

PHARMACY PRE-AUTHORIZATION CRITERIA



DRUG (S)	Rayos (prednisone) delayed-release tablets
POLICY #	12127
INDICATIONS	Rayos is a corticosteroid indicated for use as an anti-inflammatory or immunosuppressive agent for certain allergic, dermatologic, gastrointestinal, hematologic, ophthalmologic, nervous system, renal, respiratory, rheumatologic, specific infectious diseases or conditions and organ transplantation.
CRITERIA	ConnectiCare, Inc. considers Rayos to be medically necessary for patients who meet ALL of the following criteria: <ol style="list-style-type: none">1. Patient has had a prior trial and inadequate response to one generic immediate-release oral prednisone agent; AND2. Documentation has been provided for why the delayed-release agent is clinically necessary and not for convenience; AND3. Patient has had a prior consecutive trial and inadequate response to two additional generic oral corticosteroid agents (such as but not limited to, prednisolone, methylprednisolone, hydrocortisone).
LIMITATIONS	<ol style="list-style-type: none">1. Patients with severely reduced renal function (creatinine clearance less than 30 mL/minute)
REFERENCES	<ol style="list-style-type: none">1. Rayos [package insert]. Lake Forest, IL: Horizon Pharma USA, Inc.
P&T REVIEW HISTORY	5/18, 5/19
REVISION RECORD	5/18