Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

Estradiol acetate vaginal ring (Femring)

Notes:

• Quantity Limits: No

<u>Initiation (new start) criteria</u>: Non-formulary estradiol acetate vaginal ring (Femring) will be covered on the prescription drug benefit for <u>12 months</u> when the following criteria are met:

- Patient has vasomotor symptoms of menopause severe enough to interfere with daily activities and/or sleep
- Patient has failed an adequate trial of the following unless an allergy, intolerance or regimen adherence issues.
 - Two estradiol transdermal patch products, such as a weekly patch (Climara and generics) and a biweekly patch (Vivelle Dot and generics) -AND-
 - Topical estradiol gel (Divigel and generics)
- If patient has an intact uterus then prescribed a progestogen, such as micronized progesterone (Prometrium and generics) or medroxyprogesterone acetate (Provera and generics), as a separate entity

<u>Criteria for current and new Kaiser Permanente members already taking the</u>
<u>medication who have not been reviewed previously</u>: Non-formulary estradiol acetate
<u>vaginal ring (Femring)</u> will be covered on the prescription drug benefit for <u>12 months</u>
when the following criteria are met:

- Vasomotor symptoms are partially or fully resolved
- If patient has an intact uterus then prescribed a progestogen, such as micronized progesterone (Prometrium and generics) or medroxyprogesterone acetate (Provera and generics), as a separate entity

Continued use criteria for patients previously approved per the above criteria who are currently stable on the medication: Non-formulary estradiol acetate vaginal ring (Femring) will continue to be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Vasomotor symptoms are partially or fully resolved
- Starting at 60 years of age: If symptoms have fully resolved, then trial off to determine if symptoms return and drug treatment is still medically necessary. Repeat a trial off every 2 years.
- If patient has an intact uterus then prescribed a progestogen, such as micronized progesterone (Prometrium and generics) or medroxyprogesterone acetate (Provera and generics), as a separate entity

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