Executive Summary

**Purpose:** Ensure appropriate use of serotonin-norepinephrine reuptake inhibitor (SNRI) agents

**Why was this Issue Selected:** MO HealthNet will assess the usage of SNRI agents in the pharmacy program with a primary goal of patient safety. Participants may have multiple prescribers and/or multiple pharmacies caring for them, and without a clinical edit it is almost impossible to prevent duplication within a drug class, dangerous drug interactions, or overmedication. By using medical evidence guidelines, this clinical edit can flag potentially dangerous duplicate and high dose therapy for SNRI agents. The edit helps to provide an “early warning alert” to the pharmacist filling the prescription and the prescribing physician. As always, if a provider wishes to override a denial for medically necessary reasons, a claim can be approved with further medical input through direct communication with the MHD Hotline.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Claims</th>
<th>Spend</th>
</tr>
</thead>
<tbody>
<tr>
<td>SNRI Agents</td>
<td>79,567</td>
<td>$3,405,898.27</td>
</tr>
</tbody>
</table>

**Program-specific information:**

- **Type of Criteria:**
  - [ ] Increased risk of ADE
  - [x] Appropriate Utilization
  - [x] Clinical Edit
  - [x] Preferred Drug List

- **Data Sources:**
  - [ ] Only administrative databases
  - [x] Databases + Prescriber-supplied

**Setting & Population**

- Drug class for review: Serotonin-norepinephrine reuptake inhibitor (SNRI) agents
- Age range: all appropriate MO HealthNet participants aged 5 years and older
Approval Criteria

- Participant aged 5 years or older AND
- Documented compliance to current SNRI therapy regimen (90 days in the past 120 days) OR
- Documented appropriate diagnosis required for:
  - participants < 18 years of age OR
  - participants < 26 years of age who are also enrolled in foster care
- For diagnosis of chronic musculoskeletal pain or diabetic peripheral neuropathic pain – duloxetine agents only
- For diagnosis of fibromyalgia – Cymbalta or Savella only

Denial Criteria

- Therapy will be denied if no approval criteria are met
- Dose exceeds maximum dosage limits (see Appendix A)
- For participants < 18 years of age: history of > 2 SNRI agents for more than 30 days in the past 90 days
- For participants ≥ 18 years of age: history of > 2 SNRI agents for more than 60 days in the past 90 days
- Participant is on more than one SSRI agent and one SNRI agent concurrently for more than 30 days

Required Documentation

Laboratory Results: 
MedWatch Form: 
Progress Notes: 
Other:

Disposition of Edit

Denial: Exception code “682” (Clinical Edit)

Appendix A

<table>
<thead>
<tr>
<th>Generic Equivalent</th>
<th>Max Daily Dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESVENLAFAXINE</td>
<td>400 mg</td>
</tr>
<tr>
<td>DULOXETINE</td>
<td>120 mg</td>
</tr>
<tr>
<td>LEVOMILNACIPRAN ER</td>
<td>120 mg</td>
</tr>
<tr>
<td>MILNACIPRAN</td>
<td>200 mg</td>
</tr>
<tr>
<td>VENLAFAXINE</td>
<td>375 mg</td>
</tr>
<tr>
<td>VENLAFAXINE ER</td>
<td>225 mg</td>
</tr>
</tbody>
</table>

References