

PHARMACY PRE-AUTHORIZATION CRITERIA

DRUG	<p><u>Erectile Dysfunction Therapies</u> Caverject (alprostadil) Cialis (tadalafil) Edex (alprostadil) Levitra (vardenafil) Muse (alprostadil) Stendra (avanafil) Viagra (sildenafil)</p>
POLICY #	<p>11131</p>
INDICATIONS	<p>Caverject, Edex, Levitra, Muse, Viagra, and Stendra are indicated for the treatment of Erectile Dysfunction.</p> <p>Cialis is indicated for the treatment of Erectile Dysfunction, and the signs and symptoms of Benign Prostatic Hyperplasia (BPH).</p>
CRITERIA	<p>For members with a pharmacy policy that contains a sexual dysfunction rider, Erectile Dysfunction Therapy will be covered at the respective drug Tier (that corresponds with their formulary) and Quantity limit (that corresponds with their benefit design).</p> <p>OR</p> <ul style="list-style-type: none"> • For members with prostate cancer, regardless of sexual dysfunction rider, Medical Exception criteria allow for coverage of Erectile Dysfunction Therapy at the respective drug Tier (that corresponds with their formulary) and Quantity limit of 4 tablets per 30 days, <p>OR</p> <ul style="list-style-type: none"> • For members that have documentation of nerve-sparing prostatectomy, regardless of sexual dysfunction rider, Medical Exception criteria allow for coverage of Viagra or Cialis only, at the respective drug Tier (that corresponds with their formulary) and Quantity Limit of 30 per 30 days for a maximum of 1 year following the procedure <p>OR</p> <ul style="list-style-type: none"> • Cialis will be covered for members that have clinically documented benign prostatic hyperplasia (BPH) and have an intolerance to, or treatment failure of an adequate trial (of at least 4 weeks) of any two of the following: <ul style="list-style-type: none"> ----Alpha blockers (terazosin, doxazosin, tamsulosin, alfuzosin, Cardura, Flomax, Uroxatral) ----Alpha Reductase Inhibitors (finasteride, dutasteride, Proscar, Avodart) <p>AND</p> <ul style="list-style-type: none"> • Medication is being prescribed in a dosage of 5mg once daily.

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LIMITATIONS	<p>Drugs used in the treatment of erectile dysfunction are only available to members who plan's include a Sexual Dysfunction Rider. Medical exception criteria have been established within this policy to also provide coverage of Erectile Dysfunction Therapies to men with benign prostatic hyperplasia (BPH) or Prostate Cancer, regardless of Sexual Dysfunction Rider status.</p> <p>For those patients who have had nerve-sparing prostatectomy, authorization beyond 1 year will not be granted.</p>
REFERENCES	<ol style="list-style-type: none">1. Viagra full prescribing information. New York, NY, Pfizer.2. Cialis full prescribing information. Indianapolis, IN. Eli Lilly and Company.3. Levitra full prescribing information. GlaxoSmithKline.4. Micromedex.com
P&T REVIEW HISTORY	11/15, 5/16, 2/17, 1/18
REVISION RECORD	2/16, 2/17