

Non-preferred medication: a brand name medication for which a generic or other brand name medication is preferred at a lower tier. This medication is associated with the highest level of copayment.

POLICY

It is the policy of the Health Plan to maintain a prior authorization process that promotes appropriate utilization of specific drugs with potential for misuse or limited indications. This process involves a review using Food and Drug Administration (FDA) criteria to make a determination of Medical Necessity, and approval by the Pharmacy & Therapeutics Committee of the criteria for prior authorization, as described in RX.002 Pharmacy and Therapeutics Committee and RX.003-Prior Authorization Process.

The drugs, Non-preferred BPH Medication, are subject to the prior authorization process.

PROCEDURE

Initial Authorization Criteria:

Must meet all of the criteria listed under the respective header:

1. Automatic coverage:

- Must have a documented pharmacy claim history of prior therapy with a generic BPH medication

2. Members without claims history:

- Must have documentation indicating that the member has failed or had intolerance to a generic BPH medication

Limitations:

Length of Authorization (if above criteria met)	
Initial Authorization	Up to duration of member's membership with plan
Reauthorization	N/A



If the established criteria are not met, the request is referred to a Medical Director for review.

REFERENCES

1. Benign Prostatic Hyperplasia. <http://www.merriam-webster.com/medlineplus/benign%20prostatic%20hyperplasia>. Accessed September 12, 2011.
2. Cardura XL® [package insert]. New York, NY: Pfizer, Inc; July 2007.
3. Flomax® [package insert]. Deerfield, IL: Astellas Pharma US, Inc; April 2009.
4. Hytrin® [package insert]. North Chicago, IL: Abbott Laboratories; December 2006.
5. Medical treatment of benign prostatic hyperplasia. http://www.uptodate.com/contents/medical-treatment-of-benign-prostatic-hyperplasia?source=search_result&search=alpha-1+adrenergic+antagonist&selectedTitle=1%7E150#H5. Accessed September 19, 2011.
6. Minipress® [package insert]. New York, NY: Pfizer, Inc; July 2009.
7. Rapaflo® [package insert]. Corona, CA: Watson Laboratories, Inc; November 2009.
8. Uroxatral® [package insert]. Bridgewater, NH: sanofi-aventis U.S. Inc; 2010.

RECORD RETENTION

Records Retention for Evolent Health documents, regardless of medium, are provided within the Evolent Health records retention policy and as indicated in CORP.028.E Records Retention Policy and Procedure.

REVIEW HISTORY

DESCRIPTION OF REVIEW / REVISION	DATE APPROVED
<i>Annual review</i>	<i>02/17, 02/18</i>

