



BETA ADRENERGIC AGONISTS PA SUMMARY

PREFERRED	Maxair Autohaler, Proventil HFA, Albuterol inhalation solution 0.5% (5 mg/ml) and 0.083% (2.5 mg/3ml), Metaproterenol sulfate inhalation solution
NON-PREFERRED	Accuneb inhalation solution, Albuterol inhalation solution (generic Accuneb) 0.021% (0.63 mg/3 ml) and 0.042% (1.25 mg/3 ml), Levalbuterol inhalation solution (generic Xopenex), Proair HFA, Ventolin HFA, Xopenex inhalation solution, Xopenex HFA

LENGTH OF AUTHORIZATION: 1 Year

NOTE: *No PA is required for Xopenex Inhaled Solution for members 8 years of age or younger. PA is required for all ages for Xopenex HFA and levalbuterol inhalation solution (generic Xopenex). If albuterol inhalation solution or levalbuterol inhalation solution is approved, the PA will be issued for the equivalent brand-name product, Accuneb or Xopenex.*

PA CRITERIA:

Criteria for Accuneb (brand or generic) and Xopenex inhalation solution (brand or generic)

- ❖ For members 9 years of age and older, member must have experienced intolerable side effects requiring the discontinuation of albuterol solution 0.5% or 0.083%

OR

- ❖ Member must have tried albuterol solution 0.5% or 0.083% and failed to reach the desired clinical endpoints.

Criteria for ProAir HFA or Ventolin HFA

- ❖ Physician must submit a written letter of medical necessity stating the reasons that Proventil HFA is not appropriate for the member.

Criteria for Xopenex HFA

- ❖ Member must have experienced ineffectiveness or intolerable side effects to Maxair or Proventil HFA

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.