## **EXHIBIT C3a**

## **Medical Benefit Drugs**

**Recommendations presented February 2024** 

Brand	Diagnosis	AWP	Recommendation	HA Coverage Policy*
Balfaxar	Urgent reversal of anticoagulation (ex. Warfarin overdose)	\$3.78 per unit	Cover	Covered through DRG in Emergency Department or Inpatient Setting
Beyfortus	Prevention of RSV in <8 months of age	\$445 per 100mg dose	Cover	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2023046
Elevidys	Muscular Dystrophy with DMD gene	\$3.2 million for single dose gene therapy	Exclude	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2023039
Elfabrio	Fabry disease	\$48,379 per year	Cover	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2023013
Epkinly	B cell lymphoma	\$500,000 for 10 cycles	Cover	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2023034
Gohibic (EUA)	Covid-19 in mechanically ventilation or ECMO		Cover	Covered through DRG in Emergency Department or Inpatient Setting
Omisirge	Hematologic malignancies who are planned for umbilical cord		Exclude	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2023026
Polivy	Diffuse Large B-cell Lymphoma	\$119,000 per 6 cycles	Cover with PA	Medical Benefit PA through EBRx
Prevduo	NMBA reversal		Cover	Covered through DRG in Emergency Department or Inpatient Setting
Veopoz inj	Chaple disease	\$660,000 - \$4.3 milion per year based on weight based dosing	Cover	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2024002
Vyvgart Hytrulo	Generalized myasthenia gravis who are AChR Ab+	\$75,000 per 28 days	Cover	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2022001
Zynyz	Metastatic or recurrent Merkel cell carcinoma	\$17,088 per 28 days	Cover	https://secure.healthadvantage- hmo.com/members/report.aspx?policyNumber=2023033

DRG = diagnosis-related group. Categories with similar clinical diagnoses in order to better control hospital costs and determine payor reimbursement rates

Statement from Health Advantage: Our goal is to review new drugs to determine coverage policy and publish to the HA website (<a href="https://www.healthadvantage-hmo.com/members/employer-coverage/arkansas-state-public-school">https://www.healthadvantage-hmo.com/members/employer-coverage/arkansas-state-public-school</a>) within 6 months of the product entering the market. Health Advantage reviews are done post service, but the coverage policy criteria is available at <a href="https://secure.healthadvantage-hmo.com/members/coverage policy disclaimer.aspx">https://secure.healthadvantage-hmo.com/members/coverage policy disclaimer.aspx</a> for the provider to review before administering the medication. If a medication does not have a coverage policy, medications over a certain dollar amount will pend for manual review by a Medical Director. In addition, providers may request a Formal Benefit Inquiry to determine coverage prior to administration.