantus will be able to obtain a temporary 30-day supply. After this, HPSM will no longer cover Victoza without prior authorization. To avoid disruption, please consider switching patients to one of the formulary alternatives outlined below.

Impacted Drugs and Formulary Alternatives Available:

Drug	Change 1/1/24	Preferred Formulary Alternative
Victoza Pen	Remove from formulary	<ul style="list-style-type: none"> • Trulicity Pen • Ozempic Pen • Rybelsus Tablet

This list is not all-inclusive. Please visit our website for a complete list of changes and for information about our current formulary.

If you believe that Ozempic, Trulicity, or Rybelsus is not appropriate for your patient, you may submit a prior authorization request with clinical justification provided as to why you believe your patient cannot utilize Ozempic, Trulicity, or Rybelsus. A decision is usually granted no later than 72 hours after the request has been sent or within 24 hours for expedited requests. Learn about authorizations here:

<https://www.hpsm.org/provider/authorizations/prescription-drugs>

For further questions regarding the formulary changes outlined in this letter, you may call HPSM Pharmacy Services at **650-616-2088**. You can also direct questions to HPSM Provider Services at PSInquiries@hpsm.org.

Thank you for your continued commitment to our community, The Health Plan of San Mateo