

From: [Kit Weintraub](#)
To: [ETF SMB Board Feedback](#); [Doss-Anderson, Liz - ETF](#)
Subject: FW: Navitus Issues With Approval/Denial Of Mounjaro; Coverage Of Weight Loss Medications As An Employee Benefit
Date: Wednesday, November 2, 2022 2:41:15 PM

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Dear Department of Employee Trust Funds Group Insurance Board:

I would like to add an addendum to my email below; I just found out yesterday from Liz-Doss-Anderson that the reason (if I am understanding this correctly) that an error code is generated instead of a denial, when a claim is submitted for Mounjaro, is because the medication is being used "off-label" for weight loss instead of the FDA approved use, which is diabetes. Liz, at my request, spoke with her contact in the pharmacy benefit department at Navitus, and was told, as I understand it, that because the medication was being used off-label, and *ETF specifically excludes reimbursement for medications used off label*, that an error code is generated. I also double-checked with a Navitus employee that I know, who is very familiar with the way medications are coded, processed, approved or denied. She confirmed that trying to obtain a prior authorization or an exception will still produce an error code rather than an approval or a denial. She said I would be wasting my time asking my doctor to complete an exception, something that been suggested by Navitus customer service representatives as a possible solution.

I am thinking there must be a mistake or misunderstanding, or I am perhaps not understanding the policy position correctly; from what I have read, at least 20% of all medications prescribed in the United States are prescribed off-label. This is not only legal but ethical and widely accepted as best practices, depending on the individual situation. There are countless conditions for which there are no FDA approved treatments, but nevertheless there is research that shows evidence of efficacy for certain off-label uses. Navitus pays for off-label use of medications all the time. I am aware of some very rare conditions that have absolutely no FDA authorized treatments and some of these off-label uses are literally lifesaving. I know someone who has a rare demyelinating disease that has no FDA approved treatment. He is treated with a drug that is FDA approved for Lymphoma. It has greatly slowed the progression of his disease. I am aware of a young child who has a rare kidney disorder. He takes three off label medications that are not FDA approved for his condition. They are medically necessary. His condition is so rare that there will likely never be an FDA approved treatment. There is very little funding for rare disorders. I could go on and on describing treatments that are used off-label that Navitus routinely covers that are either life-saving, life-prolonging, or they just contribute to improving a person's quality of life. I am sure some of you have, at one point, like most Americans, used a medication that was not FDA approved for the condition you are taking it for, and likely, your physician thought it was appropriate and beneficial, and your insurance paid for it. These treatments are not prescribed lightly by physicians. They do so after anecdotal studies and research generates satisfactory evidence that the off-label treatments are both safe and effective for that condition.

I hope you at least look into the system that neither approves nor denies Mounjaro, based on the fact that it is not yet approved for the treatment of Obesity, but is being used off-label, quite successfully, to help obese people lose weight and become healthier. If they are not going to approve the treatment of obesity with medication for the coming year, at least please see if there is any way you can convince Navitus to at the very least deny the claim for Mounjaro, so that people can use the manufacturer's coupon to help defray the cost of the medication.

And please consider allowing the treatment of obesity by the use of medications in the near future. I guarantee you, that people will be healthier; have fewer gastric bypasses, fewer heart attacks, strokes, knee replacements, and diabetes.

Thank you again for your time. I look forward to hearing from you.

Sincerely,

Kit Weintraub

Sent from [Mail](#) for Windows

From: [Kit Weintraub](#)

Sent: Monday, October 31, 2022 3:40 PM

To: boardfeedback@etf.wi.gov; Liz.Doss-Anderson@etf.wi.gov

Subject: Re: Navitus Issues With Approval/Denial Of Mounjaro; Coverage Of Weight Loss Medications As An Employee Benefit

Dear Department of Employee Trust Funds Group Insurance Board:

I am the spouse of a State of Wisconsin employee, and I am covered under his health insurance and pharmacy benefit plan.

Recently, I became aware of a new medication, Mounjaro (Tirzepatide), a weekly injectable medication, which was approved by the FDA for the treatment of type 2 diabetes this past June. In reading about it in several news articles and medical journals, I found that it causes significant weight loss; comparable to weight loss achieved through weight loss surgery, with few significant side effects. Mounjaro is also currently in phase three clinical trials for weight loss treatment, since it has been found to be so remarkably effective at causing weight loss during the diabetic clinical trials. It is similar to Wegovy, in that it is a GLP-1 receptor agonist, but also is a GIP agonist. In essence, it has much more of an effect on weight loss, due to two powerful medications that influence weight loss in multiple ways. It is literally a game-changer; causing up to an average of 22% of bodily weight loss on average, in obese individuals. It is also less expensive than Wegovy.

I have struggled with my weight for most of my adult life. I have been on multiple diets and exercise/lifestyle change regimes. My relatives have all been overweight; it's likely at least in part genetic for us. It's very hard for people who are chronically overweight to be successful at losing and

maintaining weight, when your body is fighting back with hunger signals and cravings. This is a reality for most obese people, and consequently, most weight loss attempts for the chronically obese end in failure.

Obesity is a chronic illness, just like hypertension, diabetes, heart disease and many others. This medication causes an increase in Leptin, which causes people to feel full more readily, and it drastically cuts down on cravings. It causes the stomach to empty more slowly, so people on this medication feel full and satisfied for longer. People who take Mounjaro experience a rapid reduction in HA1C, lowered blood pressure and cholesterol, reduced joint pain, and they are able to exercise more easily, and eat more sensibly, since cravings for high calorie foods are diminished. It is a real game changer.

I have been taking Mounjaro for the past few months, and have lost around 35 lbs so far. I spoke with my doctor about going off of my blood pressure and cholesterol medication, which I will likely do in the next few weeks, and I am exercising daily, something I haven't been able to do in years. My son is also obese, and has recently started using Mounjaro. He has lost about 20 lbs, and is feeling great. My husband is taking Mounjaro for diabetes, and his A1C has come down significantly, along with his weight.

Eli Lilly has offered a savings card, which allows people with commercial insurance to pay only \$25.00 for a month's supply, whether they are approved by insurance or not. This savings card is expected to expire next year, but many are taking advantage of it currently and losing unprecedented amounts of weight. Though Mounjaro has been approved for TT2 Diabetes, the FDA has fast-tracked Lilly's application for FDA approval for weight loss treatment, and it is anticipated to be approved by the FDA in the Spring of 2023. They may offer another savings card for obesity when Mounjaro is approved for it.

The manufacturer savings card requires that a pharmacist run the primary insurance first, receive an approval or denial, and then the savings card is run as secondary insurance, so that the maximum cost to the customer is \$25.00. There are many people country-wide on internet support groups who use the coupon to afford Mounjaro, which has a list price of around \$1,167.00 a month. I have run into an issue and found that many other people who I have talked to have the same issue; Navitus for some reason is not issuing denials or approvals; they are issuing the error code: Wrong Diagnosis, since technically it's currently being used off-label to treat obesity, and our Navitus plan currently excludes Obesity treatment. All other insurance companies are just denying or approving the coverage. From the number of people on this support group I have spoken to, and there are many, only Navitus seems to be blocking the use of the coupon whether it's inadvertent or purposely. I can't imagine that it would be intentional, but it is confusing. I have spoken to them several times and no one seems to know why they are blocking the use of the coupon by refusing to deny the claim. I have not heard of another insurance company or pharmacy benefits administrator that is blocking the use of the coupon by refusing to issue a denial. If a denial could be issued instead of an error code, at least people could use the coupon to cover the cost of their Mounjaro. This is a nation-wide issue with Navitus, and many of us across the country have gotten nowhere talking to them, so I am reaching out to make you aware that very many State of Wisconsin/ETF employees are being blocked from using the savings card due to the policies of Navitus.

Secondly, I am asking you to consider coverage for obesity medications, since this new class of medications is far more effective, and I believe, cost-effective. Considering all of the comorbidities, medications, surgeries and hospitalizations that accompany obesity, I believe that the costs, when one considers the effectiveness of Mounjaro are justified. Obesity is responsible for heart attacks, strokes, cancer, diabetes, amputations, kidney failure, Alzheimer's, knee replacements, hip replacements; back surgeries, mobility issues, medications for blood pressure, diabetes, high cholesterol, and I could go on and on. Not to mention the fact that I know many people who were on the verge of weight loss surgery and chose instead to try Mounjaro and then lost so much weight, they no longer needed the surgery. Perhaps you could put parameters in place such as you have for weight loss surgery; such as BMI, comorbidities, failed attempts at weight loss, etc.

This just may be the wave of the future and it may actually bring down your costs and make your employees healthier and happier. Currently there are many employees I have spoken with that are crushed that Navitus is blocking the use of the coupon, and that they are unable to have their chronic condition, obesity, covered by our insurance plan. Obesity is a chronic relapsing disease, like so many others. If people can be treated with a medication that is both safe and effective, it will surely bring about better overall health and lower costs.

Obesity as a chronic disease has been discriminated against for so long, as a choice, a vanity issue, a lifestyle issue or just laziness, lack of discipline or willpower. Evidence suggests that obesity is such a complex disease, caused by so many factors, and until now, we have failed to find an effective treatment. People with obesity are finally able to see a glimmer of hope with the development of these new game-changing treatments.

Please consider covering Mounjaro, for the health and the happiness of your employees.

Thank you so much for your time and attention to this matter,

Very Truly Yours,

Kit Weintraub

Navitus Member ID # [REDACTED]

[REDACTED]

Sent from [Mail](#) for Windows



STATE OF WISCONSIN
Department of Employee Trust Funds
A. John Voelker
SECRETARY

Wisconsin Department
of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931
1-877-533-5020 (toll free)
Fax 608-267-4549
etf.wi.gov

November 3, 2022

Kit Weintraub
[REDACTED]

Dear Ms. Weintraub:

Thank you for your email of October 31, 2022, and the addendum you emailed on November 2, 2022, regarding weight-loss medications and for sharing your experience using Mounjaro.

The early results of studies on Mounjaro as a weight-loss drug are very encouraging. The staff at the Department of Employee Trust Funds (ETF) and the Group Insurance Board's (Board's) Pharmacy Benefit Manager (PBM), Navitus Health Solutions (Navitus), are watching all of the news stories and press releases from Eli Lilly regarding the drug. It is very telling that the United States Food and Drug Administration (FDA) has fast-tracked the drug for possible approval for use as a weight-loss drug for consideration as soon as the Spring of 2023.

Currently, Mounjaro is covered on the Board's Commercial pharmacy formulary as a Level 2 drug for Type 2 diabetes treatment only. The Board's Medicare Part D pharmacy formulary covers Mounjaro also only for Type 2 diabetes and as a Level 3 drug. The Medicare Part D formulary is set by the United States Center for Medicare & Medicaid Services (CMS). Neither formulary will cover a drug or the usage of a drug to treat a certain condition that isn't approved by the FDA.

Once Mounjaro is approved by the FDA, Navitus's Pharmacy and Therapeutics (P&T) Committee will meet to discuss and decide on if they believe their clients, such as the Board, should be given the option of adding Mounjaro as a weight-loss drug to the formulary. If the P&T Committee approves the drug, it is up to each of Navitus's clients to decide whether or not to add the new drug to their formularies.

United States Code [42 U.S.C. §1395W-102](#) excludes CMS, which creates the Medicare Part D drug formulary, from including coverage for weight-loss drugs.

The issue you are having with the Eli Lilly Mounjaro Savings Card is that you are trying to use the drug for weight loss, which is not an FDA-approved usage of the drug. On the mounjaro.com website, under the "Savings Card Terms and Conditions" section, it states:

“For patients with commercial drug insurance who do not have coverage for Mounjaro through their commercial drug insurance: Offer good until 06/30/2023 for up to 12 fills or whichever comes first. *Patients must have commercial drug insurance without Mounjaro coverage and a prescription consistent with FDA-approved product labeling* [emphasis added] to pay as little as \$25 for 4 pens of Mounjaro. Offer subject to a monthly and annual cap of wholesale acquisition cost plus usual and customary pharmacy charges.”

You can find the terms and conditions for the savings card [HERE](#). Under the “Savings for Mounjaro” section, click on the “Terms and Conditions” link. You’ll see other exemptions to the usage of the savings card at this link, including anyone who is on Medicare or Medicare Part D.

The only FDA-approved usage of the drug is for Type 2 diabetes. If a person is using the drug for weight loss, which is not an FDA-approved usage of the drug, they cannot use the savings card. According to Navitus, they, and other PBMs, have not always required a diagnosis code at pharmacy checkouts. However, all PBMs have started to require diagnosis codes on certain drugs. Navitus started requiring diagnosis codes on the entire class of glucagon-like peptide (GLP) drugs as of October 1, 2022. Therefore, if the diagnosis code entered at the pharmacy isn’t for Type 2 diabetes, then a person cannot use this savings card.

To get the Mounjaro savings card you must confirm that you have a Mounjaro prescription for Type 2 Diabetes. On the Mounjaro website [HERE](#), you must click on the “Get Savings Card” button to obtain the Eli Lilly savings card. Once you click on the button, a prompt pops up that asks the user to confirm eligibility. You must confirm that you are a resident of the United States or Puerto Rico, at least 18-years-old, not enrolled in a federal or state government-funded prescription program (examples such as Medicaid, Medicare Part D, and others are given), and confirm that you have a Mounjaro prescription for Type 2 Diabetes. (I have attached a screenshot of this information required to confirm eligibility for the Mounjaro savings card from Eli Lilly in this response.)

If the reason the savings card was issued matched with the correct diagnosis code, a person should have no problem using the savings card. However, because the diagnosis code entered at the pharmacy is for weight loss, the card cannot be used.

With Mounjaro only approved by the FDA to treat Type 2 Diabetes, and Eli Lilly only allowing those with Type 2 Diabetes to use their saving card, you are correct that having your prescriber submit a completed prior authorization form indicating they are prescribing the drug to only treat weight-loss would be ineffective. Navitus is going to connect to the customer service member you spoke with and coach them on the incorrect information they provided to you.

As you wrote in your addendum, Navitus and other PBMs assist people with off-label

medications that help to treat many rare, progressive, life altering diseases and conditions, such as Lymphoma and kidney disorders. Under [2017 Wisconsin Act 165](#) (Act 165), also known as the “Right To Try Act,” a patient may gain access to an investigational drug, device, or biological product as defined under the act if they meet certain criteria. The mandatory criteria are as follows:

- Has been diagnosed with a life-threatening disease or condition.
- Has exhausted approved treatment options and is unable to participate in a clinical trial involving the investigational drug, device, or biological product.
- Has received a recommendation or prescription order from the individual’s treating physician for an investigational drug, device, or biological product.
- Has given written informed consent to use the investigational drug, device, or biological product. The content of the written informed consent provided by the patient must be consistent with and at least as comprehensive as the consent used in clinical trials for the investigational drug, device, or biological product.
- Is aware of the potential costs that may be associated with or otherwise result from the use of the investigational drug, device, or biological product under this section.
- Possesses a written verification executed by the individual’s treating physician attesting that the individual meets the above conditions, and that the physician is not compensated directly by the manufacturer of the investigational drug, device, or biological product for making that attestation.

Given the criteria put into state law by Act 165, using Mounjaro for weight loss does not meet requirements in state statutes.

My colleague in Ombudsperson Services, Ms. Doss-Anderson, mentioned that you are familiar with the memo regarding weight-loss coverage the Board met about in June of this year. As was noted in that memo, the Board is limited from making any changes to the Group Health Insurance Program (GHIP) that would modify or expand benefits by [Wis. Stats. § 40.03\(6\)\(c\)](#). However, there is an exception to the statute if the Board approves a change to the GHIP that would either maintain or reduce premium costs. ETF staff are eager to learn if the long-term studies currently being conducted on weight-loss drugs will show that long-term usage of the drug causes no health issues to users. If the studies show health benefits, then the cost savings of weight-loss drugs may outweigh the high cost of the drugs.

At the November 16, 2022, Board meeting, ETF staff will be presenting a weight management analysis to the Board. The accompanying memo, [“Weight Management Analysis,”](#) includes: an examination of the GHIP’s medical, pharmacy, and wellness benefits; other states’ employee health insurance benefits approach to weight management; legal limitations; and the next steps for the Board to consider. The Board will take no action at the November meeting but possible next steps regarding weight management will be discussed. The November 16, 2022, meeting agenda on the [“Group Insurance Board Meeting Agendas and Materials”](#) page, contains information about how to attend the meeting either in person or virtually.

Kit Weintraub
November 3, 2022
Page 4

Again, thank you for your email. If you have any other further questions, comments, or concerns, please do not hesitate to contact me using the contact information below.

Sincerely,

Tricia Sieg, Pharmacy Benefits Program Manager
Office of Strategic Health Policy
Department of Employee Trust Funds
tricia2.sieg@etf.wi.gov
(608) 261-6006



1

2

3

Get a Mounjaro Savings Card

Please confirm your eligibility below:

- I confirm that I am a resident of the United States or Puerto Rico who is 18 years of age or older.
- I confirm I am NOT enrolled in a federal or state government-funded prescription program.*
- I confirm that I have a Mounjaro prescription for Type 2 Diabetes.

*Medicaid, Medicare Part D, Medigap, DoD, VA, TRICARE®/CHAMPUS, or any state patient or pharmaceutical assistance program.

Continue

From: [Kit Weintraub](#)
To: [ETF SMB Board Feedback](#)
Cc: [Doss-Anderson, Liz - ETF](#); [Sieg, Tricia - ETF](#)
Subject: RE: Navitus Issues With Approval/Denial Of Mounjaro; Coverage Of Weight Loss Medications As An Employee Benefit
Date: Wednesday, November 9, 2022 10:48:52 AM

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Dear Ms. Sieg:

Thank you for responding to my recent letter and the addendum sent to the ETF SMB Board, regarding the benefits of Mounjaro for treatment of obesity.

I, too, am excited about the FDA fast-tracking of Mounjaro for approval for weight loss treatment. I am glad that your board and Navitus's P&T Committee will be exploring the possibility of adding weight-loss medications to their formulary, and to the ETF insurance. I sincerely hope all possible cost savings are explored, such as fewer weight loss surgeries, and reduced comorbidities related to obesity. It's exciting to think that this medication may actually prevent type 2 diabetes in people who take it for weight loss. Weight loss surgeries are not without risks and complications, which can be costly. They may also account for lengthy recoveries and increased hospitalizations, due to complications. Additionally, there are required, yearly blood tests to check for nutritional deficiencies, many of which are expensive. There are also late complications from weight loss surgery, and weight regain is not uncommon.

I realize this is just anecdotal, but for the record, I am a member of an online support group for people who use Mounjaro for weight loss. There are approximately 70,000 members of this support group. Several were part of Lilly's original 72 week Surmount 1 clinical trial. I have been a part of this support group since June, when the drug first became available to the public. I have yet to hear of anyone who has experienced severe side effects from Mounjaro. Some have had initial, transient or ongoing minor issues, like constipation, nausea or heartburn. A few had to stop the medication due to the discomfort of these minor side effects. I haven't heard of anyone in the past four plus months of my membership in this group who had pancreatitis, kidney issues or any other serious side-effects. Usually, members who experience unpleasant side-effects are pretty vocal to the group about their experiences. Eli Lilly discloses the theoretical possibility of thyroid cancer, but to my knowledge, no actual cases have ever been reported for the thousands who have taken this medication, many in excess of six years. It was a complication found in the animal trials only; some of the rats developed thyroid cancer, but it has never been seen in humans taking this medication.

I do understand that the medication is currently only approved for type 2 diabetes, and that Lilly has changed their website to add a statement by the potential card holder to agree that they have type 2 diabetes. This requirement was not on their website until recently, and Lilly seemed to welcome obese customers initially.

Thank you and the Board again for exploring the benefits vs. risks, and cost-effectiveness of adding weight-loss medications to the State Insurance Plan in the future. I appreciate the work that you all do, and look forward to hearing how this decision unfolds in the future. I am hoping also that the Navitus P&T Committee finds merit in the addition of Mounjaro as a weight-loss drug to the formulary, once it is FDA approved for that purpose.

Sincerely,

Kit Weintraub

Sent from [Mail](#) for Windows

From: [ETF SMB Board Feedback](#)

Sent: Friday, November 4, 2022 10:40 AM

To: [Kit Weintraub](#)

Cc: [Doss-Anderson, Liz - ETF](#); [Sieg, Tricia - ETF](#)

Subject: RE: Navitus Issues With Approval/Denial Of Mounjaro; Coverage Of Weight Loss Medications As An Employee Benefit

Dear Ms. Weintraub:

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[Analysis.](#) includes: an examination of the GHIP's medical, pharmacy, and wellness benefits; other states' employee health insurance benefits approach to weight management; legal limitations; and the next steps for the Board to consider. The Board will take no action at the November meeting but possible next steps regarding weight management will be discussed. The November 16, 2022, meeting agenda on the "[Group Insurance Board Meeting Agendas and Materials](#)" page, contains information about how to attend the meeting either in person or virtually.

Again, thank you for your email. If you have any other further questions, comments, or concerns, please do not hesitate to contact me using the contact information below.

Sincerely,

Tricia Sieg, Pharmacy Benefits Program Manager
Office of Strategic Health Policy
Department of Employee Trust Funds
tricia2.sieg@etf.wi.gov
(608) 261-6006

From: Kit Weintraub [REDACTED]
Sent: Wednesday, November 2, 2022 2:41 PM
To: ETF SMB Board Feedback <ETFSMBoardFeedback@etf.wi.gov>; Doss-Anderson, Liz - ETF <Liz.DossAnderson@etf.wi.gov>
Subject: FW: Navitus Issues With Approval/Denial Of Mounjaro; Coverage Of Weight Loss Medications As An Employee Benefit

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I would like to add an addendum to my email below; I just found out yesterday from Liz-Doss-Anderson that the reason (if I am understanding this correctly) that an error code is generated instead of a denial, when a claim is submitted for Mounjaro, is because the medication is being used "off-label" for weight loss instead of the FDA approved use, which is diabetes. Liz, at my request, spoke with her contact in the pharmacy benefit department at Navitus, and was told, as I understand it, that because the medication was being used off-label, and *ETF specifically excludes reimbursement for medications used off label*, that an error code is generated. I also double-checked with a Navitus employee that I know, who is very familiar with the way medications are coded, processed, approved or denied. She confirmed that trying to obtain a prior authorization or an

exception will still produce an error code rather than an approval or a denial. She said I would be wasting my time asking my doctor to complete an exception, something that been suggested by Navitus customer service representatives as a possible solution.

I am thinking there must be a mistake or misunderstanding, or I am perhaps not understanding the policy position correctly; from what I have read, at least 20% of all medications prescribed in the United States are prescribed off-label. This is not only legal but ethical and widely accepted as best practices, depending on the individual situation. There are countless conditions for which there are no FDA approved treatments, but nevertheless there is research that shows evidence of efficacy for certain off-label uses. Navitus pays for off-label use of medications all the time. I am aware of some very rare conditions that have absolutely no FDA authorized treatments and some of these off-label uses are literally lifesaving. I know someone who has a rare demyelinating disease that has no FDA approved treatment. He is treated with a drug that is FDA approved for Lymphoma. It has greatly slowed the progression of his disease. I am aware of a young child who has a rare kidney disorder. He takes three off label medications that are not FDA approved for his condition. They are medically necessary. His condition is so rare that there will likely never be an FDA approved treatment. There is very little funding for rare disorders. I could go on and on describing treatments that are used off-label that Navitus routinely covers that are either life-saving, life-prolonging, or they just contribute to improving a person's quality of life. I am sure some of you have, at one point, like most Americans, used a medication that was not FDA approved for the condition you are taking it for, and likely, your physician thought it was appropriate and beneficial, and your insurance paid for it. These treatments are not prescribed lightly by physicians. They do so after anecdotal studies and research generates satisfactory evidence that the off-label treatments are both safe and effective for that condition.

I hope you at least look into the system that neither approves nor denies Mounjaro, based on the fact that it is not yet approved for the treatment of Obesity, but is being used off-label, quite successfully, to help obese people lose weight and become healthier. If they are not going to approve the treatment of obesity with medication for the coming year, at least please see if there is any way you can convince Navitus to at the very least deny the claim for Mounjaro, so that people can use the manufacturer's coupon to help defray the cost of the medication.

And please consider allowing the treatment of obesity by the use of medications in the near future. I guarantee you, that people will be healthier; have fewer gastric bypasses, fewer heart attacks, strokes, knee replacements, and diabetes.

Thank you again for your time. I look forward to hearing from you.

Sincerely,

Kit Weintraub

Sent from [Mail](#) for Windows

From: [Kit Weintraub](#)

Sent: Monday, October 31, 2022 3:40 PM

To: boardfeedback@etf.wi.gov; Liz.Doss-Anderson@etf.wi.gov

Subject: Re: Navitus Issues With Approval/Denial Of Mounjaro; Coverage Of Weight Loss Medications As An Employee Benefit

Dear Department of Employee Trust Funds Group Insurance Board:

I am the spouse of a State of Wisconsin employee, and I am covered under his health insurance and pharmacy benefit plan.

Recently, I became aware of a new medication, Mounjaro (Tirzepatide), a weekly injectable medication, which was approved by the FDA for the treatment of type 2 diabetes this past June. In reading about it in several news articles and medical journals, I found that it causes significant weight loss; comparable to weight loss achieved through weight loss surgery, with few significant side effects. Mounjaro is also currently in phase three clinical trials for weight loss treatment, since it has been found to be so remarkably effective at causing weight loss during the diabetic clinical trials. It is similar to Wegovy, in that it is a GLP-1 receptor agonist, but also is a GIP agonist. In essence, it has much more of an effect on weight loss, due to two powerful medications that influence weight loss in multiple ways. It is literally a game-changer; causing up to an average of 22% of bodily weight loss on average, in obese individuals. It is also less expensive than Wegovy.

I have struggled with my weight for most of my adult life. I have been on multiple diets and exercise/lifestyle change regimes. My relatives have all been overweight; it's likely at least in part genetic for us. It's very hard for people who are chronically overweight to be successful at losing and maintaining weight, when your body is fighting back with hunger signals and cravings. This is a reality for most obese people, and consequently, most weight loss attempts for the chronically obese end in failure.

Obesity is a chronic illness, just like hypertension, diabetes, heart disease and many others. This medication causes an increase in Leptin, which causes people to feel full more readily, and it drastically cuts down on cravings. It causes the stomach to empty more slowly, so people on this medication feel full and satisfied for longer. People who take Mounjaro experience a rapid reduction in HA1C, lowered blood pressure and cholesterol, reduced joint pain, and they are able to exercise more easily, and eat more sensibly, since cravings for high calorie foods are diminished. It is a real game changer.

I have been taking Mounjaro for the past few months, and have lost around 35 lbs so far. I spoke with my doctor about going off of my blood pressure and cholesterol medication, which I will likely do in the next few weeks, and I am exercising daily, something I haven't been able to do in years. My son is also obese, and has recently started using Mounjaro. He has lost about 20 lbs, and is feeling great. My husband is taking Mounjaro for diabetes, and his A1C has come down significantly, along with his weight.

Eli Lilly has offered a savings card, which allows people with commercial insurance to pay only \$25.00 for a month's supply, whether they are approved by insurance or not. This savings card is

expected to expire next year, but many are taking advantage of it currently and losing unprecedented amounts of weight. Though Mounjaro has been approved for TT2 Diabetes, the FDA has fast-tracked Lilly's application for FDA approval for weight loss treatment, and it is anticipated to be approved by the FDA in the Spring of 2023. They may offer another savings card for obesity when Mounjaro is approved for it.

The manufacturer savings card requires that a pharmacist run the primary insurance first, receive an approval or denial, and then the savings card is run as secondary insurance, so that the maximum cost to the customer is \$25.00. There are many people country-wide on internet support groups who use the coupon to afford Mounjaro, which has a list price of around \$1,167.00 a month. I have run into an issue and found that many other people who I have talked to have the same issue; Navitus for some reason is not issuing denials or approvals; they are issuing the error code: Wrong Diagnosis, since technically it's currently being used off-label to treat obesity, and our Navitus plan currently excludes Obesity treatment. All other insurance companies are just denying or approving the coverage. From the number of people on this support group I have spoken to, and there are many, only Navitus seems to be blocking the use of the coupon whether it's inadvertent or purposely. I can't imagine that it would be intentional, but it is confusing. I have spoken to them several times and no one seems to know why they are blocking the use of the coupon by refusing to deny the claim. I have not heard of another insurance company or pharmacy benefits administrator that is blocking the use of the coupon by refusing to issue a denial. If a denial could be issued instead of an error code, at least people could use the coupon to cover the cost of their Mounjaro. This is a nation-wide issue with Navitus, and many of us across the country have gotten nowhere talking to them, so I am reaching out to make you aware that very many State of Wisconsin/ETF employees are being blocked from using the savings card due to the policies of Navitus.

Secondly, I am asking you to consider coverage for obesity medications, since this new class of medications is far more effective, and I believe, cost-effective. Considering all of the comorbidities, medications, surgeries and hospitalizations that accompany obesity, I believe that the costs, when one considers the effectiveness of Mounjaro are justified. Obesity is responsible for heart attacks, strokes, cancer, diabetes, amputations, kidney failure, Alzheimer's, knee replacements, hip replacements; back surgeries, mobility issues, medications for blood pressure, diabetes, high cholesterol, and I could go on and on. Not to mention the fact that I know many people who were on the verge of weight loss surgery and chose instead to try Mounjaro and then lost so much weight, they no longer needed the surgery. Perhaps you could put parameters in place such as you have for weight loss surgery; such as BMI, comorbidities, failed attempts at weight loss, etc.

This just may be the wave of the future and it may actually bring down your costs and make your employees healthier and happier. Currently there are many employees I have spoken with that are crushed that Navitus is blocking the use of the coupon, and that they are unable to have their chronic condition, obesity, covered by our insurance plan. Obesity is a chronic relapsing disease, like so many others. If people can be treated with a medication that is both safe and effective, it will surely bring about better overall health and lower costs.

Obesity as a chronic disease has been discriminated against for so long, as a choice, a vanity issue, a lifestyle issue or just laziness, lack of discipline or willpower. Evidence suggests that obesity is such a

complex disease, caused by so many factors, and until now, we have failed to find an effective treatment. People with obesity are finally able to see a glimmer of hope with the development of these new game-changing treatments.

Please consider covering Mounjaro, for the health and the happiness of your employees.

Thank you so much for your time and attention to this matter,

Very Truly Yours,

Kit Weintraub

Navitus Member ID # [REDACTED]

[REDACTED]

Sent from [Mail](#) for Windows