Platelet Inhibitors

Goal:

• Approve antiplatelet drugs for funded diagnoses which are supported by medical literature.

Length of Authorization:

• Up to 12 months.

Requires PA:

• Non-preferred drugs

Covered Alternatives:

• Preferred alternatives listed at www.orpdl.org/drugs/

| Approval Criteria | | | | | | | |
|-------------------|--|---|--|--|--|--|--|
| 1. What d | iagnosis is being treated? | Record ICD10 code. | | | | | |
| | e prescriber consider a change to a ed product? | Yes: Inform provider of preferred alternatives. | No: Go to #3 | | | | |
| hospita | new therapy for a patient who was lized and had an antiplatelet in the hospital? | Yes: Approve for 30 days only and request a PA from the provider for continuation of therapy. | No: Go to #4 | | | | |
| for a pa | a request for continuation of therapy atient that already received 30 days apy that was initiated in the hospital? | Yes: Approve for FDA-approved indication for up to 1 year. | No: Go to #5 | | | | |
| 5. Is the re | equest for ticagrelor? | Yes: Go to #6 | No: Got to #7 | | | | |
| | ne patient have a history of nial hemorrhage? | Yes: Deny for medical appropriateness | No: Approve for FDA-approved indication for up to 1 year. | | | | |

Approval Criteria

7. Is the request for vorapaxar AND does the patient have a history of stroke, TIA or intracranial hemorrhage?

Yes: Deny for medical appropriateness

No: Approve for FDA-approved indications for up to 1 year.

If vorapaxar is requested, it should be approved only when used in combination with aspirin and/or clopidogrel. There is limited experience with other platelet inhibitor drugs or as monotherapy.

FDA Approved Indications (April 2021)

| | 1° | 2° | 2° | 1° | 2° | ACS | |
|-------------|--------|--------|-----|----|----|--------|-----|
| | Stroke | Stroke | PAD | MI | MI | No PCI | PCI |
| ASA/DP ER | | х | | | | | |
| clopidogrel | | х | х | | Х | х | х |
| ticagrelor | x | х | | Х | Х | х | х |
| vorapaxar | | CI | Х | | Х | | |

Abbreviations: 1° = prevention, 2° = secondary prevention; ACS=Acute Coronary Syndrome; ASA/DP ER = aspirin/dipyridamole; CI=contraindication; PCI=Percutaneous Intervention; X = FDA-approved indication.

P&T / DUR Review: 6/21 (KS), 9/17 (MH); 7/15; 11/11 Implementation: 7/1/21; 10/15, 8/15; 7/31/14; 4/9/12