Executive Summary

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

Why Issue Selected: Macrolide antibiotics reversibly bind to the P-site of the 50S ribosomal subunit of susceptible organisms and may inhibit RNA-dependent protein synthesis. They may be bacteriostatic or bacteriocidal, depending on such factors as drug concentration. There are currently four macrolides available in the U.S. They are all equally efficacious for the treatment of most community-acquired infections, but some have better tolerability and allow for once to twice daily dosing.

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>Azithromycin Pwd Packet/Susp/Tabs</td>
<td>Clarithromycin ER</td>
</tr>
<tr>
<td>Clarithromycin Susp/Tabs</td>
<td>E.E.S. 400®</td>
</tr>
<tr>
<td><strong>E.E.S. 200® Susp</strong></td>
<td>Ery-Tab®</td>
</tr>
<tr>
<td><strong>EryPed® Susp</strong></td>
<td>Erythromycin Base Tabs</td>
</tr>
<tr>
<td>Erythromycin Base DR Caps</td>
<td>Erythromycin Base DR Tabs</td>
</tr>
<tr>
<td>Erythromycin Ethylsuccinate Tabs</td>
<td><strong>Erythromycin Ethylsuccinate Susp</strong></td>
</tr>
<tr>
<td><strong>Zithromax®</strong></td>
<td></td>
</tr>
</tbody>
</table>

Type of Criteria: ☒ Preferred Drug List

Data Sources: ☒ Databases + Prescriber-Supplied

Setting & Population

- Drug class for review: Macrolide Agents
- 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 for 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></td>
<td>Other:</td>
</tr>
</tbody>
</table>

MedWatch Form: [

Disposition of Edit

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

Default Approval Period

1 year

References

2. Evidence-Based Medicine Analysis: “Macrolides”, UMKC-DIC; March 2021.
4. USPDI, Micromedex; 2021.
5. Facts and Comparisons eAnswers (online); 2021 Clinical Drug Information, LLC.