



## SmartPA Criteria Proposal

Drug/Drug Class:	Electrolyte Depleting Agents, Phosphate Lowering PDL Edit		
First Implementation Date:	January 14, 2009		
Proposed Date:	October 17, 2023		
Prepared For:	MO HealthNet		
Prepared By:	MO HealthNet/Conduent		
Criteria Status:	<ul><li>☑ Existing Criteria</li><li>☐ Revision of Existing Criteria</li><li>☐ New Criteria</li></ul>		

## **Executive Summary**

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

Why Issue Selected: Chronic kidney disease occurs in approximately 20 million Americans. One of the complications of this disease is hyperphosphatemia. As the kidney loses function, its ability to eliminate phosphorus declines, which results in hyperphosphatemia. Phosphorus is responsible for growth, maintenance, and repair of body tissues, and along with calcium, prevents bone-related disorders. Phosphorus is commonly found in foods such as milk, red meat, fish, poultry, eggs, and peanuts. Due to continuous dietary intake, unfortunately, dialysis alone does not maintain normal phosphorus levels in the blood for end stage renal disease participants. Phosphate-binding agents decrease phosphorus absorption from the gastrointestinal tract by binding dietary phosphorus. Calcium containing salts not only maintain positive calcium balance but also bind phosphorus. In the event of hypocalcemia, calcium supplementation or vitamin D may be necessary to slow or prevent bone disease. Non-calcium based phosphate binders are now available and are an alternative to calcium when hypercalcemia is present.

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

## Program-Specific Information:

ic	Preferred Agents	Non-Preferred Agents
n:	Calcium Acetate Caps	Auryxia <sup>®</sup>
	<ul> <li>Sevelamer Carbonate Tabs (gen</li> </ul>	Calcium Acetate Tabs
	Renvela®)	Calphron®
		Fosrenoi®
		Lanthanum Carbonate
		Phoslyra®
		Renagel®
		Renvela®
		Sevelamer Hydrochloride (gen
		Renagel®)
		Sevelamer Pwd Pack
		Velphoro®

Type of Criteria:	<ul><li>☐ Increased risk of ADE</li><li>☐ Appropriate Indications</li></ul>	<ul><li>☑ Preferred Drug List</li><li>☐ Clinical Edit</li></ul>		
Data Sources:	☐ Only Administrative Databases	□ Databases + Prescriber-Supplied		
Setting & Population				
<ul> <li>Drug class for review: Electrolyte Depleting Agents, Phosphate Lowering</li> <li>Age range: All appropriate MO HealthNet participants</li> </ul>				
Approval Criteria				
<ul> <li>Failure to achieve desired therapeutic outcomes with trial on 2 or more preferred agents</li> <li>Documented trial period for preferred agents OR</li> <li>Documented ADE/ADR to preferred agents</li> </ul>				
Denial Criteria				
<ul> <li>Lack of adequate trial on required preferred agents</li> <li>Therapy will be denied if all approval criteria are not met</li> </ul>				
Required Documentation				
Laboratory Results: Progress Notes: Other:				
Disposition of Edit				
Denial: Exception Code "0160" (Preferred Drug List) Rule Type: PDL				
Default Approval Period				
1 year				
References				

- Evidence-Based Medicine Analysis: "Electrolyte Depleters, Phosphate Lowering Agents", UMKC-DIC;
- Evidence-Based Medicine and Fiscal Analysis: "Phosphate Lowering Agents Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; June 2021.
- USPDI, Micromedex; 2023.
- Facts and Comparisons eAnswers (online); 2023 Clinical Drug Information, LLC.