

Summary of Utilization Management (UM) Program Changes

September #3 2021

Brand Name	Generic Name	Utilization Update Summary	Type	Effective Date
<i>Stromectol</i>	ivermectin	Criteria requires the diagnosis of: 1) Strongyloidiasis of the intestinal tract OR 2) Onchocerciasis Authorization is not approvable for the treatment or prevention of COVID-19 infection.	New	9/17/2021