



Prior Authorization Criteria

Xolair® (omalizumab) Criteria FOR Nasal Polyps:

Xolair® (omalizumab) is an anti-IgE antibody FDA approved for add-on maintenance treatment of nasal polyps in adult patients 18 years of age and older with inadequate response to nasal corticosteroids.

ICD-10 code(s): _____

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

Xolair 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, otolaryngologist, or pulmonologist.
-AND-
- Yes No Diagnosis of nasal polyps
-AND-
- Yes No Two of the following symptoms for longer than 12 weeks in duration:
- a. nasal mucopurulent discharge
 - b. Nasal obstruction, blockage, or congestion
 - c. Facial pain, pressure, and/or fullness
 - d. Reduction or loss of sense of smell
- AND-
- Yes No Patient continues to be symptomatic after treatment of both of the following:
- One Intranasal corticosteroids (e.g. fluticasone, mometasone, triamcinolone)
- AND-
- One other therapy used in the management of nasal polyps (e.g. nasal saline irrigations, leukotriene modulators)
- OR-
- Yes No Patient has required systemic corticosteroids for nasal polyps in the previous two years
-OR-
- Yes No Patient has required prior sinus surgery
-AND-
- Yes No Patient will continue to receive Xolair as add-on maintenance therapy in combination with intranasal corticosteroids
-AND-

Yes No Patient is NOT receiving Xolair in combination with any of the following: Cinqair, Dupixent, Fasenra, Nucala, Tezspire.

Authorization will be issued for 6 months.

Reauthorization

Xolair 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 Xolair therapy

-AND-

Yes No Patient will continue to receive Xolair as add-on maintenance therapy in combination with intranasal corticosteroids

-AND-

Yes No Patient is NOT receiving Xolair in combination with any of the following: Cinqair, Dupixent, Fasenra, Nucala, Tezspire.

Reauthorization will be issued for 12 months.