**Executive Summary**

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

**Why Issue Selected:** Type 2 diabetes mellitus is a significant health problem associated with excessive morbidity and mortality. As the prevalence of this metabolic disorder is rapidly increasing and as older treatments fail to stabilize the disease in many participants, prevention and control are considered key objectives. Alpha-glucosidase inhibitors (AGIs) inhibit alpha-glucosidases (upper gastrointestinal enzymes) that convert complex polysaccharide carbohydrates into monosaccharides with an effect that is dose-dependent. They are given with meals and work in the gastrointestinal tract by slowing the breakdown of complex sugars into glucose resulting in delayed glucose absorption and lower blood sugars following meals. In older participants with type 2 diabetes mellitus, acarbose has been shown to possibly increase insulin sensitivity as well. The AGIs may be used alone or in combination with other medications for diabetes. The main adverse effect of these medications is flatulence, but symptoms tend to be mild and are dose related. Therefore, decreasing the starting dose of the medication may make the medication more tolerable.

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>
</tr>
</thead>
<tbody>
<tr>
<td>• Acarbose</td>
<td>• Glyset®</td>
</tr>
<tr>
<td>• Miglitol</td>
<td>• Precose®</td>
</tr>
</tbody>
</table>

**Type of Criteria:**

- ☒ Increased risk of ADE
- ☐ Appropriate Indications
- ☒ Preferred Drug List
- ☐ Clinical Edit

**Data Sources:**

- ☐ Only Administrative Databases
- ☒ Databases + Prescriber-Supplied

**Setting & Population**

- Drug class for review: Alpha-Glucosidase Inhibitors
- Age range: All appropriate MO HealthNet participants
Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 2 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

<table>
<thead>
<tr>
<th>Laboratory Results:</th>
<th>Progress Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MedWatch Form:</td>
<td>Other:</td>
</tr>
</tbody>
</table>

Disposition of Edit

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

Default Approval Period

1 year

References

4. USPDI, Micromedex; 2021.
5. Facts and Comparisons eAnswers (online); 2021 Clinical Drug Information, LLC.