

# SmartPA Criteria Proposal

<b>Drug/Drug Class:</b>	Beta Adrenergic Blockers and Beta Adrenergic Blockers/Diuretic Combinations PDL Edit
<b>First Implementation Date:</b>	July 19, 2004
<b>Proposed Date:</b>	September 15, 2022
<b>Prepared for:</b>	MO HealthNet
<b>Prepared by:</b>	MO HealthNet/Conduent
<b>Criteria Status:</b>	<input checked="" type="checkbox"/> Existing Criteria <input type="checkbox"/> Revision of Existing Criteria <input type="checkbox"/> New Criteria

## Executive Summary

**Purpose:** The MO HealthNet Pharmacy Program will implement a state-specific preferred drug list.

**Why Issue Selected:** Beta-adrenergic blockers inhibit the chronotropic, inotropic and vasodilator responses to adrenaline by blocking  $\beta_1$  and  $\beta_2$  receptor sites throughout the body. Several characteristics of beta-blockers may be related to their clinical effectiveness. Beta blockers can be classified by cardioselectivity and intrinsic sympathomimetic activity (ISA). Cardioselective beta-blockers preferentially inhibit only  $\beta_1$  receptors that are principally found in the myocardium while non-cardioselective beta blockers inhibit both  $\beta_1$  and  $\beta_2$  receptor sites. As a result of the being 20 times more potent at blocking  $\beta_1$  vs  $\beta_2$  receptors, the cardioselective agents are less likely to result in bronchoconstriction. Products with ISA are weak agonists of one or more  $\beta$ -adrenoceptor subtypes and were developed to reduce side effects and improve product tolerability.

Total program savings for the PDL classes will be regularly reviewed.

**Program-specific information:**

Preferred Agents	Non-Preferred Agents
<ul style="list-style-type: none"> <li>• Acebutolol</li> <li>• Atenolol</li> <li>• Atenolol/Chlorthalidone</li> <li>• Bisoprolol</li> <li>• Bisoprolol/HCTZ</li> <li>• Carvedilol</li> <li>• Hemangeol<sup>®</sup></li> <li>• Labetalol</li> <li>• Metoprolol Succinate</li> <li>• Metoprolol Tartrate</li> <li>• Metoprolol/HCTZ</li> <li>• Nadolol</li> <li>• Propranolol Soln/Tabs</li> <li>• Propranolol/HCTZ</li> <li>• Sorine<sup>®</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Betapace<sup>®</sup></li> <li>• Betapace AF<sup>®</sup></li> <li>• Betaxolol</li> <li>• Bystolic<sup>®</sup></li> <li>• Carvedilol ER</li> <li>• Coreg<sup>®</sup></li> <li>• Coreg CR<sup>®</sup></li> <li>• Corgard<sup>®</sup></li> <li>• Inderal LA<sup>®</sup></li> <li>• Inderal XL<sup>®</sup></li> <li>• InnoPran XL<sup>®</sup></li> <li>• Kaspargo<sup>®</sup> Sprinkle Caps</li> <li>• Lopressor<sup>®</sup></li> <li>• Lopressor HCT<sup>®</sup></li> <li>• Nadolol/Bendroflumethiazide</li> </ul>



Rule Type: PDL

## Default Approval Period

1 year

## References

- Evidence-Based Medicine Analysis: “Beta Adrenergic Blockers and Diuretic Combinations”, UMKC-DIC; July 2022.
- Evidence-Based Medicine and Fiscal Analysis: “Beta Adrenergic Blockers and Diuretic Combination Agents – Therapeutic Class Review”, Conduent Business Services, L.L.C., Richmond, VA; July 2021.
- USPDI, Micromedex; 2022.
- Facts and Comparisons eAnswers (online); 2022 Clinical Drug Information, LLC.

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