



**BlueCross  
BlueShield**

Federal Employee Program.

## TESTOSTERONE ORAL / BUCCAL / NASAL AGENTS

**Methitest (methyltestosterone tablet)**

**methyltestosterone capsule**

**Natesto (testosterone nasal gel)**

**Striant (testosterone buccal system)**

**Jatenzo, Kyzatrex, Tlando\* (testosterone undecanoate capsule)**

\*Non-covered medications must go through prior authorization and the formulary exception

## Pre - PA Allowance

None

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## Prior-Approval Requirements

**Age** 12 years of age or older

**Gender** Male

Methitest and methyltestosterone capsule **ONLY**

### Diagnosis

Patient must have the following:

Delay in sexual development and/or puberty

a. **NO** dual therapy with another testosterone product

**AND** confirmation that the following will be monitored every 6 months:

1. Assessment of bone age of the hand and wrist (as determined by radiographic evidence)
2. Liver function tests
3. Hematocrit levels

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**Age** 18 years of age or older

**Gender** Female only

Methitest and methyltestosterone capsule **ONLY**

### Diagnosis

Patient must have the following:

1. Inoperable metastatic breast or mammary cancer
2. The patient has received at least one prior therapy



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3. **NO** dual therapy with another testosterone product

**AND** confirmation that the following will be monitored every 6 months:

- a. Hypercalcemia and agreement to discontinue the drug if present
- b. Liver function tests
- c. Hematocrit level

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**Age** 18 years of age or older  
**Gender** Male

**Diagnosis**

Patient must have the following:

Deficiency of testosterone (hypogonadism)

**AND ALL** of the following:

1. Two morning total testosterone levels less than 300 ng/dL on different days
2. Patients over 40 years of age must have baseline PSA less than 4 ng/ml
  - a. Prostatectomy patients excluded from the requirement
3. Absence of current prostate cancer / palpable prostate nodules
4. Hematocrit less than 54%
5. Patients with concurrent diagnosis of benign prostatic hypertrophy (BPH)  
**ONLY:** patient will be monitored for worsening of BPH symptoms
6. Evaluation of cardiovascular risk for myocardial infarction (MI), angina, stroke
7. Absence of untreated sleep apnea
8. **NO** dual therapy with another testosterone product

**AND NONE** of the following (Natesto **ONLY**):

1. Chronic nasal conditions or alterations in nasal anatomy

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## Diagnosis

Patient must have the following:

Gender Dysphoria (GD)

1. Female to male transition
2. **NO** dual therapy with another testosterone product

## Prior - Approval Limits

| Oral Testosterone          | Gender                  | Quantity                     | Days Supply |
|----------------------------|-------------------------|------------------------------|-------------|
| Methitest                  | Male                    | 450 tablets                  | 90          |
|                            | Female                  | 1800 tablets                 | 90          |
| methyltestosterone capsule | Male                    | 450 capsules                 | 90          |
|                            | Female                  | 1800 capsules                | 90          |
| Jatenzo                    | Male<br>(adult only)    | 158 mg = 360 capsules        | 90          |
|                            |                         | 198 mg = 360 capsules        | 90          |
|                            |                         | 237 mg = 180 capsules        | 90          |
|                            | Female<br>(for GD only) | 158 mg = 360 capsules        | 90          |
|                            |                         | 198 mg = 360 capsules        | 90          |
|                            |                         | 237 mg = 180 capsules        | 90          |
| Kyzatrex                   | Male<br>(adult only)    | 360 capsules                 | 90          |
|                            | Female<br>(for GD only) | 360 capsules                 | 90          |
| Natesto nasal gel          | Male<br>(adult only)    | 66 grams (9 bottles)         | 90          |
|                            | Female<br>(for GD only) | 66 grams (9 bottles)         | 90          |
| Striant buccal system      | Male<br>(adult only)    | 180 buccal systems (3 boxes) | 90          |
|                            | Female<br>(for GD only) | 180 buccal systems (3 boxes) | 90          |

| Oral Testosterone with | Gender | Quantity | Days |
|------------------------|--------|----------|------|
|------------------------|--------|----------|------|



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| <b>approved FE only</b> |                         |              | <b>Supply</b> |
|-------------------------|-------------------------|--------------|---------------|
| Tlando                  | Male<br>(adult only)    | 360 capsules | 90            |
|                         | Female<br>(for GD only) | 360 capsules | 90            |

**Duration**      6 months for all diagnoses except GD  
                     2 years for GD (**age ≥ 19 years**)  
                     Until end of plan year for GD (**age < 19 years**)

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## **Prior – Approval *Renewal* Requirements**

**Age**              12 years of age or older  
**Gender**        Male

Methitest and methyltestosterone capsule **ONLY**

### **Diagnosis**

Patient must have the following:

- Delay in sexual development and/or puberty
- NO** dual therapy with another testosterone product

**AND** confirmation that the following will be monitored every 6 months:

- Assess bone age of the hand and wrist (as determined by radiographic evidence)
- Liver function tests
- Hematocrit levels

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**Age**              18 years of age or older  
**Gender**        Female only



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### **Methitest and methyltestosterone capsule ONLY**

#### **Diagnosis**

Patient must have the following:

1. Inoperable metastatic breast or mammary cancer
2. The patient has received at least one prior therapy
3. **NO** dual therapy with another testosterone product

**AND** confirmation that the following will be monitored every 6 months:

- a. Hypercalcemia and agreement to discontinue the drug if present
- b. Liver function tests
- c. Hematocrit level

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**Age** 18 years of age or older

**Gender** Male

#### **Diagnosis**

Patient must have the following:

Deficiency of testosterone (hypogonadism)

**AND ALL** of the following:

1. Total testosterone levels of 800 ng/dL or less
2. Patients with concurrent diagnosis of benign prostatic hypertrophy (BPH)  
**ONLY:** absence of worsening of BPH symptoms
3. Re-evaluation of cardiovascular risk for MI, angina, stroke
4. **NO** dual therapy with another testosterone product

**AND** confirmation that the following are being monitored every 12 months:

1. Serum testosterone concentrations

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2. Prostate specific antigen (PSA) for patients over 40 years of age
  - a. Prostatectomy patients excluded from the requirement
3. Hematocrit levels

### Diagnosis

Patient must have the following:

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1. Female to male transition
2. **NO** dual therapy with another testosterone product

### Prior Approval *Renewal* Limits

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| <b>Oral Testosterone with<br/>approved FE only</b> | <b>Gender</b>           | <b>Quantity</b> | <b>Days<br/>Supply</b> |
|--|-------------------------|-----------------|------------------------|
| Tlando   | Male<br>(adult only)    | 360 capsules    | 90                     |
|  | Female<br>(for GD only) | 360 capsules    | 90                     |

**Duration**    12 months for all diagnoses except GD  
                      2 years for GD (**age ≥ 19 years**)  
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