Drug/Drug Class: Electrolyte Depleting Agents, Potassium Lowering PDL Edit  
First Implementation Date: April 4, 2019  
Revised Date: October 14, 2021  
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: Participants with chronic kidney disease and heart failure are at a higher risk for hyperkalemia, especially in participants who take medications that may increase potassium levels already such as any renin-angiotensin-aldosterone system (RAAS) inhibitor. The main causes of hyperkalemia involve increased potassium release from the cells or decreased urinary potassium excretion. Potassium enters the body exogenously through diet, oral intake, or intravenous infusion, stored in the cells and then excreted in the urine. Without a controlled potassium level, an increase in potassium levels may lead to muscle paralysis and potentially fatal cardiac arrhythmias. Management of chronic hyperkalemia in these participants can include pharmacologic management with a non-absorbable cation exchanger, such as sodium polystyrene sulfonate, patiromer, and sodium zirconium cyclosilicate. Dichlorphenamide, a carbonic anhydrase inhibitor (CAI), is approved for use in participants with primary hypokalemic and hyperkalemic periodic paralysis and related variants. There are no other FDA-approved alternatives for this disease state however, acetazolamide, also a CAI, has been used for treatment of periodic paralysis off-label and should be considered. Total program savings for the PDL classes will be regularly reviewed.

Program-Specific Information:

Preferred Agents  
- Kionex® Susp  
- Sodium Polystyrene Sulfonate Pwd/Susp  
- SPS® Susp  
- SPS® Rectal Enema

Non-Preferred Agents  
- Keveyis®  
- Lokelma®  
- Veltassa® Pwd Pack

Type of Criteria: ☒ Preferred Drug List  
☐ Increased risk of ADE  
☐ Clinical Edit  
☐ Appropriate Indications  
☐ Databases + Prescriber-Supplied

Data Sources: ☒ Databases + Prescriber-Supplied  
☐ Only Administrative Databases
Setting & Population

- Drug class for review: Electrolyte Depleting Agents, Potassium Lowering
- Age range: All appropriate MO HealthNet participants aged 18 years or older

Approval Criteria

- Participants aged 18 years or older for non-preferred agents AND
- Failure to achieve desired therapeutic outcomes with trial on 1 or more preferred agents
  - Documented trial period of preferred agents OR
  - Documented ADE/ADR to preferred agents AND
- For Lokelma: documented therapeutic trial (60 days) of Veltassa in the past year OR
- For Keveyis: documented diagnosis of periodic paralysis as determined by at clinical consultant review

Denial Criteria

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

Required Documentation

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<tr>
<th>Laboratory Results:</th>
<th>Progress Notes:</th>
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MedWatch Form: Other:

Disposition of Edit

Denial: Exception Code “0160” (Preferred Drug List)
Rule Type: PDL

Default Approval Period

1 year

References

8. USPDI, Micromedx; 2021.
9. Facts and Comparisons eAnswers (online); 2021 Clinical Drug Information, LLC.