

**Texas Prior Authorization Program
Clinical Criteria**

Drug/Drug Class**Lovaza (Omega-3-Acid Ethyl Esters) and Vascepa
(Icosapent Ethyl) Capsules****Clinical Criteria Information Included in this Document**

- **Drugs requiring prior authorization:** the list of drugs requiring prior authorization for this clinical criteria
- **Prior authorization criteria logic:** a description of how the prior authorization request will be evaluated against the clinical criteria rules
- **Logic diagram:** a visual depiction of the clinical criteria logic
- **Supporting tables:** a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes)
- **References:** clinical publications and sources relevant to this clinical criteria

Note: Click the hyperlink to navigate directly to that section.

Revision Notes

Updated to include formulary statement (The listed GCNS may not be an indication of TX Medicaid Formulary coverage. To learn the current formulary coverage, visit TxVendorDrug.com/formulary/formulary-search.) on each 'Drug Requiring PA' table



Lovaza (Omega-3-Acid Ethyl Esters) and Vascepa (Icosapent Ethyl) Capsules

Drugs Requiring Prior Authorization

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Drugs Requiring Prior Authorization	
Label Name	GCN
LOVAZA 1 GM CAPSULES	23929
VASCEPA 1 GM CAPSULE	33238



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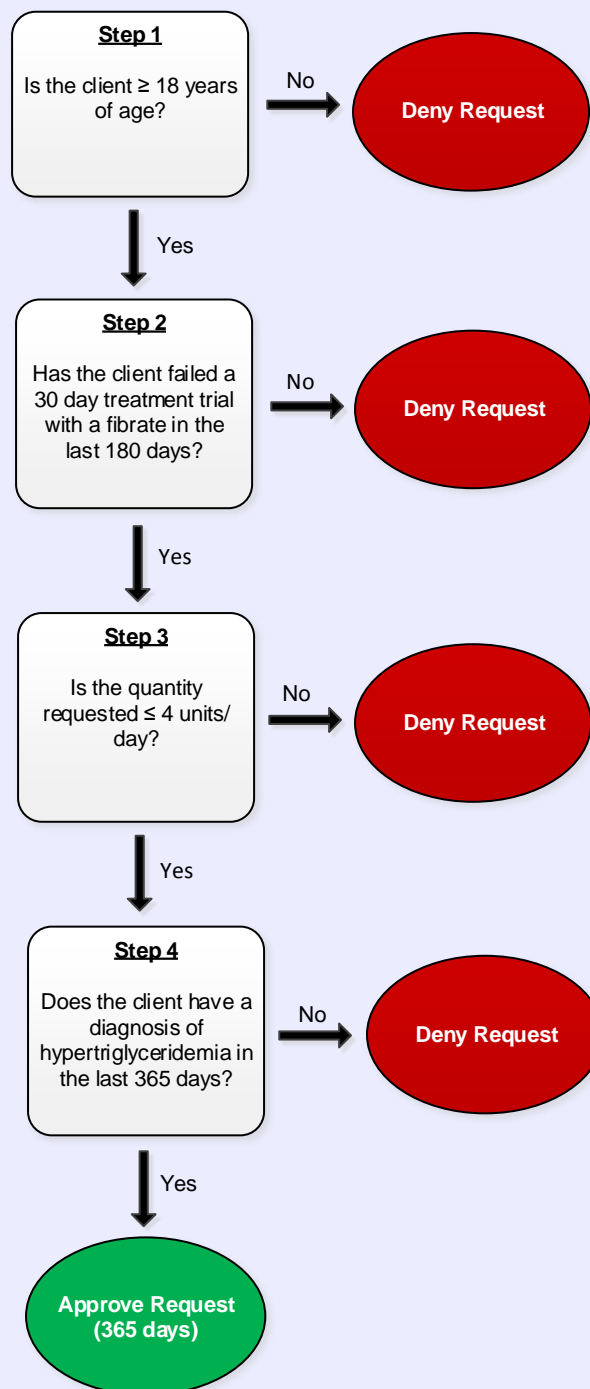
Clinical Criteria Logic

1. Is the client greater than or equal to (\geq) 18 years of age?
 Yes (Go to #2)
 No (Deny)
2. Has the patient failed a 30 day treatment trial with a fibrate in the last 180 days?
 Yes (Go to #3)
 No (Deny)
3. Is the quantity requested less than or equal to (\leq) 4 units per day?
 Yes (Go to #4)
 No (Deny)
4. Does the client have a diagnosis of hypertriglyceridemia in the last 365 days?
 Yes (Approve - 365 days)
 No (Deny)



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Clinical Criteria Logic Diagram





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Clinical Criteria Supporting Tables

Step 2 (claim for a fibrate) Required claims: 1 Look back timeframe: 180 days	
Label Name	GCN
ANTARA 30 MG CAPSULE	35559
ANTARA 90 MG CAPSULE	35563
FENOFIBRATE 145 MG TABLET	97003
FENOFIBRATE 48 MG TABLET	97002
FENOFIBRATE 67 MG CAPSULE	93446
FENOFIBRATE 134 MG CAPSULE	92504
FENOFIBRATE 200 MG CAPSULE	93437
FENOFIBRIC ACID DR 45 MG CAP	16104
FENOFIBRIC ACID DR 135 MG CAP	16105
FENOFIBRATE 54 MG TABLET	13266
FENOFIBRATE 160 MG TABLET	12595
FENOFIBRATE 43 MG CAPSULE	23922
FENOFIBRATE 130 MG CAPSULE	23923
FENOFIBRIC ACID 35 MG TABLET	27473
FENOFIBRIC ACID 105 MG TABLET	27485
FENOFIBRATE 50 MG CAPSULE	98784
FENOFIBRATE 150 MG CAPSULE	98785
FENOGLIDE 40 MG TABLET	99411
FENOGLIDE 120 MG TABLET	99412
GEMFIBROZIL 600 MG TABLET	25540
LIPOFEN 50 MG CAPSULE	98784
LIPOFEN 150 MG CAPSULE	98785
LOFIBRA 67 MG CAPSULE	93446
LOFIBRA 134 MG CAPSULE	92504
LOFIBRA 200 MG CAPSULE	93437
LOPID 600 MG TABLET	25540
TRICOR 48 MG TABLET	97002
TRICOR 145 MG TABLET	97003
TRIGLIDE 160 MG TABLET	28532
TRILIPIX DR 135 MG CAPSULE	16105
TRILIPIX DR 45MG CAPSULE	16104

Step 4 (diagnosis of hypertriglyceridemia)	
Required diagnosis: 1	
Look back timeframe: 365 days	
ICD-10 Code	Description
E781	PURE HYPERGLYCERIDEMIA



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Clinical Criteria References

1. Clinical Pharmacology [online database]. Tampa, FL: Elsevier/Gold Standard, Inc.; 2015. Available at www.clinicalpharmacology.com. Accessed on March 4, 2016.
2. Micromedex [online database]. Available at www.micromedexsolutions.com. Accessed on March 4, 2016.
3. Lovaza Prescribing Information. Research Triangle Park, NC. GlaxoSmithKline. May 2014.
4. 2015 ICD-9-CM Diagnosis Codes. 2015. Available at www.icd9data.com. Accessed on April 3, 2015.
5. 2015 ICD-10-CM Diagnosis Codes. 2015. Available at www.icd10data.com. Accessed on April 3, 2015.
6. American Medical Association data files. 2015 ICD-9-CM Diagnosis Codes. Available at www.commerce.ama-assn.org.
7. American Medical Association data files. 2015 ICD-10-CM Diagnosis Codes. Available at www.commerce.ama-assn.org.
8. Berglund L, Brunzell JD, Goldberg AC, et al. Evaluation and treatment of hypertriglyceridemia: an Endocrine Society clinical practice guideline. *J Clin Endocrinol Metab*. 2012 Sep;97(9):2969-89.
9. Eckel RH, Jakicic JM, Ard JD, et al. 2013 AHA/ACC guideline on lifestyle management to reduce cardiovascular risk: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. *J Am Coll Cardiol*. 2014 Jul 1;63(25 Pt B):2960-84.
10. Jellinger PS, Smith DA, Mehta AE, et al. AACE Task Force for Management of Dyslipidemia and Prevention of Atherosclerosis. American Association of Clinical Endocrinologists' guidelines for management of dyslipidemia and prevention of atherosclerosis. *Endocr Pract*. 2012 Mar-Apr;18(Suppl 1):1-78.

Publication History

The Publication History records the publication iterations and revisions to this document. Notes for the *most current revision* are also provided in the **Revision Notes** on the first page of this document.

Publication Date	Notes
06/05/2012	Initial publication and posting to website
08/10/2012	Removed "severe" from step 3 of clinical edit criteria logic
04/03/2015	Updated to include ICD-10s
05/20/2016	Updated Drugs Requiring PA to include Vascepa, page 2 Updated Clinical Edit Logic to include a trial of a fibrate, page 3 Updated Clinical Edit Logic Diagram to include a trial of a fibrate, page 4 Added Table 2, page 5 Updated References, page 7
03/29/2019	Updated to include formulary statement (The listed GCNS may not be an indication of TX Medicaid Formulary coverage. To learn the current formulary coverage, visit TxVendorDrug.com/formulary/formulary-search .) on each 'Drug Requiring PA' table