ANTICOAGULANTS (INJECTABLE) PA SUMMARY

PREFERRED	Fragmin, Heparin, Innohep, Lovenox (brand)
NON-PREFERRED	Arixtra (brand), Enoxaparin (generic), Fondaparinux (generic)

LENGTH OF AUTHORIZATION: Varies

NOTE: If generic fondaparinux is approved, the PA will be entered for brand Arixtra.

PA CRITERIA:

For Arixtra (brand or generic)

- ❖ Approvable for the treatment of extensive superficial vein thrombosis
- ❖ Approvable for the prophylaxis of deep vein thrombosis (DVT) following hip fracture surgery, hip replacement, or knee replacement in members weighing 50kg or more when documentation is submitted of a history of heparin-induced thrombocytopenia (HIT) or any contraindications to the use of Lovenox
- ❖ Approvable for the prophylaxis of DVT following abdominal surgery in members weighing 50kg or more when documentation is submitted of a history of HIT or any contraindications to the use of Lovenox and unfractionated heparin (UFH)
- ❖ Approvable for the treatment or prophylaxis of DVT and/or pulmonary embolism (PE) when documentation is submitted of a history of HIT or any contraindications to the use of Lovenox for courses of 9 days or less; Longer courses may be authorized for pregnant members, cancer patients, or when documentation is submitted of an inability to take warfarin.

For Enoxaparin

Submit documentation of allergies, contraindications, drug-drug interactions, or show a history of intolerable side effects to the inactive ingredients in brand name Lovenox (preferred medication).

QLL CRITERIA FOR LOVENOX

❖ An authorization to exceed the QLL may be granted for pregnant members.

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling Catamaran at 1-866-525-5827.

PA and Appeal Process:

❖ For online access to the PA process please go to www.mmis.georgia.gov/portal, highlight the pharmacy link on the top right side of the page, and click on "prior approval process".

Quantity Level Limitations:

❖ For online access to the current Quantity Level Limits please go to www.mmis.georgia.gov/portal, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services Part II and select that manual.