



Commercial/Healthcare Exchange Step Criteria *Effective: March 2005*

Step Therapy Name: Overactive Bladder

Step 1 Agent(s): oxybutynin IR/ER, tolterodine IR/ER, darifenacin, trospium IR/ER, solifenacin

Step 2 Agent(s): Gelnique, Myrbetriq, Oxytrol, Toviaz, Vesicare

Medication/Class Description:

Overactive Bladder (OAB) medications are indicated for the treatment of overactive bladder with symptoms of urge urinary incontinence, urgency, and urinary frequency. The available products work by different mechanisms to alleviate symptoms of OAB. Anti-muscarinics and beta-3 adrenoceptor agonists can relax the bladder muscle and increase the amount of urine a bladder can hold and empty.

Required Medical Information:

1. Diagnosis
2. Previous therapies tried/failed

Age Restrictions: 18 years of age and older

Prescriber Restrictions: N/A

Coverage Duration: 12 Months

Exceptions for Stepped Medications

- A. Patient has had a trial and failure of at least TWO Step 1 Agents defined as:
 - a. Failure to improve symptoms; OR
- B. Patient has an intolerance or contraindication to at least TWO Step 1 Agents defined as (but not limited to):
 - a. Allergic reaction
 - b. Adverse drug reactions

References:

1. Product Information: MYRBETRIQ^(R) oral extended-release tablets, mirabegron oral extended-release tablets. Astellas Pharma US, Inc. (per FDA), Northbrook, IL, 2018.
2. Product Information: TOVIAZ^(R) oral extended-release tablets, fesoterodine fumarate oral extended-release tablets. Pfizer Labs (per FDA), New York, NY, 2017.
3. Product Information: VESICARE^(R) oral tablets, solifenacin succinate oral tablets. Astellas Pharma US, Inc. (per Manufacturer), Northbrook, IL, 2016.
4. Product Information: GELNIQUE^(R) topical gel, oxybutynin chloride 10% topical gel. Allergan USA, Inc. (per FDA), Irvine, CA, 2017.
5. Product Information: OXYTROL^(R) transdermal system, oxybutynin transdermal system. Allergan USA Inc (per FDA), Irvine, CA, 2017
6. Product Information: SANCTURA^(R) oral tablets, trospium chloride oral tablets. Allergan, Inc. (per FDA), Irvine, CA, 2012.

Last Res. 10.24.19



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Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	Policy Update	<p>Adopted EH Template</p> <p>CCI P&T Review History: 03/05, 12/06, 6/07, 6/08, 9/09, 9/10, 12/11, 10/12, 10/13, 10/14, 2/16, 5/16, 2/17, 1/18</p> <p>CCI Revision Record: 11/15, 2/16, 5/16</p>	All	October 24, 2019