AETNA BETTER HEALTH® Coverage Policy/Guideline					
Name:	Winrevair			Page:	1 of 4
Effective Date:	7/22/2024			Last Review Date:	5/2024
Applies to:	☐Illinois ☐New Jersey ☒Pennsylvania Kids	☐Florida ☒Maryland ☒Virginia		☒Florida Kids ☐Michigan ☒Kentucky PRMD	

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Winrevair under the patient's prescription drug benefit.

Description:

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indication
Winrevair is indicated for the treatment of adults with pulmonary arterial hypertension (PAH, World Health Organization [WHO] Group 1) to increase exercise capacity, improve WHO functional class (FC), and reduce the risk of clinical worsening events.

All other indications are considered experimental/investigational and not medically necessary.

Applicable Drug List:

Winrevair

Policy/Guideline:

Documentation:
Submission of the following information is necessary to initiate the prior authorization review for initial requests: Chart notes, medical record documentation, or claims history supporting current pulmonary arterial hypertension (PAH) therapy.

Prescriber Specialty:
This medication must be prescribed by or in consultation with a pulmonologist or cardiologist.

Criteria for Initial Approval:
Pulmonary arterial hypertension (PAH)
Authorization of 12 months may be granted for treatment of PAH in members 18 years of age and older when ALL of the following criteria are met:

1. Member has PAH defined as WHO Group 1 class of pulmonary hypertension (refer to Appendix).
2. PAH was confirmed by right heart catheterization with all of the following results:
   i. Mean pulmonary arterial pressure (mPAP) > 20 mmHg

   ii. Pulmonary capillary wedge pressure (PCWP) ≤ 15 mmHg
   iii. Pulmonary vascular resistance (PVR) ≥ 5 Wood units while member is stable on at least two PAH medications
3. The requested medication will be used as add-on therapy.
4. Member is currently receiving PAH therapy with medications from at least two of the following drug classes:
   i. Endothelin receptor antagonist (e.g., Letairis, Opsumit, Tracleer)
   ii. Phosphodiesterase-5 inhibitor (e.g., Adcirca, Revatio)
   iii. Soluble guanylate cyclase stimulator (e.g., Adempas)
   iv. Prostacyclin analog (e.g., Flolan, Orenitram, Remodulin, Tyvaso, Veletri, Ventavis)
   v. Prostacyclin receptor agonist (e.g., Uptravi)

Continuation of Therapy:
Authorization of 12 months may be granted for members with an indication listed in criteria for initial approval who are currently receiving the requested medication through a paid pharmacy or medical benefit, and who are experiencing benefit from therapy as evidenced by disease stability or disease improvement.

Appendix:
WHO Classification of Pulmonary Hypertension (PH)
1 Pulmonary arterial hypertension (PAH)
1.1 Idiopathic PAH
1.2 Heritable PAH
1.3 Drug- and toxin-induced PAH
1.4. PAH associated with:
   1.4.1 Connective tissue disease
   1.4.2 Human immunodeficiency virus (HIV) infection
   1.4.3 Portal hypertension
   1.4.4 Congenital heart disease
   1.4.5 Schistosomiasis
1.5 PAH long-term responders to calcium channel blockers
1.6 PAH with overt features of venous/capillaries (pulmonary veno-occlusive disease [PVOD]/pulmonary capillary hemangiomatosis [PCH]) involvement
1.7 Persistent PH of the newborn syndrome

2 PH due to left heart disease
2.1 PH due to heart failure with preserved left ventricular ejection fraction (LVEF)
2.2 PH due to heart failure with reduced LVEF
2.3 Valvular heart disease
2.4 Congenital/acquired cardiovascular conditions leading to post-capillary PH

3 PH due to lung diseases and/or hypoxia
3.1 Obstructive lung disease
3.2 Restrictive lung disease
3.3 Other lung disease with mixed restrictive/obstructive pattern
3.4 Hypoxia without lung disease
3.5 Developmental lung disorders

4 PH due to pulmonary artery obstructions
4.1 Chronic thromboembolic PH
4.2 Other pulmonary artery obstructions
- 4.2.1 Sarcoma (high or intermediate grade) or angiosarcoma
- 4.2.2 Other malignant tumors
  - Renal carcinoma
  - Uterine carcinoma
  - Germ cell tumors of the testis
  - Other tumors
- 4.2.3 Non-malignant tumors
  - Uterine leiomyoma
- 4.2.4 Arteritis without connective tissue disease
- 4.2.5 Congenital pulmonary artery stenosis
- 4.2.6 Parasites
  - Hydatidosis

5 PH with unclear and/or multifactorial mechanisms
5.1 Hematologic disorders: Chronic hemolytic anemia, myeloproliferative disorders
5.2 Systemic and metabolic disorders: Pulmonary Langerhans cell histiocytosis, Gaucher disease, glycogen storage disease, neurofibromatosis, sarcoidosis
5.3 Others: Chronic renal failure with or without hemodialysis, fibrosing mediastinitis
5.4 Complex congenital heart disease

Approval Duration and Quantity Restrictions:
Approval: 12 months
Quantity limit: 1 kit (two vials) every 21 days

References:
1. Winrevair [package insert]. Rahway, NJ: Merck Sharp & Dohme LLC; March 2024.
2. Hoeper MM, Badesch DB, Ghofrani HA, et al. Phase 3 trial of sotatercept for treatment of pulmonary arterial hypertension. *N Engl J Med*. 2023;388(16):1478-1490. doi: 10.1056/NEJMoa2213558
3. Hoeper MM, Badesch DB, Ghofrani HA, et al. Phase 3 trial of sotatercept for treatment of pulmonary arterial hypertension. Supplementary appendix. *N Engl J Med*. 2023;Suppl Appendix.

4. Galie N, McLaughlin VV, Rubin LJ, Simonneau G. An overview of the 6th World Symposium on Pulmonary Hypertension. *Eur Respir J.* 2019;53(1):1802148. doi: 10.1183/13993003.02148-2018
5. Simonneau G, Montani D, Celermajer DS, et al. Haemodynamic definitions and updated clinical classification of pulmonary hypertension. *Eur Respir J.* 2019;53(1):1801913. doi:10.1183/13993003.01913-2018
6. Acceleron Pharma, Inc. A Study of Sotatercept for the Treatment of Pulmonary Arterial Hypertension (MK-7962-003/A011-11)(STELLAR). In: ClinicalTrials.gov [Internet]. Bethesda (MD): National Library of Medicine (US). 2000- [4/25/2024]. Available from: https://clinicaltrials.gov/study/NCT04576988. NLM Identifier: NCT04576988.