Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE tofacitinib 22 mg Extended Release (Xeljanz XR 22 mg)

Notes:

- Quantity Limits: Yes
- * Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

<u>Initiation (new start) criteria:</u> Non-formulary **tofacitinib 22 mg extended release** (Xeljanz XR 22 mg) will be covered on the prescription drug benefit when the following criteria are met:

- Prescriber is a gastroenterologist
- Patient has a diagnosis of ulcerative colitis
- Patient has tried and failed/intolerant to at least 1 of the following
 - Infliximab product (unless documented by prescriber that patient is unable to attend infusion appointments)
 - Adalimumab product (criteria based)
- Patient has had previous trial of tofacitinib immediate release (10 mg twice daily) with documented concerns about adherence to twice daily dosing
- Patient is not currently taking any other medications dosed more than one time a day

<u>Criteria for *new members* entering Kaiser Permanente already taking the medication who have not been reviewed previously:</u>

- Prescriber is a gastroenterologist
- Patient has a diagnosis of ulcerative colitis
- Patient has had previous trial of tofacitinib immediate release (10 mg twice daily) with documented concerns about adherence to twice daily dosing
- Patient is not currently taking any other medications dosed more than one time a day

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