

## PRIOR AUTHORIZATION CRITERIA

<b>DRUG CLASS</b>	<b>PROTON PUMP INHIBITORS</b>
<b>BRAND NAME (generic)</b>	<p><b>ACIPHEX (rabeprazole)</b></p> <p><b>ACIPHEX SPRINKLES (rabeprazole)</b></p> <p><b>DEXILANT (dexlansoprazole)</b></p> <p><b>(esomeprazole strontium)</b></p> <p><b>NEXIUM (esomeprazole)</b></p> <p><b>PREVACID (lansoprazole)</b></p> <p><b>PRILOSEC (omeprazole)</b></p> <p><b>PROTONIX (pantoprazole)</b></p> <p><b>ZEGERID (omeprazole/sodium bicarbonate)</b></p>
<b>Status: CVS Caremark Criteria</b>	
<b>Type: Post Limit Prior Authorization</b>	

**POLICY**

**FDA-APPROVED INDICATIONS**

Indication	AcipHex (rabeprazole)	Dexilant (dexlansoprazole)	Nexium (esomeprazole)	Prevacid (lansoprazole)	Prilosec (omeprazole)	Protonix (pantoprazole)	Zegerid (omeprazole/ sodium bicarbonate)
Short-term treatment of	✓			✓	✓		✓

PPI Post Limit Policy 918-J, 169-J 09-2017

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active duodenal ulcer								
Helicobacter pylori eradication to reduce the risk of ulcer recurrence*	✓		✓	✓	✓			
Maintenance of healing of duodenal ulcers				✓				
Short-term treatment of gastric ulcer				✓	✓			✓
Short-term treatment of symptoms associated with GERD	✓	✓	✓	✓	✓	✓	✓	✓
Short-term treatment of erosive esophagitis / GERD	✓	✓	✓	✓	✓	✓	✓	✓
Maintenance healing of erosive esophagitis	✓	✓	✓	✓	✓	✓	✓	✓
Pathological hypersecretory conditions	✓		✓	✓	✓	✓	✓	
Short-term treatment of NSAID-associated gastric ulcer				✓				
Risk reduction of NSAID-associated gastric ulcer			✓	✓				
Risk reduction of upper GI bleeding in critically ill patients								✓ Suspension

\*The PPI is used in conjunction with antibiotics.

#### **COVERAGE CRITERIA (MMT 918-J and 169-J)**

The requested drug will be covered with prior authorization when the following criteria are met:

- The requested drug is being prescribed for any of the following: Barrett's esophagus as confirmed by biopsy or Hypersecretory syndrome, such as Zollinger-Ellison, confirmed with a diagnostic test  
**OR**
- The requested drug is being prescribed for any of the following: A) Endoscopically verified peptic ulcer disease. B) Frequent and severe symptoms of chronic gastroesophageal reflux disease (GERD), C) Atypical symptoms or complications of GERD  
**OR**
- The patient is at high risk for gastrointestinal (GI) adverse events. [Note; Risk factors for serious GI adverse events include, but are not limited to, the following: chronic nonsteroidal anti-inflammatory drug (NASID) therapy, history of peptic ulcer disease and/or GI bleeding, treatment with oral corticosteroids, treatment with anticoagulants, poor general health status or advanced age.]

#### **REFERENCES**

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