



# SmartPA Criteria Proposal

Drug/Drug Class:	Epinephrine Agents, Self-Injectable PDL Edit	
First Implementation Date:	April 14, 2010	
Revised Date:	July 7, 2022	
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:

Anaphylaxis is an acute systemic, severe, type I hypersensitivity allergic reaction in humans and other mammals. Minute amounts of allergens may cause a life-threatening anaphylactic reaction. Anaphylaxis may occur after ingestion, skin contact, injection, or inhalation of an allergen. Anaphylactic shock, the most severe type of anaphylaxis, occurs when an allergic response triggers a quick release of large quantities of immunological mediators (histamines, prostaglandins, and leukotrienes) from mast cells and basophils, leading to systemic vasodilation (associated with a sudden drop in blood pressure) and edema of bronchial mucosa, resulting in bronchoconstriction causing difficulty breathing. Anaphylactic shock can lead to death in a matter of minutes if left untreated. The primary treatment for anaphylaxis is administration of epinephrine, which prevents worsening of the airway constriction by acting on Beta-2 adrenergic receptors in the lung as a powerful bronchodilator, stimulates the heart to continue beating, causes vasoconstriction in order to increase blood pressure, and may be life-saving.

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

## Program-Specific Information:

Preferred Agents	Non-Preferred Agents
Epinephrine Inj (gen EpiPen®, Mylan	Epinephrine Inj (gen Adrenaclick®)
Specialty)	<ul> <li>Epinephrine Inj (gen EpiPen®, Teva)</li> </ul>
<ul> <li>Epinephrine Jr. Inj (gen EpiPen Jr.®,</li> </ul>	Epinephrine Jr. Inj (gen Adrenaclick®
Mylan Specialty)	Jr.)
EpiPen®	Epinephrine Jr. Inj (gen EpiPen Jr®,
EpiPen Jr.®	Teva)
	Symjepi <sup>®</sup>

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: Epinephrine Self-Injectable Agents
- Age range: All appropriate MO HealthNet participants

### **Approval Criteria**

- Failure to achieve desired therapeutic outcomes with trial on 2 preferred agents
  - Documented trial period of preferred agents
  - Documented ADE/ADR to preferred agents

### **Denial Criteria**

<ul> <li>Lack of adequate trial on required preferred agents</li> <li>Therapy will be denied if all approval criteria are not met</li> </ul>		
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 Analysis: "Self-Injectable Epinephrine Auto-Injectors", UMKC-DIC;
   February 2022.
- Evidence-Based Medicine and Fiscal Analysis: "Self-Injectable Epinephrine Agents Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; February 2022.
- USPDI, Micromedex; 2022.
- Facts and Comparisons eAnswers (online); 2022 Clinical Drug Information, LLC.