

Duavee (conjugated estrogens/bazedoxifene)

Override(s)	Approval Duration
Prior Authorization Quantity Limit	1 year

Medications	Quantity Limit
Duavee (conjugated estrogens/bazedoxifene) 0.45mg/20mg tablets	May be subject to quantity limit

APPROVAL CRITERIA

Requests for Duavee (conjugated estrogens/bazedoxifene) may be approved if the following criteria are met:

- I. Individual is age 18 through age 75; **AND**
- II. Individual has an intact uterus; **AND**
- III. Individual is using for one of the following conditions:
 - A. Treatment of moderate to severe vasomotor symptoms associated with menopause;

OR

 - B. Prevention of postmenopausal osteoporosis; **AND**
 - C. If individual is using solely for prevention of osteoporosis, individual has had a trial of and inadequate response or intolerance or has a contraindication to non-estrogen agents for osteoporosis.

Duavee (conjugated estrogens/bazedoxifene) may not be approved for the following:

- I. If individual had a hysterectomy; **OR**
- II. Individual has undiagnosed abnormal uterine bleeding; **OR**
- III. Individual has known, suspected, or past history of breast cancer; **OR**
- IV. Individual has known or suspected estrogen-dependent neoplasia; **OR**
- V. Individual has active or past history of venous thromboembolism; **OR**
- VI. Individual has active or past history of arterial thromboembolism; **OR**
- VII. Individual has known hepatic impairment or disease; **OR**
- VIII. Individual has known protein C, protein S, or antithrombin deficiency or other known thrombophilic disorders.

Key References:

1. AHFS Drug Information Essentials. Bethesda, MD :American Society of Health-System Pharmacists, 2025.
2. DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Updated periodically.
3. DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
4. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc. Updated periodically.
5. ACOG Practice Bulletin No. 141: management of menopausal symptoms. *Obstet Gynecol*. 2014 Jan; 123(1):202-16
6. Cobin RH, Goodman NF, AACE Reproductive Endocrinology Scientific Committee. American Association of Clinical Endocrinologists and American College of Endocrinology Position Statement on Menopause-2017 update. *Endocr Pract*. 2017 Jul; 23(7): 869-880.
7. Coleman E, Radix A, Bouman G, et al. World Professional for Transgender Health (WPATH). Standards of Care for the Health of Transgender and GenderDiverse People, Version 8. *Int J Transgen*. 2022; 23:sup1, S1-S259. Available at: <https://www.tandfonline.com/doi/full/10.1080/26895269.2022.2100644>
8. Goodman NF, Cobin RH, Ginzburg SB, Katz IA, Woode DE. American Association of Clinical Endocrinologists Medical Guidelines for Clinical Practice for the Diagnosis and Treatment of Menopause. *Endocr Pract*. 2011;17(Suppl 6).
9. Hembree WC. Endocrine treatment of transsexual persons: an Endocrine Society clinical practice guideline. *The journal of clinical endocrinology and metabolism*. 2009-09;94:3132-3154.
10. Management of symptomatic vulvovaginal atrophy: 2013 position statement of The North American Menopause Society. *Menopause*. 2013 Sep;20(9):888-902.
11. The 2017 hormone therapy position statement of The North American Menopause Society. *Menopause*. 2017 Jun 22; 24(17): p. 728-753.
12. The 2020 genitourinary syndrome of menopause position statement of The North American Menopause Society. *Menopause*. 2020; Vol 27, No. 9, pp 976-992.
13. The 2023 nonhormone therapy position statement of The North American Menopause Society (NAMS). *Menopause* 30(6):p 573-590, June 2023. | DOI: 10.1097/GME.0000000000002200.
14. Stuenkel CA, Davis SR, Gompel A, Lumsden, et al. Treatment of Symptoms of the Menopause: An Endocrine Society Clinical Practice Guideline. *J Clin Endocrinol Metab*. 2015 Nov; 100(11): 3975-4011.

Federal and state laws or requirements, contract language, and Plan utilization management programs or policies may take precedence over the application of this clinical criteria.

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