



Commercial/Healthcare Exchange PA Criteria

Effective: February 10th 2022

Prior Authorization: Sertraline Capsule

Products Affected: Sertraline HCl capsule

Medication Description: Selective Serotonin Reuptake Inhibitors (SSRIs) are oral antidepressant agents that are not chemically related to tricyclic, tetracyclic, or other available antidepressants. The antidepressant action of the SSRIs is assumed to be linked to their inhibition of CNS neuronal uptake of serotonin (5HT). They may also have a weak effect on norepinephrine and dopamine neuronal reuptake. Most SSRIs have little affinity for muscarinic, gamma aminobutyric acid (GABA), benzodiazepine, alpha1, alpha2, beta-adrenergic, dopamine (D2), 5-HT1, 5-HT2, and histamine (H1) receptors. Sertraline Capsules are only labeled for Major depressive disorder (MDD) in adults and Obsessive-compulsive disorder (OCD) in adults and pediatric patients 6 years and older.

Covered Uses:

Obsessive-compulsive disorder, Major depressive disorder

Exclusion Criteria: N/A

Required Medical Information:

1. Diagnosis
2. Previous therapies tried

Prescriber Restriction: None

Age Restriction:

Obsessive-compulsive disorder- 6 years and older

Major depressive disorder- 18 years and older

Coverage Duration: 12 months

Other Criteria:

Obsessive-compulsive disorder or Major depressive disorder

- A. Patient has had an adequate trial and failure of sertraline tablets; defined as a failure to decrease or improve symptoms **OR**
- B. Patient has a contraindication or intolerance to sertraline tablets, defined as (but not limited to):
 - i. Allergic reaction
 - ii. Adverse drug reactions.

January 2022



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References:

1. Sertraline capsule [prescribing information]. Morristown, NJ: Almatica Pharma LLC; October 2021.

Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	2/10/2022