



## Commercial/Healthcare Exchange PA Criteria Effective: January 1, 2021

**Prior Authorization:** Uceris Rectal Foam

**Products Affected:** Uceris 2mg rectal foam

**Medication Description:** Budesonide has glucocorticosteroid (GCS) activity. Glucocorticoids are naturally occurring hormones that prevent or suppress inflammation and immune responses when administered at pharmacological doses. In general, glucocorticoids inhibit the activity of a variety of cell types (e.g., mast cells, eosinophils, neutrophils, macrophages, and lymphocytes) and mediators involved in allergic and nonallergic/irritant-mediated inflammation (e.g., histamine, eicosanoids, leukotrienes, and cytokines).

**Covered Uses:** Indicated for the induction of remission in patients with active mild to moderate distal ulcerative colitis extending up to 40 cm from the anal verge.

**Exclusion Criteria:** N/A

**Required Medical Information:**

1. Diagnosis
2. Previous therapies tried and failed

**Age Restrictions:** 18 years of age and older

**Prescriber Restrictions:** N/A

**Coverage Duration:** 6 months

**Other Criteria:**

- A. Patient has a diagnosis of distal ulcerative colitis; **AND**
- B. Patient has a documented intolerance to, contraindication, or treatment failure with a mesalamine rectal product (e.g. mesalamine 4 G/60 ml rectal enema, or mesalamine 1 G suppository) **AND** a hydrocortisone rectal product (e.g. hydrocortisone 100 mg / 60 ml rectal enema, hydrocortisone acetate 10% rectal foam, or hydrocortisone 25 mg or 30 mg rectal suppository)

**References:**

1. Uceris (budesonide) rectal foam [prescribing information]. Bridgewater, NJ: Salix Pharmaceuticals; April 2020.

**Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
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January 2021



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1	New Policy	New Policy	All	1/1/2021
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