

## Sotatercept-csrk (Winrevair™)

Point-of-Sale (POS) edits are safety limitations that are automatically verified through computer programming at the time that a prescription claim is submitted at the pharmacy. These edits can be applied to *any* medication, whether or not it is listed in the Preferred Drug List / Non-Preferred Drug List (PDL/NPDL). The first section of this document is organized to follow the order of the therapeutic classes in the PDL/NPDL and explains the POS edits for those medications.

### POS Abbreviations

|   |  |   |
|---|--|---|
| <b>AL</b> – Age Limit   | <b>DS</b> – Maximum Days’ Supply Allowed                         | <b>PU</b> – Prior Use of Other Medication is Required |
| <b>BH</b> – Behavioral Health Clinical Authorization for Children Younger than 7 Years of Age | <b>DT</b> – Duration of Therapy Limit                            | <b>QL</b> – Quantity Limit                            |
| <b>BY</b> – Diagnosis Codes Bypass Some Requirements  | <b>DX</b> – Diagnosis Code Requirement                           | <b>RX</b> – Specific Prescription Requirement         |
| <b>CL</b> – Additional Clinical Information is Required                                       | <b>ER</b> – Early Refill   | <b>TD</b> – Therapeutic Duplication                   |
| <b>CU</b> – Concurrent Use with Other Medication is Restricted                                | <b>MD</b> – Maximum Dose Limit                                   | <b>YQ</b> – Yearly Quantity Limit                     |
| <b>DD</b> – Drug-Drug Interaction   | <b>MME</b> – Maximum Morphine Milligram Equivalent is Restricted |   |

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| POS Edits  |
|--|
| <b>DX</b> – Pharmacy claims for this agent must be submitted with an appropriate diagnosis code found at <a href="#">THIS LINK</a> . |
| <b>QL</b> – This agent has a quantity limit of 1 kit per 21 days.  |

| Revision / Date                 | Implementation Date |
|---------------------------------|---------------------|
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