

SmartPA Criteria Proposal

Drug/Drug Class:	Glaucoma Agents PDL Edit
First Implementation Date:	January 5, 2012
Revised Date:	July 1, 2021
Prepared For:	MO HealthNet
Prepared By:	MO HealthNet/Conduent
Criteria Status:	<input type="checkbox"/> Existing Criteria <input checked="" type="checkbox"/> Revision of Existing Criteria <input type="checkbox"/> New Criteria

Executive Summary

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

Why Issue Selected: Glaucoma is the second most common cause of permanent blindness in the United States. Increased intraocular pressure (IOP) is common in glaucoma and is believed to contribute to the damage to the optic nerve which can lead to loss of visual sensitivity and field. It was once thought that high IOP was the main cause of this optic nerve damage. Although IOP is clearly a risk factor, it is now known that other factors must also be involved because even people with “normal” levels of pressure can experience vision loss from glaucoma. Two major types of glaucoma have been identified: open-angle and closed-angle. Roughly 2.5 million Americans have primary open-angle glaucoma which is the most common type of glaucoma. It happens when the eye’s drainage canals become clogged over time, causing the IOP to rise as the fluid cannot properly drain. Closed or narrow-angle glaucoma is very different from open-angle in that the pressure usually rises very quickly. The outer edge of the iris bunches over the drainage canals when the pupil quickly enlarges. Several types of medications are used to treat glaucoma, including beta-blockers, sympathomimetics, topical carbonic anhydrase inhibitors, direct/indirect cholinergic agonists and prostaglandin analogs. Monotherapy or combination therapy may be used to treat and delay the need for surgery and to prevent functional vision loss. All medications used for the management of glaucoma attempt to limit further damage to the optic nerve.

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

Program-Specific Information:	Preferred Agents	Non-Preferred Agents
	<ul style="list-style-type: none"> • Latanoprost • Travatan-Z® 	<ul style="list-style-type: none"> • Bimatoprost • Durysta™ • Lumigan® • Rhopressa® • Rocklatan® • Simbrinza® • Travoprost • Vyzulta® • Xalatan® • Xelpros™ • Zioptan®

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: Glaucoma Agents
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- For Rhopressa, Rocklatan or Simbrinza therapy:
 - Documented compliance on current therapy regimen **OR**
 - Adequate therapeutic trial of 1 prostaglandin agent AND 1 beta-adrenergic blocking agent **OR**
- Failure to achieve desired therapeutic outcomes with trial on 2 or more preferred agents
 - Documented trial period for preferred agents **OR**
 - Documented ADE/ADR to preferred agents **AND**
- **For Durysta: Clinical Consultant Review required if participant history demonstrates prior claim for bimatoprost intracameral implant**

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:
MedWatch Form:

Progress Notes:
Other:

Disposition of Edit

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

Default Approval Period

1 year

References

1. Evidence-Based Medicine and Fiscal Analysis: "Glaucoma, Prostaglandin Agonists – Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; January 2021.
2. Evidence-Based Medicine Analysis: "Ophthalmic Prostaglandin Agonists", UMKC-DIC; January 2021.
3. Lippincott, Williams, Wilkins. PDR Electronic Library, Montvale NJ; 2021.
4. USPDI, Micromedex; 2021.
5. Facts and Comparisons eAnswers (online); 2021 Clinical Drug Information, LLC.

SmartPA PDL Proposal Form

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