Executive Summary

Purpose: The MO HealthNet Pharmacy Program will implement a state-specific preferred drug list.

Why Issue Selected: The ophthalmic NSAID agents are believed to inhibit the cyclooxygenase enzyme that is essential in the biosynthesis of prostaglandins. They reduce ophthalmic inflammation when applied topically in the eye for the treatment of various ophthalmic conditions. These agents are effective for the prophylaxis and treatment of ocular conditions including non-infectious inflammation, inhibition of intraoperative miosis, pain and healing following cataract and refractive surgery, and allergic conjunctivitis. Their safety and efficacy for treatment of ocular inflammatory conditions, especially those that result in postoperative ocular pain, inflammation, and edema have been well documented in clinical studies.

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

Program-Specific Information:

<table>
<thead>
<tr>
<th>Preferred Agents</th>
<th>Non-Preferred Agents</th>
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</thead>
<tbody>
<tr>
<td>• Diclofenac Oph</td>
<td>• Acular®</td>
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<tr>
<td>• Flurbiprofen Oph</td>
<td>• Acular LS®</td>
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<tr>
<td>• Ketorolac Oph</td>
<td>• Acuvail®</td>
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<td>• Bromfenac</td>
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<td>• BromSite®</td>
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<td>• Ilevro®</td>
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<td>• Nevanac®</td>
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<td>• Prolensa®</td>
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Type of Criteria: ☒ Preferred Drug List
☐ Increased risk of ADE
☐ Appropriate Indications
☐ Clinical Edit

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

- Drug class for review: Nonsteroidal Anti-Inflammatory Drugs (NSAID), Ophthalmic
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- 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

- USPDI, Micromedex; 2022.
- Facts and Comparisons eAnswers (online); 2022 Clinical Drug Information, LLC.