

# SmartPA Criteria Proposal

<b>Drug/Drug Class:</b>	Corticosteroids, Oral Inhaled PDL Edit
<b>First Implementation Date:</b>	December 1, 2004
<b>Revised Date:</b>	November 2, 2023
<b>Prepared For:</b>	MO HealthNet
<b>Prepared By:</b>	MO HealthNet/Conduent
<b>Criteria Status:</b>	<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:** Inhaled corticosteroids suppress the body's production of substances that trigger inflammation and reduce the production of substances that maintain inflammation. They are used chronically for control of asthma symptoms and are the most effective long-term therapy available for mild, moderate, or severe persistent asthma. This class of medications consistently demonstrate effectiveness for control of asthma by reducing symptom severity, improving peak expiratory flow, diminishing airway hyperresponsiveness and potentially preventing airway wall remodeling. Inhaled corticosteroids have different potencies, but potency does not correlate with clinical efficacy. In general, they are well tolerated and safe at the recommended dosages.

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>Advair Diskus®</li> <li>Arnuity® Ellipta®</li> <li>Asmanex® Twisthaler</li> <li>Budesonide Respules</li> <li>Dulera® 100mcg/5mcg, 200mcg/5mcg</li> <li>Flovent HFA®</li> <li>Symbicort®</li> </ul>	<ul style="list-style-type: none"> <li>Advair HFA®</li> <li>AirDuo® Digihaler®</li> <li>AirDuo® RespiClick®</li> <li>Alvesco®</li> <li>ArmonAir® Digihaler®</li> <li>Asmanex® HFA*</li> <li>Breo® Ellipta®</li> <li>Breyna™</li> <li>Budesonide/Formoterol (gen Symbicort®)</li> <li>Dulera® 50mcg/5mcg*</li> <li>Flovent Diskus®</li> <li>Fluticasone Propionate HFA</li> <li>Fluticasone/Salmeterol (gen Advair Diskus®/HFA®, AirDuo®)</li> <li>Fluticasone/Vilanterol (gen Breo® Ellipta®)</li> <li>Pulmicort® Flexhaler</li> <li>Pulmicort® Respules</li> </ul>

	<ul style="list-style-type: none"> <li>• QVAR® Redihaler®</li> <li>• Wixela Inhub®</li> </ul>
*Available to participants < 12 years of age without any pre-requisite therapy	

- 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 class for review: Corticosteroids Oral, Inhaled
- Age range: All appropriate MO HealthNet participants

## Approval Criteria

- For non-preferred agents:
  - For participants < 12 years of age: claim is for Asmanex HFA or Dulera 50 mcg/5 mcg OR
  - Failure to achieve desired therapeutic outcomes with trial on 3 or more preferred agents
    - Documented trial period of preferred agents OR
    - 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

## Required Documentation

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: "Therapeutic Class Review: RESPIRATORY: Inhaled Corticosteroids (ICS)", Gainwell Technologies; Last updated January 29, 2023.
- Evidence-Based Medicine and Fiscal Analysis: "Therapeutic Class Review: RESPIRATORY: Inhaled Corticosteroid-Long Acting Beta Agonist (ICS/LABA)", Gainwell Technologies; Last updated February 8, 2023.
- Evidence-Based Medicine Analysis: "Inhaled Corticosteroids (ICS)", UMKC-DIC; Last updated January 2023.
- Evidence-Based Medicine Analysis: "Combination Inhaled Corticosteroids, Long-Acting Beta Agonist (ICS-LABA)", UMKC-DIC; Last updated January 2023.

SmartPA PDL Proposal Form  
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