

Government Health Plan (GHP) of Puerto Rico

## **Authorization Criteria – Apixiban (Eliquis)**

**Managed by MCO**

### **Section I. Prior Authorization Criteria**

**A.** Physician documents the diagnosis on the prescription:

1. Non-valvular atrial fibrillation (ICD-10 I48.91)
2. Treatment of deep vein thrombosis (DVT) (ICD10: I82.409) and pulmonary embolism (PE) (ICD10: T81.72XA)
3. Reduction in the risk of recurrence of deep vein thrombosis (DVT) (ICD10: I82.409) and pulmonary embolism (PE) (ICD10: T81.72XA)
4. Prophylaxis of deep vein thrombosis (DVT) (ICD10: I82.409) which may lead to PE in patients undergoing knee or hip replacement surgery

**B.** Physician must document:

1. Patient does not present active pathological bleeding
2. Patient does not have a prosthetic heart valve
3. Recent (*no more than 30 days*) calculated value of estimated creatinine clearance (eClcr)
4. Non-valvular atrial fibrillation diagnosis, also document:
  - a. patient presents intolerance, contraindication or failed treatment (did not reach or maintained therapeutic INR, 2-3) with warfarin, **and**
  - b. patient has a CHADS2 score  $\geq 2$  **or** CHA2DS2-VASc score  $\geq 2$ , **or**
  - c. Patient has history of stroke, or TIA (ICD10:166.09, 166.19, 166.29, G49.9).

**C.** Therapy lengths to be approved:

1. Non-valvular atrial fibrillation: lifelong treatment
2. Provoked DVT (e.g. recent surgery, prolonged immobility): 3 months
3. Provoked proximal complicated DVT: 6 months
4. Unprovoked: 3 - 6 months. Therapy will be reassessed after six months

5. Provoked PE: 6 months - 1 year
6. Un-provoked PE: 6 months – 1 year. Therapy will be reassessed after one year
7. Prophylaxis for DVT/PE in patients undergoing knee or hip replacement surgery: 35 days.

## Section II. Appendix

**Table 2—Clinical Characteristics Composing the HAS-BLED Bleeding Risk Score**

Letter	Clinical Characteristic <sup>a</sup>	Points Awarded
H	Hypertension	1
A	Abnormal renal and liver function (1 point each)	1 or 2
S	Stroke	1
B	Bleeding	1
L	Labile INRs	1
E	Elderly	1
D	Drugs or alcohol (1 point each)	1 or 2

HAS-BLED = Hypertension, Abnormal renal/liver function, Stroke, Bleeding history or predisposition, Labile international normalized ratio, Elderly (> 65 years), Drugs/alcohol concomitantly; INR = international normalized ratio.

<sup>a</sup>See “Materials and Methods” for definitions of the clinical characteristics.

HAS-BLED Score	1 year Bleeding risk	Bleeds/100 pt-years
0	0.9%	1.13
1	3.4%	1.02
2	4.1%	1.88
3	5.8%	3.72
4	8.9%	8.70
5	9.1%	12.50
6 – 9	Insufficient data	Insufficient data

### Section III. References

1. Apixaban (Eliquis) package insert. Bristol Myers Squibb. Updated 09/2015
2. January; CT al 2014 AHA/ACC/HRS Atrial Fibrillation guideline.

### Section IV. Review Log

<b>Approved:</b>	<b>December 11, 2014</b>
<b>Revised:</b>	<b>June 30, 2016</b>

GPI	GPI NAME
83370010000320	Apixaban Tab 2.5 mg
83370010000330	Apixaban Tab 5 mg