



MISSISSIPPI DIVISION OF
MEDICAID

Prior Authorization Criteria

WEGOVY® (semaglutide) PA Criteria FOR METABOLIC DYSFUNCTION-ASSOCIATED STEATOHEPATITIS (MASH):

WEGOVY® (semaglutide) is a glucagon-like peptide-1 (GLP-1) receptor agonist indicated in combination with a reduced calorie diet and increased physical activity for the treatment of noncirrhotic metabolic dysfunction-associated steatohepatitis (MASH), formerly known as nonalcoholic steatohepatitis (NASH), with moderate to advanced liver fibrosis (consistent with stages F2 to F3 fibrosis) in adults.

Prior authorization is required for WEGOVY® (semaglutide). Prior authorization approval will be considered when the following criteria are met. Along with the Universal PA Form, please submit any supporting clinical documentation.

Initial Authorization: 12 months

1. Age of the patient is within the age range as recommended by the FDA label; **AND**
2. Patient has a diagnosis of metabolic dysfunction-associated steatohepatitis (MASH) [formerly known as nonalcoholic steatohepatitis (NASH)] with moderate to advanced liver fibrosis (consistent with stages F2 to F3 fibrosis) that has been confirmed by clinical presentation along with laboratory findings and/or imaging and/or biopsy results; **AND**
3. Patient does NOT have decompensated cirrhosis; **AND**
4. Prescribed by or in consultation with a gastroenterologist or hepatologist; **AND**
5. Prescriber attests that WEGOVY® will be used in conjunction WITH diet and exercise and WITHOUT excessive alcohol consumption; **AND**
6. Prescribed dosage does NOT exceed WEGOVY® 2.4 mg subcutaneously once weekly.

Re-Authorization: 12 months

1. Patient continues to meet initial authorization requirements; **AND**
2. Documentation of positive clinical response to therapy (e.g., improvement or stabilization of fibrosis); **AND**
3. Patient is maintained on either Wegovy 2.4 mg or 1.7 mg weekly.



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WEGOVY® Dosing for MASH:

- Administer subcutaneously once weekly as an adjunct to diet and increased physical activity, on the same day each week, at any time of day, with or without meals.
- Initiate at 0.25 mg once weekly for 4 weeks. Then follow the dosage escalation schedule, titrating every 4 weeks to achieve the maintenance dosage. For patients with MASH, the maintenance dosage is 2.4 mg once weekly. If this dose cannot be tolerated, then the dosage can be decreased to 1.7 mg once weekly.

Formulation:

- Available as prefilled, single-dose injection pens that deliver doses of 0.25 mg, 0.5 mg, 1 mg, 1.7 mg, or 2.4 mg.