



SmartPA Criteria Proposal

Drug/Drug Class:	Psoriasis Agents, Oral PDL Edit
First Implementation Date:	July 13, 2017
Proposed Date:	July 18, 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:

Psoriasis is a chronic, inflammatory, non-contagious, genetic, immune-mediated, dermatologic condition. The most common type (80-90% of participants) is plaque psoriasis (psoriasis vulgaris) where patches or lesions of skin become inflamed and are covered by a silvery white scale. These plaques frequently occur on the skin of the elbows and knees but can affect any area including the scalp. Psoriasis affects approximately 7.5 million Americans; presentation may occur at any age, but typically occurs between the ages of 15 to 25 years. Psoriasis can range from mild to severe disease and can lead to low self-esteem and depression. During the disease process there is hyperproliferation and abnormal differentiation of the psoriatic epidermis. This disease can also affect the joints and connective tissue, resulting in psoriatic arthritis. Traditionally, pharmacotherapy choices to treat plaque and scalp psoriasis include emollients, topical corticosteroids, vitamin D analogs, calcipotriene/betamethasone, tazarotene, tacrolimus, pimecrolimus, phototherapy, and systemic medications. Options for systemic therapy include methotrexate, cyclosporine, retinoids, biologics, and methoxsalen plus UVA radiation. Biologics are usually reserved for patients with moderate to severe disease or those with psoriatic arthritis.

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

Program-Specific	Preferred Agents	Non-Preferred Agents				
Information:	Acitretin	Methoxsalen				
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: Psoriasis Agents, Oral
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 1 or more preferred agents
 - Documented trial period of preferred agents
 - Documented ADE/ADR to preferred agents

Denial Criteria

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

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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 and Fiscal Analysis: "Psoriasis Agents, Oral Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; January 2022.
- Evidence-Based Medicine Analysis: "Oral Antipsoriatic Agents UMKC-DIC; October 2022.
- USPDI, Micromedex; 2023.
- Clinical Pharmacology [online]. Tampa (FL): Elsevier. 2023.