

Pharmacy Drug Policy Checklist

POLICY NAME Wegovy (semaglutide) POLICY #

Criteria

Exclusion Criteria – Any of the following prevents coverage	
	2.1 Request for coverage is solely for weight loss
	2.2 History of type 1 or type 2 diabetes
	2.3 New York Heart Association Class IV (4) heart failure
	2.4 Wegovy will not be covered in combination with any other GLP-1 agonists (such as Ozempic)
Coverage Criteria	
	1.1 Treatment is being requested to reduce the risk of major adverse cardiovascular (heart) events (cardiovascular (heart related) death, non-fatal heart attack, or non-fatal stroke)
	1.2 Age 45 years or older
	1.3 Documentation patient has obesity as confirmed by a body mass index ≥27
	 1.4 Documentation patient has established cardiovascular (heart) disease as evidenced by one of the following: Prior heart attack Prior stroke (ischemic or hemorrhagic stroke) Peripheral arterial disease (such as intermittent claudication with ankle-brachial index <0.85 at rest, peripheral arterial revascularization procedure, or amputation due to atherosclerotic heart disease)
	 1.5 Wegovy will be used as an adjunct to lifestyle modification (dietary restriction, exercise, etc) For State of Illinois members: participation in Virta Health or equivalent Health Alliance supported lifestyle management program if member is excluded from Virta Health is required
	1.6 Prescribed by or in consultation with a cardiologist (heart doctor)
	1.7 Patient is receiving standard of care treatment for heart disease as appropriate/indicated including an antiplatelet agent (such as clopidogrel), lipid-lowering drug (such as atorvastatin), antihypertensive (such as lisinopril)