SmartPA Criteria Proposal

Drug/Drug Class:	Angiotensin Receptor Blockers and Angiotensin Receptor Blocker/Diuretic Combinations PDL Edit
First Implementation Date:	February 2, 2005
Proposed Date:	October 17, 2023
Prepared For:	MO HealthNet
Prepared By:	MO HealthNet/Conduent
Criteria Status:	☐ Existing Criteria ☒ Revision of Existing Criteria ☐ New Criteria

Executive Summary

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

Why Issue Selected: Angiotensin II receptor antagonists (ARBs) selectively inhibit angiotensin II from activating the angiotensin II type 1 receptor (AT1). This action blocks vasoconstriction, sodium and water retention, activation of the sympathetic nervous system, constriction of arterioles in the kidney, and stimulation of vascular and myocardial fibrosis. The mechanism of action for the ARBs differs from that of angiotensin converting enzyme inhibitors (ACEIs) in that the ACEIs block the conversion of angiotensin I to angiotensin II, while the ARBs exhibit selective inhibition. Like ACEIs, ARBs are useful in the management of patients with hypertension, high cardiovascular risk, heart failure, myocardial infarction, diabetes mellitus, and renal disease. ARBs have been shown to be efficacious when used alone or in combination with diuretics.

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

Program-Specific Information:

Preferred Agents	Non-Preferred Agents
• Irbesartan • Irbesartan/HCTZ • Losartan • Losartan/HCTZ • Telmisartan • Telmisartan/HCTZ • Valsartan tablets • Valsartan/HCTZ	• Atacand® • Atacand HCT® • Avalide® • Avapro® • Benicar® • Benicar HCT® • Candesartan • Candesartan/HCTZ • Cozaar® • Diovan® • Diovan HCT® • Edarbi® • Edarbyclor® • Eprosartan • Hyzaar® • Micardis®

	• Micardis® HCT • Olmesartan • Olmesartan/HCTZ • **Valsartan solution**

Type of Criteria: ☐ **Increased risk of ADE** ☒ **Preferred Drug List**
☐ **Appropriate Indications** ☐ **Clinical Edit**

Data Sources: ☒ **Only Administrative Databases** ☐ **Databases + Prescriber-Supplied**

Setting & Population

- Drug class for review: Angiotensin Receptor Blockers and Angiotensin Receptor Blocker/Diuretic Combinations
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 4 or more preferred agents:
  - Documented trial period for preferred agents **OR**
  - Documented ADE/ADR to preferred agents
- **For valsartan solution:**
  - **Participant must be < 10 years of age AND**
  - **Reason of medical necessity as to why a liquid ACE inhibitor cannot be utilized**

Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if all approval criteria are not met
- Claim exceeds maximum dosing limitation for the following:

Drug Description	Generic Equivalent	Max Dosing Limitation
ATACAND 4 MG	CANDESARTAN	1 tablet per day
ATACAND 8 MG	CANDESARTAN	2 tablets per day
ATACAND 16 MG	CANDESARTAN	1 tablet per day
ATACAND 32 MG	CANDESARTAN	1 tablet per day
ATACAND HCT 32 MG/25 MG	CANDESARTAN/HCTZ	1 tablet per day
ATACAND HCT 16 MG/12.5 MG	CANDESARTAN/HCTZ	1 tablet per day
ATACAND HCT 32 MG/12.5 MG	CANDESARTAN/HCTZ	1 tablet per day
AVAPRO 150 MG	IRBESARTAN	1 tablet per day
AVAPRO 300 MG	IRBESARTAN	1 tablet per day
AVAPRO 75 MG	IRBESARTAN	1 tablet per day
AVALIDE 150 MG/12.5 MG	IRBESARTAN/HCTZ	1 tablet per day
AVALIDE 300 MG/12.5 MG	IRBESARTAN/HCTZ	1 tablet per day
MICARDIS 20 MG	TELMISARTAN	1 tablet per day
MICARDIS 40 MG	TELMISARTAN	1 tablet per day
MICARDIS 80 MG	TELMISARTAN	1 tablet per day
MICARDIS/HCTZ 40MG/12.5MG	TELMISARTAN/HCTZ	1 tablet per day
MICARDIS/HCTZ 80MG/25MG	TELMISARTAN/HCTZ	1 tablet per day
MICARDIS/HCTZ 80MG/12.5MG	TELMISARTAN/HCTZ	1 tablet per day

Required Documentation

Laboratory Results:	☐	Progress Notes:	☐
MedWatch Form:	☐	Other:	☐

Disposition of Edit

Denial: Exception Code “0160” (Preferred Drug List)
Rule Type: PDL

Default Approval Period

1 year

References

- Evidence-Based Medicine Analysis: “Angiotensin II-Receptor Antagonists (ARBs)/ARBs Plus Diuretics”, UMKC-DIC; April 2023.
- Evidence-Based Medicine and Fiscal Analysis: “Angiotensin Receptor Blocker/Diuretic Combination Agents – Therapeutic Class Review”, Conduent Business Services, L.L.C., Richmond, VA; July 2021.
- USPDI, Micromedex; 2023.
- Facts and Comparisons eAnswers (online); 2023 Clinical Drug Information, LLC.