



Drug Name: Entresto (sacubitril/valsartan)

Date: 03-2017, 4/18

Revised Date: 5/3/19

Drug Name: Entresto (sacubitril/valsartan)	
Required Medical Information:	<ul style="list-style-type: none">• Member is diagnosed with chronic heart failure (NYHA Class II, III or IV); and• Member has reduced left ventricular ejection fraction (LVEF) less than or equal to 40 %; and• Member has tolerated either an ACE-I or ARB therapy alone
Note(s):	<ul style="list-style-type: none">• Members currently on Entresto with high potassium and/or low eGFS must be monitored closely for potassium and creatinine levels.
Coverage duration:	12 months