

ANDRODERM  
 ANDROGEL 1%  
 ANDROGEL 1.62%  
 ANDROID  
 ANADROL-50  
 ANDROXY  
 AXIRON  
 DELATESTRYL  
 DEPO-TESTOSTERONE  
 FORTESTA  
 METHITEST  
 NATESTO  
 STRIANT  
 TESTRED  
 VOGELXO

fluoxymesterone tablet  
 methyltestosterone capsule  
 testosterone cypionate IM  
 testosterone enanthate IM  
 testosterone 1% gel  
 testosterone 1.62% gel  
 testosterone solution

**Diagnosis Considered for Coverage:**

- Anemia – *Anadrol-50 only*
- Breast cancer (palliative treatment) – *Android, Methitest, Testred only*
- Delayed male puberty - *Android, Methitest, Testred only*
- Testosterone replacement in men for conditions associated with a deficiency or absence of endogenous testosterone (hypogonadism) – *all agents*
- Testosterone treatment for transgender patient – *all agents*

**Coverage Criteria:**

**1. For diagnoses above:**

- Dose does not exceed FDA approved dosing, **and**
- Meets step therapy requirement noted below:

AGENT	COVERAGE CRITERIA
<ul style="list-style-type: none"> <li>• testosterone 25 mg gel packet (Androgel 25 mg packet)</li> <li>• testosterone 50 mg gel packet (Androgel 50 mg packet, Testim 50 mg packet, Vogelxo 50 mg packet)</li> <li>• testosterone 12.5 mg gel</li> </ul>	<ul style="list-style-type: none"> <li>• Dose does not exceed FDA label maximum, <b>and</b></li> <li>• One of the following:               <ul style="list-style-type: none"> <li>• Being used for testosterone deficiency in male (hypogonadism), <b>or</b></li> <li>• Being used as testosterone therapy for transgender patient.</li> </ul> </li> </ul>

<p>pump (Androgel 12.5 mg pump, Vogelxo 12.5 mg pump)</p> <ul style="list-style-type: none"> <li>• testosterone 20.25 mg (Androgel 1.62% pump)</li> <li>• testosterone 20.25 mg (Androgel 1.62% packet)</li> </ul>	
<ul style="list-style-type: none"> <li>• testosterone 30 mg solution (Axiron)</li> <li>• testosterone 10 mg gel (Fortesta)</li> <li>• testosterone 50 mg gel tube (Testim, Vogelxo)</li> </ul>	<ul style="list-style-type: none"> <li>• Dose does not exceed FDA label maximum, <b>and</b></li> <li>• One of the following:</li> <li>• Being used for testosterone deficiency in male (hypogonadism), <b>or</b></li> <li>• Being used as testosterone therapy for transgender patient.</li> </ul> <p><b>AND</b></p> <p><b>FOR STANDARD PLAN</b></p> <ul style="list-style-type: none"> <li>• Inadequate response, intolerable side effect, or contraindication with ONE formulary testosterone agent including:</li> <li>• testosterone 12.5 mg bottle (Androgel 1%, Vogelxo),</li> <li>• testosterone 25 mg gel packet (Androgel 1%),</li> <li>• testosterone 50 mg gel packet (Androgel 1%, Vogelxo).</li> <li>• testosterone 20.25 mg (Androgel 1.62% pump)</li> <li>• testosterone 20.25 mg (Androgel 1.62% packet)</li> </ul>
<ul style="list-style-type: none"> <li>• Androderm</li> <li>• Natesto</li> <li>• Striant</li> </ul>	<ul style="list-style-type: none"> <li>• Dose does not exceed FDA label maximum, <b>and</b></li> <li>• One of the following: <ul style="list-style-type: none"> <li>• Being used for testosterone deficiency in male (hypogonadism), <b>or</b></li> </ul> Being used as testosterone therapy for transgender patient. </li> </ul> <p><b>AND</b></p> <p><b>FOR STANDARD PLAN</b></p> <ul style="list-style-type: none"> <li>• Inadequate response, intolerable side effect, or contraindication with ONE formulary testosterone agent including: <ul style="list-style-type: none"> <li>• testosterone 12.5 mg bottle (Androgel 1%, Vogelxo),</li> <li>• testosterone 25 mg gel packet (Androgel 1%),</li> <li>• testosterone 50 mg gel packet (Androgel 1%, Vogelxo).</li> <li>• testosterone 20.25 mg (Androgel 1.62% pump)</li> <li>• testosterone 20.25 mg (Androgel 1.62% packet)</li> </ul> </li> </ul> <p><b>FOR PLUS PLAN</b></p> <ul style="list-style-type: none"> <li>• Inadequate response, intolerable side effect, or contraindication with ONE formulary testosterone agent including: <ul style="list-style-type: none"> <li>• testosterone 12.5 mg bottle (Androgel 1%, Vogelxo),</li> <li>• testosterone 25 mg gel packet (Androgel 1%),</li> <li>• testosterone 50 mg gel packet (Androgel 1%, Vogelxo).</li> <li>• testosterone 30 mg solution (Axiron)</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>• testosterone 10 mg gel (Fortesta)</li> <li>• testosterone 50 mg gel tube (Testim, Vogelxo)</li> <li>• testosterone 20.25 mg (Androgel 1.62% pump)</li> <li>• testosterone 20.25 mg (Androgel 1.62% packet)</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Anadrol-50</b></li> </ul>	<ul style="list-style-type: none"> <li>• Being used for anemia caused by deficient red blood cell production, <b>and</b></li> <li>• Dose does not exceed FDA label maximum.</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Android</b></li> <li>• <b>fluoxymesterone (Androxy)</b></li> <li>• <b>Methitest</b></li> <li>• <b>methyltestosterone (Testred)</b></li> </ul>	<ul style="list-style-type: none"> <li>• Dose does not exceed FDA label maximum, <b>and</b></li> <li>• One of the following: <ul style="list-style-type: none"> <li>• Being used for testosterone deficiency in male (hypogonadism), <b>or</b></li> <li>• Being used as testosterone therapy for transgender patient, <b>or</b></li> <li>• Being used for delayed male puberty, <b>or</b></li> <li>• Being used for palliative treatment of breast cancer.</li> </ul> </li> </ul>

2. **For brand-name Androgel, Axiron, Fortesta, Testim, Vogelxo:**

- Meets above coverage criteria for generic, **and**
- Allergic or intolerable side effect to the generic formulation

**Coverage Duration:** Length of benefit

Effective: 2/01/2019

Posted: 2/15/2019