

SmartPA Criteria Proposal

Drug/Drug Class:	Beta Adrenergic Agents, Short Acting PDL Edit
First Implementation Date:	November 17, 2004
Proposed Date:	October 17, 2023
Prepared For:	MO HealthNet
Prepared By:	MO HealthNet/Conduent
Criteria Status:	<input type="checkbox"/> Existing Criteria <input checked="" 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: Short-acting beta-agonists work quickly to relieve asthma symptoms. They relax the smooth muscles around the airways and are prescribed to use as needed to relieve shortness of breath most commonly associated with asthma. Overuse of these products is common and indicates that asthma is poorly controlled and that long-term control medications should be added or adjusted.

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"> ProAir® HFA* Ventolin® HFA 	<ul style="list-style-type: none"> Albuterol HFA (gen ProAir® HFA) Albuterol HFA (gen Proventil® HFA) Albuterol HFA (gen Ventolin® HFA) Levalbuterol HFA ProAir® Digihaler® ProAir® RespiClick® Proventil® HFA Xopenex HFA®

*manufacturer discontinued 10/2022

Type of Criteria: ☐ Increased risk of ADE
☐ Appropriate Indications

☒ Preferred Drug List
☐ Clinical Edit

Data Sources: ☐ Only Administrative Databases

☒ Databases + Prescriber-Supplied

Setting & Population

- Drug class for review: Beta Adrenergic Agents, Short Acting
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 2 preferred agents
 - Documented trial period of preferred agent **OR**
 - Documented ADE/ADR to preferred agent

Denial Criteria

- Lack of adequate trial on required preferred agent
- Therapy will be denied if all approval criteria are not met
- Cumulative quantity exceeds the following for participants aged ≥ 18 years (excluding diagnosis of cystic fibrosis):
 - 3 inhalers per 180 days **OR**
 - **3 inhalers per 90 days with documentation of all of the following:**
 - **Diagnosis of chronic obstructive pulmonary disease (COPD) AND**
 - **Documentation of concurrent utilization of COPD maintenance inhaler therapy (at least 2 claims for LAMA, LABA, and/or ICS in the past 60 days). ICS therapy alone is not sufficient for COPD maintenance inhaler therapy.**

Required Documentation

Laboratory Results:
MedWatch Form:

☐
☐

Progress Notes:
Other:

☐
☐

Disposition of Edit

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

Default Approval Period

3 months

References

- Evidence-Based Medicine and Fiscal Analysis: "Beta-Adrenergic Agents, Short Acting - Therapeutic Class Review" Conduent Business Services, L.L.C., Richmond, VA; January 2022.
- Evidence-Based Medicine Analysis: "Short-Acting Beta-2 Adrenergic Agonist Agents", UMKC-DIC; Last updated October 2022.
- USPDI, Micromedex; 2023.
- Facts and Comparisons eAnswers (online); 2023 Clinical Drug Information, LLC.