



Commercial PA Criteria
Effective: June 2014

Prior Authorization: Otezla

Products Affected: Otezla (apremilast) oral tablets

Medication Description: Otezla (apremilast), a phosphodiesterase 4 inhibitor, is indicated in adults for the treatment of active psoriatic arthritis. Apremilast is an oral small-molecule inhibitor of phosphodiesterase 4 (PDE4) specific for cyclic adenosine monophosphate (cAMP). PDE4 inhibition results in increased intracellular cAMP levels.

Covered Uses:

1. Psoriatic arthritis, in adults with active disease.
2. Plaque psoriasis, in adults who are candidates for phototherapy or systemic therapy.
3. Adult patients with oral ulcers associated with Behçet's Disease.

Exclusion Criteria:

1. Concurrent use with a biologic DMARD or Targeted Synthetic DMARD
2. Ankylosing Spondylitis
3. Rheumatoid Arthritis

Required Medical Information:

1. Diagnosis
2. Previous medications tried/failed

Age Restrictions: 18 years of age or older

Prescriber Restrictions:

Psoriatic Arthritis: Must be prescribed by, or in consultation with, a rheumatologist or dermatologist.

Psoriasis: Must be prescribed by, or in consultation with, a Dermatologist.

Behçet's Disease: Must be prescribed by, or in consultation with, a rheumatologist, dermatologist, or physician who specializes in the treatment of Behçet's Disease.

Coverage Duration:

Initial: 4 months

Continuation: 1 year

Other Criteria:

1. **Psoriatic Arthritis**
Initial Therapy: Approve if the patient meets the following criteria
 - A. Patient is ≥ 18 years of age; **AND**
 - B. Otezla is prescribed by or in consultation with a rheumatologist or a dermatologist
2. **Plaque Psoriasis**

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Initial Therapy: Approve if the patient meets the following criteria

- A. Patient has tried at least one traditional systemic agent for psoriasis for at least 3 months, unless intolerant; **OR**

Note: Examples of traditional systemic agents for psoriasis include methotrexate, cyclosporine, acitretin tablets, or psoralen plus ultraviolet A light (PUVA). An exception to the requirement for a trial of one traditional systemic agent for psoriasis can be made if the patient has already had a 3-month trial or previous intolerance to at least one biologic. A patient who has already tried a biologic for psoriasis is not required to “step back” and try a traditional systemic agent for psoriasis.

- B. Patient has a contraindication to methotrexate, as determined by the prescriber

3. Behcet’s Disease

Initial Therapy: Approve if the patient meets the following criteria

- A. Patient has a diagnosis of Behçet’s Disease; **AND**
- B. Patient has oral ulcers or other mucocutaneous involvement **AND**
- C. Patient has tried at least ONE other systemic therapy; **AND**

Note: Examples of systemic therapies include colchicine, systemic corticosteroids, azathioprine, thalidomide, interferon alpha, tumor necrosis factor inhibitors (e.g., adalimumab [e.g., Humira, biosimilars], etanercept [e.g., Enbrel, biosimilars], certolizumab pegol [Cimzia], golimumab [Simponi/Aria], or infliximab products [e.g., Remicade, biosimilars]).

- D. The medication is prescribed by or in consultation with a rheumatologist or dermatologist.

Commented [A1]:

Continuation

- A. Patient meets all initial authorization criteria; **AND**
- B. Patient achieves or maintains a positive clinical response after at least 4 months of therapy with Otezla as evidenced by low disease activity or improvement in signs and symptoms of the condition.

References:

1. Otezla® tablets [prescribing information]. Summit, NJ: Celgene; December 2021.

Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	6/2014
2	Update	Update	Coverage Duration	07/01/2019

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3	Update	CCI adopted EH template CCI P&T Review History: 6/14, 10/14, 11/15, 11/16, 11/17, 11/18 CCI Revision Record: 9/14, 11/14, 12/14, 2/16, 11/16, 5/17, 12/18	All	7/3/2019
4	Update	Added indication for Oral Ulcers associated with Behcet's Disease	Covered Uses, Prescriber Restrictions, Other	8/27/2019
5	Update	Removed required trial of preferred products: Cosentyx, Enbrel, Humira, Stelara SC, or Xeljanz/XR for PsA diagnosis	Other Criteria	8/1/2020
6	Update	<u>Psoriatic Arthritis:</u> updated "Patient has documented failure or intolerance to an adequate trial of NSAID/COX-2 or steroid therapy; AND Patient has documented failure or intolerance to an adequate trial (at least 3 months) of ONE DMARD (e.g., methotrexate [oral or injectable], leflunomide, and sulfasalazine) TO "Patient has documented failure or intolerance to an adequate trial of NSAID/COX-2 or steroid therapy; OR Patient has documented failure or intolerance to an adequate trial (at least 3 months) of ONE DMARD (e.g., methotrexate [oral or injectable], leflunomide, and sulfasalazine)"	Other Criteria	9/6/2023
7	Update	<u>Psoriatic Arthritis:</u> <u>Removed:</u> <ul style="list-style-type: none"> • Patient has documented failure or intolerance to an adequate trial of NSAID/COX-2 or steroid therapy; OR • Patient has documented failure or intolerance to an adequate trial (at least 3 months) of ONE DMARD (e.g., methotrexate [oral or injectable], leflunomide, and sulfasalazine); AND <u>Plaque Psoriasis</u> <u>Removed:</u> <ul style="list-style-type: none"> • <u>Patient has chronic (greater than or equal to 1 year) plaque psoriasis;</u> <u>AND</u> • <u>Patient has minimum body surface area involvement with plaque psoriasis of ≥ 10%; AND</u> <u>Behcet's Disease</u> <u>Removed:</u> <ul style="list-style-type: none"> • Patient has at least two active oral ulcers; AND • Patient has been previously treated with at least one nonbiologic Behcet's Disease medication (i.e. corticosteroids, immunosuppressants, azathioprine, cyclosporine, cyclophosphamide, colchicine, mouthwashes that contain corticosteroids and other agents to reduce the pain of mouth sores); AND • Patient is not currently receiving another biologic or systemic treatment for Behcet's Disease; AND • Differential diagnoses have been ruled out by the prescribing physician. <u>Added:</u> <ul style="list-style-type: none"> • Patient has oral ulcers or other mucocutaneous involvement AND • Patient has tried at least ONE other systemic therapy; AND • The medication is prescribed by or in consultation with a rheumatologist or dermatologist. Removal of Connecticare does not consider needle-phobia to be a clinical reason to use Otezla over <u>injectable medications</u> .	Other Criteria	11/15/2023

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