Clinical Edit Criteria Proposal

Drug/Drug Class:	**SNRI Clinical Edit**
Date:	**May 2, 2019**
Prepared for:	
Prepared by:	**MO HealthNet**

☐ **New Criteria** ☒ **Revision of Existing Criteria**

Executive Summary

Purpose:

Ensure appropriate and prudent use serotonin-norepinephrine reuptake inhibitors (SNRIs) medications within the MO HealthNet Pharmacy program.

Why was this Issue Selected:

Patient safety is at the heart of MO HealthNet administration and Pharmacy management decision-making. Protecting patient safety in the Pharmacy program includes assessing for utilization of the SNRIs medications. By using medical evidence guidelines, a new clinical edit can help to flag potentially dangerous duplicate and high dose therapy for these agents. Additionally, some participants are cared for by multiple prescribers and have medications filled at different pharmacies. Without a clinical edit capability it is almost impossible to prevent duplication within a drug class, dangerous drug interactions, or overmedication. The clinical edit would not replace medical practice. The edit helps to provide an "early warning alert" to the pharmacist filling the prescription and the prescribing physician. Even if the edit is "triggered" and the physician wishes to over-ride the process for medically necessary reasons, as is presently true for all other drug classes the drug can be approved with further medical input through direct communication with the MHD Hotline. As the clinical edits are phased in, compliance and efficacy with existing medications are always taken into account, helping to ensure a smooth transition for current participants.

Setting & Population: All Patients

Type of Criteria:

☐ **Increased risk of ADE** ☐ **Non-Preferred Agent**

☒ **Appropriate Utilization** ☐ **Other:**

Data Sources:

☐ **Only administrative databases** ☒ **Databases + Prescriber-supplied**

Setting & Population

- Drug/drug class for review: SNRI Antidepressants
- Age range: All patients
- Gender: males and females

Approval Criteria

- Participant age greater than 4 years of age
- Appropriate diagnosis for participants less than 26 years of age
  - For Cymbalta Only – Chronic Musculoskeletal Pain is an appropriate diagnosis
    - Osteoarthritis
    - Lower Back Pain
- Doses not exceeding recommended maximum doses (see Table 1)
- Documented compliance to current SNRI therapy regimen (90 days of therapy out of the most recent 120 days)

Denial Criteria

- Use of more than two SNRI medications for more than 60 of the past 90 days
- For under 18 years:
  - Use of more than two SNRI medications for more than 30 of the past 90 days
- Use of SNRI medications for children under age 5 years
- Concurrent use of more than 1 SSRI agent and 1 SNRI agent for more than 30 days
- Lack of approval criteria

Required Documentation

Laboratory results: ☐ Progress notes: ☐
MedWatch form: ☐

Table 1

Brand Name	Generic Name	Adult Max Daily Dose
Cymbalta	Duloxetine	120 mg
Effexor	Venlafaxine	375 mg
Effexor XR	Venlafaxine XR	225 mg
Fetzima	Levomilnacipran ER	120 mg
Irenka	Duloxetine DR	120 mg
Khedezla	Desvenlafaxine ER	400 mg
Pristiq	Desvenlafaxine ER	400 mg