Effective date: 4/24/17

Buckeye Health Plan
Medicaid Criteria Updates – Q1 2017

Buckeye Health Plan (BHP) routinely reviews their Prior Authorization (PA) and Medical Necessity (MN) criteria. Decisions on PA and MN criteria content are coordinated with input from pharmacy and medical practitioners, Buckeye Health Plan representatives, and review of current available medical literature and professional standards of practice. Below is the list of changes to the Medicaid criteria this quarter.

For the most current program description you may call Provider Services at 1-866-296-8731 (TTY/TTD 1-800-750-0750) or visit the Buckeye Health Plan website at www.buckeyehealthplan.com.

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Coverage Guideline Policy & Procedure	Status	Revision Summary or Description
CP.PMN.11 Oral Antiemetics (5-HT3 Antagonists)	Revised/Reviewed	Converted to new integrated template; removed all references to Sancuso as it is not an oral antiemetic; references updated.
CP.PMN.12 Clozapine orally disintegrating tablet (Fazaclo®)	Revised/Reviewed	Converted to new integrated template; updated references.
CP.PMN.29 Olanzapine ODT (Zyprexa Zydis)	Revised/Reviewed	Converted to new integrated template. Updated references to include current practice guidelines rather than UpToDate. Removed age restrictions as they are not absolute contraindications per FDA labeling. MDD: Added trial duration of 4 weeks. Removed requirement for trials to be of PDL antidepressants to include any antidepressants.
CP.PMN.33 Pregabalin (Lyrica)	Revised/Reviewed	Converted to new integrated template. Removed age restrictions for neuropathic pain, postherpetic neuralgia, and fibromyalgia as they are not absolute contraindications per FDA labeling; however, the age restriction for partial onset seizures is maintained since FDA labeling specifically indicates this use of Lyrica is for adults (note that Centene policy allows coverage of members ≥ 12 years as supported by literature). For all indications except partial onset seizures, added 30 day trial duration of gabapentin consistent with other required trial durations. Updated verbiage (including requirement for drug trials to be at maximum indicated doses) and references. -Neuropathic pain not associated with diabetic neuropathy: Combined general neuropathic pain with neuropathic pain related to spinal cord injury as approval criteria are the same. -Neuropathic pain associated with diabetic neuropathy: Removed requirement for T/F of concurrent gabapentin and SNRI/TCA as there is limited evidence to support. -Partial onset seizures: Modified T/F requirement to include additional PDL anticonvulsants with demonstrated efficacy in partial seizures per guidelines. Trial duration and maximum indicated dosing is not required as anticonvulsant dosing is individualized based on patient response and patient concomitant therapy. -Fibromyalgia: Added 30 day trial duration of cyclobenzaprine, fluoxetine, or TCA consistent with other required trial durations.
CP.PMN.44 Pyrimethamine (Daraprim)	Revised/Reviewed	Converted to new integrated template. Updated verbiage and references. -Initial therapy for active disease: Modified TMP/SMX trial duration to be at least 10 days (vs range of 10-14 days) for failure (i.e., lack of clinical improvement) and within 7 days for radiological

		deterioration. Modified approval duration to up to 8 weeks for all members (vs 6 weeks for immunocompromised and 4 weeks for immunocompetent) per FDA labeling as well as literature review that indicates treatment duration may take longer than 6 and 4 weeks for these populations. -Primary prophylaxis: For initial criteria, modified to allow coverage for members who have experienced clinically significant adverse effects (vs only contraindications) to TMP/SMX. For continued criteria, added requirement of adherence to ART. -Chronic maintenance: Removed criteria requiring patient to be < 18 years or have documented failure/contraindication to TMP/SMX as this is already assessed in the initial criteria, and the continued criteria requires member to be currently receiving Daraprim through Centene benefit.
CP.PMN.47 Rifaximin (Xifaxan)	Revised/Reviewed	Converted to new template. Modified generalized FDA maximum recommended dosing statement to specific max dosing criteria; Updated references to reflect current practice guidelines. -Hepatic encephalopathy: Modified continued criteria to require concurrent use of Xifaxan and lactulose (vs requiring use of lactulose in the last 90 days) per AASLD guidelines. -Travelers' diarrhea: Corrected fluoroquinolone trial/failure option to ciprofloxacin 500 mg twice daily x 1-3 days or levofloxacin 500 mg once daily x 1-3 days (vs ciprofloxacin or levofloxacin 500 mg twice daily x 1-3 days). Added additional fluoroquinolone trial/failure option of ofloxacin 200 mg twice daily x 1-3 days per IDSA guidelines. Removed trial/failure option of azithromycin 500 mg x 3 days as the single 1000 mg dose is recommended per IDSA guidelines. Modified trial/failure criteria to require one fluoroquinolone AND azithromycin.
CP.PMN.53 Off-Label Use	Revised/Reviewed	Converted to new integrated template. Removed requirement for requested use to show "clear and significant clinical advantage (i.e. improved health outcomes, reduced adverse health event or reduced adverse drug event) over current standard of care treatment, including approved drug regimen(s)" and replaced with requirement for evidence to demonstrate clinically meaningful outcomes and requirement for trial/failure of a standard of care drug or PDL drug.
CP.PMN.64 Quetiapine ER (Seroquel XR)	Revised/Reviewed	Converted to new integrated template. Updated references to include current practice guidelines rather than UpToDate. Removed age restrictions as they are not absolute contraindications per FDA labeling. Modified generalized FDA approved limit to specific dosing requirement; MDD: Added trial duration of 4 weeks. Modified requirement for trials to be of PDL antidepressants to include any antidepressants. Removed instruction on aripiprazole use and approval since member will qualify for aripiprazole so long as all other MDD criteria are met.

CP.PMN.67 Sacubitril-Valsartan (Entresto)	Revised/Reviewed	Converted to new integrated template. Removed age requirement since not referenced in indications section in PI. Modified specific max quantity limit to FDA max recommended dose and health plan approved QL statement. Increased initial approval duration to 12 months. Removed "For renewal request below the target dose of sacubitril/valsartan 97/103mg twice daily, provider must provide a clinical rationale for continued treatment at a sub-therapeutic dose" as dose is dependent on patient tolerability per PI and provider's clinical judgment. Updated continuation criteria to include continuity of care. Updated references to reflect current literature search.
CP.PMN.68 Brexpiprazole (Rexulti)	Revised/Reviewed	Converted to new integrated template. Removed age requirement since not referenced in FDA indications section per PI; MDD: modified requirement for antidepressant trials to include duration of trial (≥ 4 weeks); Schizophrenia: modified requirement related to failure of 3 of the following atypical antipsychotic trials (risperidone, quetiapine, olanzapine, or ziprasidone) by increasing duration of trial from ≥ 2 weeks to ≥ 4 weeks and adding criteria regarding patients with diabetes or BMI > 30; also increased the duration of trial of aripiprazole to ≥ 4 weeks; Modified specific max quantity limit to FDA max recommended dose and health plan approved QL statement. Removed "New patients stable on Rexulti" under initial approval and incorporated continuity of care in continuation criteria; Updated references to reflect current literature search.
CP.PMN.70 Ivabradine (Corlanor)	Revised/Reviewed	Converted to new integrated template. Removed age requirement since not referenced in indications section per PI; Added prescriber specialty; Modified requirement related to failure of 2 PDL beta-blockers to include a) only beta-blockers which have been shown to be effective in reducing mortality (bisoprolol, carvedilol, and metoprolol succinate) in patients with chronic heart failure per 2013 ACCF/AHA guideline for the management of heart failure and b) duration of trial; Modified specific max quantity limit to FDA max recommended dose and health plan approved QL statement. Updated continuation criteria to include continuity of care.Updated references to reflect current literature search.
CP.PMN.71 Linaclotide (Linzess)	Revised/Reviewed	Converted to new integrated template. Added FDA max recommended dose and health plan approved QL requirement; -IBS-C: removed requirement related to failure of adherent use of polyethylene glycol (PEG) per recommendations from American College of Gastroenterology that there is no evidence that PEG formulations alleviate pain or provide overall symptom relief in IBS.

		-CIC: Added language of "unless contraindicated to such therapies" to requirement related to aforementioned medication trials must have occurred within the past 90 days; Updated references to reflect current literature search
CP.PMN.72 Metformin ER (Glumetza)	Revised/Reviewed	Converted to new integrated template. Added requirement for PDL immediate release metformin. Added FDA max recommended dose and health plan approved QL statement. Updated continuation criteria. Updated references to reflect current literature search.
CP.PMN.73 Lifitegrast (Xiidra)	New	Policy created.
CP.PMN.74 Sancuso	New	Policy created. Sancuso was removed from CP.PMN.11 Oral Antiemetics policy because sancuso is not an oral product. All references to radiation therapy were removed as Sancuso is not approved for use in radiation therapy.
CP.PMN.75 Tazorac	New	Policy created.
CP.PPA.17 Aripiprazole (Abilify) for oral use	Revised/Reviewed	Converted to new integrated template; Modified general max dosing statement to specific FDA max dose for the relevant indication; Schizophrenia: removed diagnosis of schizoaffective disorder as this is not an FDA approved indication for Abilify; removed age requirement (≥ 13 years of age) since PDL allows oral aripiprazole for members 6 years and older; Bipolar disorder: removed age requirement (≥10 years of age) since PDL allows oral aripiprazole for members 6 years and older; MDD: removed age requirement (≥18 years of age) since PDL allows oral aripiprazole for members 6 years and older; removed requirement related to failure of concurrent use of at least one antidepressant with either quetiapine or olanzapine for 3 months since quetiapine immediate release is not FDA approved for adjunctive treatment of MDD and olanzapine is only approved for use in combination with fluoxetine for depression; removed criteria regarding diabetes mellitus or BMI > 30; Autistic disorder: modified criteria related to failure of risperidone to include duration of trial and maximum indicated doses; Updated continuation criteria to include new patients stable on therapy and continuity of care; Updated references to reflect current literature search.
CP.PPA.20 Methadone (Dolophine)	New	Policy created.
CP.PST.05 Exemestane (Aromasin)	Revised/Reviewed	Converted to integrated template; updated references.

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CP.PST.08 Mesalamine Oral Therapy	Revised/Reviewed	Converted to integrated template; Updated references; Added rectal mesalamine as an option for a 3 month trial instead of only oral mesalamine per literature search.
CP.PST.16 Sedative Hypnotics	Revised/Reviewed	Converted to integrated template; removed approval duration for Somnote, it is no longer available; Updated references.
CP.PMN.03 Dipeptidyl peptidase-4 (DPP-4) inhibitors	Revised/Reviewed	Converted to new integrated template. Updated policy to reflect current PDL. Removed Juvisync as it has been discontinued by the manufacturer. Removed age criteria as that is not an absolute contraindication per the PIs. Reduced A1c requirement from ≥ 7% to ≥ 6.5% per ADA guidelines. Modified trial/failure requirement to require: metformin at doses ≥ 2000 mg/day, 2 PDL DPP-4 inhibitors, and concurrent use of each DPP-4 inhibitor with metformin. Updated references.
CP.PMN.08 Lidocaine transdermal (Lidoderm)	Revised/Reviewed	Converted to new integrated template; Modified generalized FDA approved maximum recommended dose and health plan approved QL statement to 3 patches per day; Diabetic neuropathy: added a requirement related to failure of ≥ 30 day trial of gabapentin at doses ≥ 1800mg/day, unless contraindicated or intolerant to gabapentin; Modified TCA or SNRI requirement by adding "at maximum indicated doses" and removing the statement "within the last 6 months"; Updated references to reflect current literature search.
CP.PMN.14 Sodium-glucose co-transporter 2 (SGLT2) inhibitors	Revised/Reviewed	Converted to new integrated template. Updated policy to reflect current PDL. Updated references. -Initial: Removed age criteria as that is not an absolute contraindication per the PIs. Added requirement for HbA1c ≥ 6.5%. Added option for trial/failure of a thiazolidinedione used concurrently with metformin. Clarified sulfonylurea and DPP-4 inhibitor trial requirements to indicate that they each must be used at maximum indicated doses concurrently with metformin. -Continued: Added requirement that member must either 1) request a dose increase, 2) have demonstrated a positive response to therapy as indicated by HbA1c < 8.5% and reduction or maintenance in reduction from baseline HbA1c, or 3) will be managed with a 3-drug regimen per ADA guidelines for HbA1c ≥ 8.5% or an insulin containing regimen.
CP.PMN.16 Request for Medically Necessary Drug not on the PDL	Revised/Reviewed	Converted to new integrated template; Criterion 2: modified to include only members new to the health plan, updated list of disease states eligible for COC, and added office notes as an acceptable form of documentation that member has been on medication for at least 1 month.
CP.PMN.17 Droxidopa (Northera)	Revised/Reviewed	Converted to integrated template; Removed requirement of a medication being prescribed by or in consultation with a specialist; Added required conditions of autonomic failure, dopamine beta-hydroxylase deficiency, and non-diabetic autonomic neuropathy; Added maximum dose of 1800mg/day.

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CP.PMN.27 Linezolid (Zyvox)	Revised/Reviewed	Converted to new integrated template; Expanded isolated pathogen requirement to include susceptible gram positive bacteria per PI; Removed specific number of PDL antibiotics (i.e., 2 PDL antibiotics) required for trial and failure and modified requirement to "treatment failure with PDL antibiotics to which the isolated pathogen is susceptible, unless contraindicated, intolerant, or agents are not indicated for member's diagnosis"; Modified requirement related to quantity limit of 2 tablets/day to the max dose since the policy applies to tablets as well as the oral suspension; Updated references.
CP.PMN52 Omega-3-acid ethyl esters (Lovaza)	Revised/Reviewed	Initial approval period was changed from labs within 30 days to require labs within 90 days.
CP.PMN.59 Quantity Limit Overrides	Revised/Reviewed	Converted to new integrated template; Changed continuity of care and pain management reference for additional information to CP.PMN.13 dose-optimization policy instead of CP.PMN.53 off-label policy; Removed hyperlipidemia/hypercholesterolemia, hypertension, depression, Parkinson's/dementia, glaucoma, hepatitis, and attention-deficit hyperactivity disorder (ADHD) from the list of continuity of care disease states.
CP.PMN.76 calcifediol (Rayaldee)	New	Policy Created.
CP.PPA.21 Glucagon-like peptide-1 receptor agonists for type -2 diabetes	New	Replaces policy CP.PST.14.
CP.PST.06 Isotretinoin (Claravis, Absorica, Myorisan, Zenatane)	Revised/Reviewed	Converted to new integrated template. Removed criteria that member must be male or a female with negative pregnancy test dated within the past 14 days; Removed requirement for does not to exceed FDA maximum; Updated references.

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