

Clinical Policy: Anti-Allergy Ophthalmics

Reference Number: PA.CP.PST.03

Effective Date: 01/18

Last Review Date: 08/17

Line of Business: Medicaid

[Revision Log](#)

Description

The following are anti-allergy ophthalmics requiring step therapy: Iodoxamide (Alomide[®]) and nedocromil (Alocril[®]).

FDA approved indication

Anti-allergy ophthalmics are indicated for the treatment of various allergic ocular disorders such as allergic conjunctivitis, vernal conjunctivitis, vernal keratitis, and vernal keratoconjunctivitis.

Policy/Criteria

Provider must submit documentation (which may include office chart notes and lab results) supporting that member has met all approval criteria.

It is the policy of Pennsylvania Health and Wellness[®] that Alocril and Alomide are **medically necessary** when the following criteria are met:

I. Initial Approval Criteria

A. Electronic Step Therapy for Anti-Allergy Ophthalmics (must meet all):

1. Previous use of at least two of the following: ketotifen 0.025% ophthalmic solution, naphazoline with pheniramine ophthalmic solution, azelastine ophthalmic solution, or cromolyn 4% ophthalmic solution, unless contraindicated or clinically significant adverse effects are experienced;
2. Dose does not exceed 8 drops/eye/day.

Approval duration: 12 months

II. Continued Therapy

A. Electronic Step Therapy for Anti-Allergy Ophthalmics (must meet all):

1. Currently receiving medication via Pennsylvania Health and Wellness benefit or member has previously met initial approval criteria; or the Continuity of Care policy (PA.LTSS.PHAR.01) applies;
2. If request is for a dose increase, new dose does not exceed 8 drops/eye/day.

Approval duration: 12 months

III. Appendices/General Information

Appendix A: Abbreviation/Acronym Key

FDA: Food and Drug Administration

IV. Dosage and Administration

Drug	Dosing Regimen	Maximum Dose
Alocril	1-2 drops in each eye twice daily at regular intervals.	8 drops/day/eye

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Alomide	1-2 drops in affected eye(s) four times per day; should not be used for longer than 3 months.	8 drops/day/affected eye
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V. Product Availability

Drug	Availability
Alocril	2% ophthalmic drops, solution: 5 mL
Alomide	0.1% ophthalmic drops, solution: 10 mL

VI. Workflow Document

N/A

VII. References

1. Lodoxamide (Alomide[®]) Drug monograph. Clinical Pharmacology. Accessed April 4, 2017.
2. Nedocromil (Alocril[®]) Drug monograph. Clinical Pharmacology. Accessed April 4, 2017.
3. Azelastine (Optivar[®]) Drug monograph. Clinical Pharmacology. Accessed November 19, 2015.
4. Alcaftadine (Lastacaft[®]) Drug monograph. Clinical Pharmacology. Accessed November 19, 2015
5. Olopatadine (Pataday[®], Patanol[®]) Drug monograph. Clinical Pharmacology. Accessed November 19, 2015
6. Bepotastine (Bepreve[®]) Drug monograph. Clinical Pharmacology. Accessed November 19, 2015
7. Epinastine (Elestat[®]) Drug monograph. Clinical Pharmacology. Accessed November 19, 2015.
8. Emedastine (Emadine[®]) Drug monograph. Clinical Pharmacology. Accessed November 19, 2015.
9. American Optometric Association. Optometric clinical practice guideline: care of the patient with conjunctivitis. St. Louis, MO. November 2002. Available at <http://www.aoa.org/optometrists/tools-and-resources/clinical-care-publications/clinical-practice-guidelines?sso=y>. Accessed April 2017.
10. Bielory L. Ocular allergy guidelines: a practical treatment algorithm. *Drugs*. 2002; 62(11):1611-1634.

Reviews, Revisions, and Approvals	Date	P&T Approval Date
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