

# 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>

<ul style="list-style-type: none"> <li>• Sotalol</li> <li>• Sotalol AF</li> </ul>	<ul style="list-style-type: none"> <li>• Nebivolol</li> <li>• Pindolol</li> <li>• Propranolol LA</li> <li>• Sotylize®</li> <li>• Tenoretic®</li> <li>• Tenormin®</li> <li>• Timolol Maleate</li> <li>• Toprol XL®</li> <li>• Ziac®</li> </ul>
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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/drug class for review: Beta Adrenergic Blockers and Beta Adrenergic Blockers/Diuretic Combinations
- Age range: All appropriate MO HealthNet participants

### Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 3 or more preferred agents
  - Documented trial period for preferred agents **OR**
  - Documented ADE/ADR to preferred agents
- For Bystolic: Adequate therapeutic trial on one vasodilating alpha/beta-adrenergic blocking agent (labetalol or carvedilol)
- For Coreg CR:
  - Documented diagnosis of heart failure **AND**
  - Adequate therapeutic trial on carvedilol twice daily for 30 days
- For Hemangeol:
  - Participants aged 2 years and younger **AND**
  - Documented diagnosis of infantile hemangioma **AND**
  - Maximum treatment length of 6 months; clinical consultant review required to extended treatment
- For Sotylize and Kaspargo Sprinkle: Clinical Consultant Review for participants aged 10 years or older

### Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if all approval criteria are not met

### Required Documentation

Laboratory Results:   
 MedWatch Form:

Progress Notes:   
 Other:

### Disposition of Edit

Denial: Exception Code “0160” (Preferred Drug List Edit)

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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