

ANGIOTENSIN II (A-II) RECEPTOR ANTAGONISTS STEP THERAPY

The A-II ANTAGONIST step therapy program supports the coverage of A-II antagonists after the use of an angiotensin-converting enzyme (ACE) inhibitor. The A-II antagonists produce homodynamic effects similar to ACE inhibitors, while avoiding the most common adverse effect, dry cough. While there is an absence of data documenting long-term cardiac and renal protection, A-II antagonists should be reserved for use in participants in whom ACE inhibitors are indicated but are unable to tolerate them. The use of ACE inhibitor before A-II antagonists for the treatment of hypertension is supported by the recently published Sixth Report of the Joint National Committee on Prevention, Detection, Evaluations, and Treatment of High Blood Pressure (JNC-VI).

Beta-blockers and diuretics, proven to reduce morbidity and mortality associated with hypertension, remain the initial drugs of choice unless there are compelling or specific indications for another drug. Concomitant heart failure, myocardial infarction, and/or type I Diabetes Mellitus with proteinuria are compelling indications for the use of ACE inhibitors to control hypertension. Ace inhibitors have data documenting long-term cardiac and renal protection in participants with these conditions. (NIH publication 98-4080)

The objective of the program is to allow coverage for A-II antagonists or A-II antagonist combination products to MAHP plan participants who have previously tried an ACE inhibitor or ACE inhibitor combination product. Utilization of an ACE inhibitor or ACE inhibitor combination product is required before a prescription for an A-II antagonist or A-II antagonist combination product will be paid as a part of the participant's prescription drug benefit.

On-line system edits will be applied to each claim for an A-II antagonist and A-II antagonist combination product at the retail pharmacy. On-line authorization will be granted for an A-II claim when the MAHP plan participant has a prescription claim history of an ACE inhibitor or and ACE inhibitor combination product within the previous 130 days. A claim submitted for an A-II antagonist that fails to pass the computer system edits will be rejected for payment at the pharmacy. The pharmacist will receive a computer on-line message stating, "Plan limitations exceeded; call doctor, use ACE inhibitor/ACE combo first". At this point the pharmacist will contact the ordering practitioner's office and request a change in order.

Should the practitioner choose to use the A-II antagonist or A-II antagonist combination without meeting the step criteria and the participant wants the prescription given special consideration for payment from their prescription drug benefit, the practitioner must contact Health Care Services at MAHP and provide additional medical/clinical information. If the medical/clinical information meets criteria for a medical exception to this step therapy, a prior authorization may be granted.

| | FIRST-LINE DRUGS | SECOND-LINE DRUGS |
|-------------------------|--|---|
| MEDICATIONS | <p>ACE Inhibitors: Benazepril (LOTENSIN); captopril; (CAPOTEN) enalapril (VASOTEC); lisinopril (PRINIVIL, ZESTRIL) fosinopril (MONOPRIL) moexipril (UNIVASC) quinapril (ACCUPRIL) ramipril (ALTACE) trandolapril (MAVIK) perindopril (ACEON) NF</p> <p>ACE Inhibitor Combinations: Benazepril/HCTZ (LOTENSIN HCT) captopril/HCTZ (CAPOZIDE) ; enalapril/HCTZ (VASERETIC) ; lisinopril/HCTZ (PRINZIDE, ZESTORETIC) fosinopril/HCTZ (MONOPRIL HCT) Moexipril/HCTZ (UNIRETIC) Benazepril/amlodipine (LOTREL); TARKA (NF) Quinapril/HCTZ (ACCURETIC) <i>NF</i></p> <p>*A Generic ARB is approved if the member has tried a generic ACE or Branded ARB during last 180 days.</p> | <p>A-II Antagonists: Losartan (COZAAR) Valsartan (DIOVAN)</p> <p>AVAPRO (NF) ATACAND (NF) MICARDIS (NF) TEVETEN (NF) BENICAR (NF)</p> <p>A-II Antagonist Combinations: lorsartan/HCTZ (HYZAAR) valsartan/HCTZ (DIOVAN HCT)</p> <p>AVALIDE (NF) ATACAND (NF) MICARDIS HCT (NF) BENICAR HCTZ (NF) EXFORGE (NF) AZOR (NF)</p> |
| CRITERIA FOR USE | <p>Driven by formulary status of drug. Formulary is closed and MAC policies **Processing of brand name first-line drug will cause ancillary charges to participant if a multi-source drug.</p> | <p>Participant has one RX in claims history from the first-line drug category within 130 days prior to the prescription date of a second-line category</p> |

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