



SmartPA Criteria Proposal

Drug/Drug Class:	COPD Anticholinergic Agents PDL Edit	
First Implementation Date:	October 26, 2018	
Proposed Date:	March 19, 2020	
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:

Chronic obstructive pulmonary disease (COPD) is a lung disease that encompasses chronic bronchitis and emphysema. COPD is a major cause of death and illness throughout the world and is third leading cause of death in the United States. Cigarette smoking is the most common cause of COPD, however breathing in lung irritants, like pollution, dust or chemicals over a long period of time may also cause or contribute to the disease. There is no cure for COPD, but treatment can alleviate symptoms, decrease the frequency and severity of exacerbations and increase exercise tolerance. The 2020 Global Initiative for Chronic Obstructive Lung Disease (GOLD) guidelines provide evaluation and treatment of patients with moderate to severe COPD (FEV1 < 80% of predicated normal and FEV1/FVC < 70%). Treatment inlcudes short-acting muscarinic antagonists, long-acting beta-agonists, long- acting muscarinic agents, and inhaled corticosteroids which are the mainstays of therapy for COPD.

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

Program-Specific Information:

С	Preferred Agents	Non-Preferred Agents
1:	Atrovent HFA®	Anoro Ellipta®
	 Bevespi Aerosphere[™] 	Daliresp®
	Combivent Respimat®	Duaklir® Pressair®
	Ipratropium Soln	Incruse Ellipta®
	Ipratropium-Albuterol	 Lonhala™ Magnair™
	Spiriva HandiHaler®	Seebri Neohaler®
	Stiolto Respimat®	Spiriva Respimat®
		Trelegy Ellipta®
		Tudorza Pressair®
		Utibron Neohaler®
		 Yupelri[™]

Type of Criteria:	☐ Increased risk of ADE	□ Preferred Drug Lis
	☐ Appropriate Indications	☐ Clinical Edit

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

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Setting & Population

- Drug class for review: COPD Anticholinergic Agents
- · Age range: All appropriate MO HealthNet participants

Approval Criteria

- Documented compliance on current therapy regimen OR
- Failure to achieve desired therapeutic outcomes with trial on 3 or more preferred agents
 - Documented trial period of preferred agents
 - Documented ADE/ADR to preferred agents
- For Trelegy Ellipta:
 - Documented trial with 3 or more preferred agents, including 1 preferred LAMA-LABA
- For Anoro Ellipta:
 - Documented trial with 3 or more preferred agents, including 2 preferred LAMA-LABA

Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if no approval criteria are met
- Claim exceeds maximum dosing limitation for the following (Dose Opt or 716 Criteria):

Drug Description	Generic Equivalent	Max Dosing Limitation
Combivent Respimat	Ipratropium/Albuterol	6 sprays per day

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
1 year

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References

- 1. Evidence-Based Medicine and Fiscal Analysis: "COPD Anticholinergics Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; February 2020.
- 2. Evidence-Based Medicine Analysis: "Chronic Obstructive Pulmonary Disease (COPD) Anticholinergics", UMKC-DIC; January 2020.
- Global initiative for chronic obstructive lung disease. Global strategy for the diagnosis, management, and prevention of chronic obstructive pulmonary disease (GOLD 2020 report). Global Initiative For Chronic Obstructive Lung Disease website. https://goldcopd.org/wpcontent/uploads/2019/11/GOLD-2020-REPORT-ver1.0wms.pdf.

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- 4. Lippincott, Williams, Wilkins. PDR Electronic Library, Montvale NJ; 2020.
- USPDI, Micromedex; 2020.
 Facts and Comparisons eAnswers (online); 2020 Clinical Drug Information, LLC.

