



SmartPA Criteria Proposal

Drug/Drug Class:	Cough and Cold Preparations PDL Edit
First Implementation Date:	May 31, 2013
Revised Date:	July 6, 2023
Prepared For:	MO HealthNet
Prepared By:	MO HealthNet/Conduent
Criteria Status:	<input checked="" type="checkbox"/> Existing Criteria <input 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: The common cold is a viral illness that affects persons of all ages, prompting frequent use of over-the-counter and prescription medications, as well as alternative remedies. Cough and cold formulations are available for the use in the treatment of the signs and symptoms of the common cold, sinusitis, allergies, and cough. They come in various combinations as simple cold preparations, narcotic cough and cold formulations and non-narcotic cough and cold products. The MO HealthNet Pharmacy Program has identified the following products as FDA approved and available on the market. These listed agents will be the preferred products available first line, all other products are considered non-preferred.

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"> • Benzonatate Caps • Brompheniramine/Phenylephrine/Dextromethorphan Soln • Carbinoxamine Soln • Chlorpheniramine Tabs • Chlorpheniramine/Phenylephrine Soln • Chlorpheniramine/Phenylephrine/Dextromethorphan Soln • Cyproheptadine Soln/Tabs • Dextromethorphan Caps/Susp • Guaifenesin Soln • Guaifenesin/Codeine Soln • Guaifenesin/Dextromethorphan Soln • Promethazine/Dextromethorphan Soln 	<ul style="list-style-type: none"> • <i>All Cough and Cold Preparations not listed as preferred agents</i>

**This is a representative list of products covered in the past and is not intended to be an all-inclusive list of reimbursable products. MO HealthNet will cover products based on a maximum dollar claim limit.*

Type of Criteria: Increased risk of ADE Preferred Drug List

Appropriate Indications

Clinical Edit

Data Sources: Only Administrative Databases

Databases + Prescriber-Supplied

Setting & Population

- Drug class for review: Cough and Cold Preparations
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- Claim is for a preferred agent

Denial Criteria

- Prescription cost exceeds MO HealthNet established limit
- 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 "0213" (Prior Authorization Required But Not Found)
Rule Type: PA

Default Approval Period

6 months

References

- Evidence-Based Medicine and Fiscal Analysis: "Cough and Cold Agents - Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; January 2022.
- Evidence-Based Medicine Analysis: "Cough and Cold Remedies", UMKC-DIC; Last updated October 2022.
- USPDI, Micromedex; 2023.
- Facts and Comparisons eAnswers (online); 2023 Clinical Drug Information, LLC.