Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

Methylnaltrexone injection (Relistor)

Notes:

• Quantity Limits: Yes

Initiation (new start) criteria and criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously: Non-formulary methylnaltrexone injection (Relistor) will be covered on the prescription drug benefit when the following criteria are met:

- 1. Patient has a diagnosis of opioid induced constipation with an active opioid prescription
 - Patient is at least 18 years old Prescriber is an Oncologist, Gastroenterologist, Hospice/Palliative Care clinician for a patient currently enrolled in Hospice or Palliative Care program, or after consultation with a Pain Management Specialist
 - Patient is unable to take ANY oral medications (or unable to use any oral laxatives through feeding tube)
 - Patient is intolerant to, has a contraindication to, or had an inadequate response to at least 2 weeks of scheduled doses of the following medications:
 - o Bisacodyl suppositories
 - Glycerin suppositories
 - o Enemas

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