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Topics Covered in This Issue

PREVENTION AND TREATMENT OF VIRAL INFLUENZA

Introduction

- The viral influenza season began in October, and it is important for all healthcare providers to play a role in proper prevention/vaccination and treatment of influenza to help reduce the heavy impact of viral influenza.
- Each year, influenza is responsible for millions of illnesses and medical visits, hundreds of thousands of hospitalizations and thousands of deaths.
- The Center for Disease Control and Prevention (CDC) has released their annual recommendations for influenza vaccination and has materials for viral influenza, including recommendations for epidemiology, prevention/vaccination, and treatment.
  - This information is regularly updated and can be found at www.cdc.gov/flu.

Prevention/Vaccination

- The CDC recommendations for the 2017-2018 flu season encourage all persons age ≥ 6 months, without contraindications, to receive an annual influenza vaccination. Providers are specifically encouraged to vaccinate patients at high risk of complications from influenza (listed below):
    - Those aged 6-59 months and ≥50 years
    - Persons with chronic pulmonary, cardiovascular, renal, hepatic, neurologic, hematologic, or metabolic disorders
    - Immunocompromised patients due to any cause
    - Women who are or will be pregnant during the influenza season
    - Residents of long-term care facilities
    - Pediatric patients on aspirin therapy
    - American Indians and Alaskan Natives
    - Persons with a BMI ≥40
    - Anyone in contact with people in the above listed populations

Treatment

- Antibiotic therapy is not effective for the treatment of the influenza virus and thus should only be initiated in patients when viral influenza has been ruled out via rapid test or other means.
- Treatment should only be done with neuraminidase inhibitors (listed below) as there is widespread resistance to amantadine among influenza A viruses.
    - Tamiflu (Oseltamivir): oral capsules and suspension
    - Relenza Diskhaler (zanamivir): inhaler
    - Rapivab (Peramivir): Intravenous injection
- The CDC recommends treatment with antiviral therapy for all individuals with confirmed or suspected influenza who have severe or complicated illness, require hospitalization, or are at high risk of complications from influenza (listed above in “Prevention/Vaccination”).
- The CDC recommends starting antiviral medication without waiting for laboratory confirmation. Outcomes are best when started within 48 hours of the appearance of symptoms, but they can be started even after this “window” has passed. Once antiviral treatment has begun, make sure the full 5-day course is completed, regardless of culture or rapid-test results.
- Regardless of whether pharmacological treatment is used, all patients with a known or suspected influenza infection should be advised to remain hydrated, undergo bed rest, and to limit contact with others until the infection resolves.

UPDATE TO THE PRIOR AUTHORIZATION CRITERIA FOR APPROVAL OF CHANTIX

Introduction

- Chantix is a nicotinic receptor partial agonist indicated for use as an aid to smoking cessation treatment. It is currently a covered medication under West Virginia Medicaid, but requires prior authorization approval.
- The prior authorization criteria for Chantix has been updated with the changes taking effect October 1st, 2017.
- Please note that combination nicotine replacement therapy (NRT) is covered by West Virginia Medicaid; however, NRT therapy may not be filled concurrently with Chantix.
- This updated criteria, and all other current prior authorization criteria are available at the West Virginia Medicaid prior authorization criteria page located at http://www.dhhr.wv.gov/bms/BMS%20Pharmacy/Pages/PA-Criteria.aspx

Prior Authorization Criteria Summary

- Chantix is only covered for patients that are 18 years of age and older who are currently enrolled in a smoking cessation program approved by the state.
- Patients must have first had at least a 30-day trial of either a NRT or Zyban (bupropion), and documentation indicating when therapy occurred must be included with the request.
    - Because a quit attempt is expected to consist of a relatively continuous transition between pharmacological agents, no more than 30 days must have lapsed between NRT and/or Zyban (bupropion) therapy prior to the request for Chantix.
        - Patients whose last trial with NRT and/or Zyban (bupropion) occurred greater than 30 days prior to the request for Chantix must undergo an additional trial with one of these medications, unless contraindicated.
- West Virginia Medicaid will cover the cost of only one quit attempt with Chantix every 365 days for patients who meet the above prior authorization criteria.
- For patients who meet this criteria, the initial prior authorization for Chantix will be approved for a duration of 90 days. An additional 90 days for maintenance therapy with Chantix is available if requested.
- Medicaid members are required to be enrolled in the Tobacco Cessation Quit Line which provides phone coaching to support smoking cessation.

  Medicaid members can call 1-800-QUIT-NOW (800-784-8669) or 1-877-966-8784 to speak to a Quitline Representative.

References

1. CDC. Frequently asked flu questions 2017-2018 influenza season. Available at: https://www.cdc.gov/flu/about/season/flu-season-2017-2018.htm. Accessed August 17, 2017.
2. CDC. Use of antivirals. Available at: https://www.cdc.gov/flu/professionals/antivirals/antiviral-use-influenza.htm#Box. Accessed August 17, 2017.
3. CDC. Prevention strategies for seasonal influenza in healthcare settings. Available at: https://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm. Accessed August 17, 2017.
4. Lexi-Comp drug monograph for Chantix (Reviewed 9/12/2017)
5. Chantix (varenicline) [prescribing information]. New York, NY: Pfizer Inc; December 2016.
6. UpToDate : Overview of Smoking Cessation Management in Adults (reviewed 9/12/2017).
7. UpToDate: Pharmacotherapy for Smoking Cessation in Adults (reviewed 9/12/2017)