UnitedHealthcare Pharmacy
Clinical Pharmacy Programs

Program Number	2026 P 4019-5
Program	Benefit Determination –Mifeprex 200 mg and mifepristone (generic Mifeprex) 200 mg
Medication	Mifeprex 200 mg and mifepristone (generic Mifeprex) 200 mg
P&T Approval Date	11/2022, 1/2023, 3/2024, 4/2025, 5/2026
Effective Date	8/1/2026

1. Background:

Effective January 3, 2023, the Risk Evaluation and Mitigation Strategy (REMS) program for Mifeprex (mifepristone) was revised to allow the product to be dispensed by certified retail and mail order pharmacies. Previously, this product was only available when ordered, prescribed, and dispensed by or under the supervision of a healthcare provider.

These products are standardly covered without prior authorization. The purpose of this program is to determine coverage of Mifeprex 200 mg and mifepristone (generic Mifeprex) 200 mg when variations to our standard are present in plan benefit documents (e.g., required by state mandate, group choice, etc.).

2. Coverage Criteria:

A. <u>Authorization</u>

1. **Mifeprex 200 mg** and **mifepristone (generic Mifeprex) 200 mg** will be approved based on the following criterion:

   a. Treatment is required consistent with services covered by the patient's medical benefit plan. (For more information about covered and excluded termination of pregnancy services, providers may review the patient's medical benefit plan document or access information contained in the member's medical benefit plan document, by contacting provider services at 1-888-842-3210, or accessing the provider portal at www.uhcprovider.com)

Authorization will be issued for 1 month.

3. Additional Clinical Rules:

- Notwithstanding Coverage Criteria, UnitedHealthcare may approve initial and re-authorization based solely on previous claim/medication history, diagnosis codes (ICD-10) and/or claim logic. Use of automated approval and re-approval processes varies by program and/or therapeutic class.

4. References:

N/A

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Change Control	
Date	Change
11/2022	New program.
1/2023	Updated background and criteria to refer to medical plan documents.
2/2024	Annual review. No updates.
4/2025	Annual review. No updates.
5/2026	Annual review. No updates.

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