



# SmartPA Criteria Proposal

Drug/Drug Class:	Targeted Immune Modulators, Interleukin (IL)-17 Antibody/IL- 17 Receptor Antagonists, IL-23 Inhibitors and IL-23/IL-12 Inhibitors PDL Edit	
First Implementation Date:	January 22, 2004	
Revised Date:	October 29, 2020	
Prepared For:	MO HealthNet	
Prepared By:	MO HealthNet/Conduent	
Criteria Status:	□Existing Criteria ⊠Revision of Existing Criteria □New Criteria	

## **Executive Summary**

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

Why Issue Selected: Interleukins (ILs) are pro-inflammatory cytokines that stimulate the recruitment and proliferation of other immune cells, leading to an increase in inflammation at the site of activity. The IL-17 pathway plays a major role in several auto-immune disorders, including psoriasis, psoriatic arthritis, and spondylarthritis while the IL-12 and IL-23 pathways are involved in Crohn's disease, ulcerative colitis and psoriasis. Though these agents have similar targets, they vary in mechanism of action and indication. The agents in this class are all subcutaneous injections except for Stelara® (ustekinumab) being IV in use for Crohn's disease and ulcerative colitis. These agents are commonly reserved for patients with moderate-to-severe cases after failure to control with first line therapies.

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

#### **Program-Specific** Information:

Preferred Agents	Non-Preferred Agents
Taltz <sup>®</sup>	Cosentyx®
	<ul> <li>Ilumya<sup>™</sup></li> </ul>
	• Siliq <sup>®</sup>
	<ul> <li>Skyrizi™</li> </ul>
	Stelara®
	Tremfva®

Type of Criteria:	<ul><li>☐ Increased risk of ADE</li><li>☒ Appropriate Indications</li></ul>	<ul><li>☑ Preferred Drug List</li><li>☐ Clinical Edit</li></ul>
Data Sources:	☐ Only Administrative Databases	

# **Setting & Population**

- Drug class for review: Targeted Immune Modulators, Interleukin (IL)-17 Antibody/IL-17 Receptor Antagonists, IL-23 Inhibitors and IL-23/IL-12 Inhibitors
- Age range: All appropriate MO HealthNet participants aged 18 years or older unless indicated otherwise

# **Approval Criteria**

- Documented compliance on current therapy OR
- Adequate therapeutic 6 month trial of tumor necrosis factor (TNF) inhibitors defined as:
  - Combination therapy of 2 TNF inhibitors OR
  - Monotherapy of 1 TNF inhibitor AND
- Failure to achieve desired therapeutic outcomes with trial on 1 preferred agent
  - Documented trial period of preferred agents (6 months of therapy)
  - Documented ADE/ADR to preferred agents AND
- Documentation of appropriate diagnosis and participant age range for requested agent:

Generic	Brand	Indication
Brodalumab	Siliq®	Plaque psoriasis
Guselkumab	Tremfya	<ul><li>Plaque psoriasis</li><li>Psoriatic arthritis</li></ul>
Ixekizumab	Taltz <sup>®</sup>	<ul> <li>Ankylosing spondylitis</li> <li>Non-radiographic axial spondyloarthritis</li> <li>Plaque psoriasis (aged 6 or older)</li> <li>Psoriatic arthritis</li> </ul>
Secukinumab	Cosentyx®	<ul> <li>Ankylosing spondylitis</li> <li>Non-radiographic axial spondyloarthritis</li> <li>Plaque psoriasis</li> <li>Psoriatic arthritis</li> </ul>
Tildrakizumab-asmn	llumya™	Plaque psoriasis
Ustekinumab	Stelara <sup>®</sup>	<ul> <li>Crohn's disease</li> <li>Plaque psoriasis (aged 6 or older)</li> <li>Psoriatic Arthritis</li> <li>Ulcerative colitis</li> </ul>
Risankizumab	Skyrizi™	Plaque psoriasis

## **Denial Criteria**

- Lack of adequate trial on required preferred agents
- Therapy will be denied if no approval criteria are met

Required Documentation							
Laboratory Results: MedWatch Form:		Progress Notes: Other:					

## **Disposition of Edit**

Denial: Exception Code "0160" (Preferred Drug List)

SmartPA PDL Proposal Form

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Rule Type: PDL

#### **Default Approval Period**

1 year

#### References

- 1. Lippincott, Williams, Wilkins. PDR Electronic Library, Montvale NJ; 2020.
- 2. USPDI, Micromedex; 2020.
- 3. Facts and Comparisons eAnswers (online); 2020 Clinical Drug Information, LLC.
- 4. Ilumya [package insert]. Cranbury, NJ: Sun Pharmaceuticals Industries Inc; 2019.
- 5. Silig [package insert]. Bridgewater, NJ: Valeant Pharmaceuticals North America LLC; 2018.
- 6. Tremfya [package insert]. Horsham, PA: Janssen Biotech, Inc; 2019.
- 7. Taltz [package insert]. Indianapolis, IN: Eli Lilly and Co; 2020.
- 8. Cosentyx [package insert]. East Hanover, NJ: Novartis Pharmaceutical; 2020.
- 9. Skyrizi [package insert]. North Chicago, IL: AbbVie Inc; 2020.
- 10. Stelara [package insert]. Horsham, PA: Janssen Biotech, Inc; 2020.
- 11. Evidence-Based Medicine Analysis: "Targeted Immune Modulators (Biologics DMARDS)". UMKC-DIC; April 2020.
- 12. Evidence-Based Medicine and Fiscal Analysis: "Targeted Immune Modulators: Interleukin (IL)-17, -12/23 and -23 Inhibitors—Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; April 2020.