



## Prior Authorization Criteria

MISSISSIPPI DIVISION OF  
**MEDICAID**

### Dupixent® (dupilumab) Criteria FOR ASTHMA:

**Dupixent®** (dupilumab) is an interleukin-4 receptor alpha antagonist FDA approved for add-on maintenance treatment in patients with moderate-to-severe asthma with an eosinophilic phenotype or with oral corticosteroid-dependent asthma.

ICD-10 code(s): \_\_\_\_\_

**Initial Authorization:** Submission of medical records or prescription claims history documenting the following requirements for the indications below is **required**.

**Dupixent** will be approved based on **ALL** of the following criteria:

- Yes  No Age of patient is within the age range as recommended by the FDA label  
**-AND-**  
 Yes  No Prescribed by or in consultation with an allergist, immunologist or pulmonologist  
**-AND-**  
 Yes  No Diagnosis of moderate-to-severe asthma and one of the following:  
 a. Asthma is an eosinophilic phenotype  
**-OR-**  
 b. Currently receiving maintenance treatment with systemic glucocorticoids and has received treatment for at least 4 weeks

**-AND-**

- Yes  No **All** of the following:

Yes  No  Not Applicable. If asthma is an eosinophilic phenotype, there should be a documented eosinophil level > 150 cells/mcL within the past 12 weeks as evidenced by submission of medical records (e.g, chart notes, laboratory values, etc.) *Please check "Not Applicable" if the diagnosis was based on "b" above.*

**AND**

- Yes  No Patient has experienced  $\geq 2$  exacerbations within the last 12 months, requiring at least one of the following despite adherent use (defined as consistent timely fills over 90 days) of controller therapy (i.e., moderate to high dose inhaled corticosteroid (ICS) plus either a long-acting beta-2 agonist (LABA) or leukotriene modifier (LTRA) if LABA contraindication/intolerance)
- Two or more bursts of systemic corticosteroids for at least 3 days each in the previous 12 months
  - Asthma-related emergency treatment (e.g., emergency department visit, hospital admission, or unscheduled physician's office visit for nebulizer or other urgent treatment)
  - Airflow limitation (e.g., after appropriate bronchodilator withheld, forced expiratory volume in 1 second [FEV1] less than 80% predicted [in the face of reduced FEV1/forced vital capacity [FVC] defined as less than the lower limit of normal])

**-AND-**

Yes  No Dupixent will be used in combination with **one** of the following:

a. **One** preferred high dose combination ICS/LABA

**-OR-**

b. Combination therapy including **both** of the following:

i. **One** preferred high-dose ICS medication

**-AND-**

ii. **One** additional preferred asthma controller medication [e.g., LABA or LTRA]

**-OR\_**

Yes  No Patient is currently on Dupixent therapy

**-AND-**

Yes  No Patient is not receiving Dupixent in combination with **any** of the following:

a. Anti-interleukin-5 therapy [e.g. Nucala (mepolizumab), Cinqair (reslizumab), Fasenra (benralizumab)]

b. Anti-IgE therapy [e.g. Xolair (omalizumab)]

**-AND-**

Yes  No Dose does not exceed the following:

a. Initial (one time ) dose: 600 mg

b. Maintenance dose 300 mg every other week

**Authorization will be issued for 6 months.**

### **Reauthorization**

**Dupixent** will be approved based on **all** of the following criteria:

Yes  No Patient continues to meet initial authorization criteria

**-AND-**

Yes  No Documentation of positive clinical response to Dupixent therapy as demonstrated by at least **one** of the following:

(a) Reduction in the frequency of exacerbations

(b) Decreased utilization of rescue medications

(c) Increase in percent predicted FEV1 from pretreatment baseline

(d) Reduction in severity or frequency of asthma-related symptoms (e.g., wheezing, shortness of breath, coughing, etc.)

(e) Reduction in systemic corticosteroid requirements

**-AND-**

Yes  No Demonstrated adherence to asthma controller therapy that includes either of the following:

a) ICS medication

**OR**

b) ICS + LABA or LTRA medication

**Reauthorization will be issued for 12 months.**