Clinical Policy: Oral anticoagulants
Reference Number: ERX.NSST.07
Effective Date: 06/15
Last Review Date: 09/16

Clinical policies are intended to be reflective of current scientific research and clinical thinking. This policy is current at the time of approval, may be updated and therefore is subject to change. This Clinical Policy is not intended to dictate to providers how to practice medicine, nor does it constitute a contract or guarantee regarding payment or results. Providers are expected to exercise professional medical judgment in providing the most appropriate care, and are solely responsible for the medical advice and treatment of members.

This policy is the property of Envolve Pharmacy Solutions. Unauthorized copying, use, and distribution of this Policy or any information contained herein is strictly prohibited. By accessing this policy, you agree to be bound by the foregoing terms and conditions, in addition to the Site Use Agreement for Health Plans associated with Envolve Pharmacy Solutions.

Description
The intent of the criteria is to ensure that patients follow selection elements established by Envolve Pharmacy Solutions for the use of oral anticoagulants

Policy/Criteria
It is the policy of health plans affiliated with Envolve Pharmacy Solutions® that the following oral anticoagulants: apixaban (Eliquis®), dabigatran (Pradaxa®), edoxaban (Savaysa®), and rivaroxaban (Xarelto®) are medically necessary for members meeting the following criteria:

Initial Approval Criteria (must meet all):
A. Age ≥ 18 years;
B. Failure of ≥ 30 days of warfarin in the last 90 days, unless contraindicated;
C. If request is for non-PDL agent, failure of 1 other PDL agent, unless contraindicated;
D. Request does not exceed FDA approved maximum recommended dose and health plan approved daily quantity limit.

Approval duration: 6 months

Continued Approval (must meet all):
A. Previously received medication via health plan benefit or member has previously met all initial approval criteria;
B. If request is for a dose increase, request does not exceed FDA approved maximum recommended dose and health plan approved daily quantity limit.

Approval duration: 12 months

Workflow Document
USS.NSST.07 Oral anticoagulants workflow.docx
Background

Description/Mechanism of Action

Apixaban, edoxaban, and rivaroxaban are selective factor Xa (FXa) inhibitors. They do not require antithrombin III for antithrombotic activity. They inhibit FXa and prothrombinase activity as well as thrombin-induced platelet aggregation. Inhibition of FXa in the coagulation cascade reduces thrombin generation.

Dabigatran is a direct thrombin inhibitor. Because thrombin (serine protease) enables the conversion of fibrinogen into fibrin during the coagulation cascade, its inhibition prevents the development of a thrombus.

FDA Approved Indications

Eliquis, Pradaxa, Savaysa, and Xarelto are all indicated to reduce the risk of stroke and systemic embolism in patients with nonvalvular atrial fibrillation. They can all be used to treat or prevent deep vein thrombosis (DVT) or pulmonary embolism (PE); specific indications are as follows:

- Eliquis is indicated for the prophylaxis of DVT, which may lead to PE, in patients who have undergone hip or knee replacement surgery; for the treatment of DVT and PE; and for the reduction in the risk of recurrent DVT and PE following initial therapy.
- Pradaxa is indicated for the treatment of DVT and PE in patients who have been treated with a parenteral anticoagulant for 5-10 days; to reduce the risk of recurrence of DVT and PE in patients who have been previously treated; and for the prophylaxis of DVT and PE in patients who have undergone hip replacement surgery.
- Savaysa is indicated for the treatment of DVT and PE following 5 to 10 days of initial therapy with a parenteral anticoagulant.
- Xarelto is indicated for the treatment of DVT and PE; for the reduction in the risk of recurrence of DVT and PE; and for the prophylaxis of DVT, which may lead to PE in patients undergoing knee or hip replacement surgery.

References


Reviews, Revisions, and Approvals

<table>
<thead>
<tr>
<th>Description</th>
<th>Date</th>
<th>Approval Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy created.</td>
<td>06/15</td>
<td>06/15</td>
</tr>
<tr>
<td>Updated to new template (converted algorithm to bulleted criteria, added background and references).</td>
<td>07/16</td>
<td>09/16</td>
</tr>
</tbody>
</table>