

January 31, 2013

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GUPTA, SHASHI BALA MD  
4697 HARRISON ST.  
Bellaire, OH 439061338

**RE: Caring for Your Patients Using Crestor**

Dear Dr. GUPTA:

The West Virginia Medicaid Preferred Drug List (PDL) is changed as of January 1, 2013. While Crestor (rosuvastatin) is no longer a preferred statin agent, patients stabilized on Crestor (rosuvastatin) will be grandfathered until April 1, 2013. The preferred statins are generic atorvastatin, lovastatin, pravastatin and simvastatin and brand name Lescol and Lescol XL. Effective April 1, 2013, all patients will need to be changed to one of the preferred products or a prior authorization will be required in order for them to continue receiving Crestor.

The Adult Treatment Panel (ATP) III Guidelines consider lipid-lowering therapy to be part of treatment of patients with or at risk for cardiovascular disease.<sup>1</sup> If given at an appropriate dose, these guidelines do not endorse one statin over another for safety or efficacy. As illustrated by the table below, any of the HMG-CoA reductase inhibitors can safely lower LDL-C by the 30 percent required in most patients to reach goal.

Drug	Strength	Effect on LDL-C	Effect on HDL-C	Effect on Triglycerides
atorvastatin	10 mg	↓ 25-35%	↓0.1-↑9%	↓ 17-37%
	10-20 mg	↓ 36-45%		
	40 mg	↓ 46-50%		
	80 mg	↓ 51-60%		
fluvastatin (Lescol®)	20-40 mg	↓ <25%	↓3-↑9%	↓ 2.7-23%
	40-80 mg	↓ 25-35%		
	80 mg	↓ 36-45%		
fluvastatin XL (Lescol XL®)	80 mg	↓ 25-45%	↑7-11%	↓ 19-25%
lovastatin	10-20 mg	↓ <25%	↑3-10%	↓ 6-27%
	20-40 mg	↓ 25-35%		
	40-80 mg	↓ 36-45%		
pravastatin	10-20 mg	↓ <25%	↑2-12%	↓ 9-24%
	20-40 mg	↓ 25-35%		
	80 mg	↓ 36-45%		
rosuvastatin (Crestor®)	5-10 mg	↓ 36-45%	↑8-14%	↓ 10-35%
	10 mg	↓ 46-50%		
	10-40 mg	↓ 51-60%		
simvastatin	5 mg	↓ <25%	↑3-16%	↓ 9-34%
	5-20 mg	↓ 25-35%		
	20-80 mg	↓ 36-45%		
	80 mg	↓ 46-50%		

\*Based on a review of several controlled clinical trials.

Given that one statin is not superior to another, cost must be taken into account. The average cost per prescription for generic products like atorvastatin, simvastatin, pravastatin and lovastatin is \$7-\$22. However, the average cost per prescription for Crestor is over \$140. **As a result, the Bureau for Medical Services requests that providers evaluate the therapeutic appropriateness of Crestor® to determine if their patient may experience the same or better outcomes after a switch to one of the preferred products.**

For your convenience, a list of your patients with recent claims for Crestor (rosuvastatin) is attached to this letter. This notice may be copied and placed in your patient's chart as a reminder of the need to change this therapy. If you feel such a change would be inappropriate for your patient(s), a prior authorization will need to be obtained to continue prescribing Crestor. Information related to the West Virginia Medicaid PDL may be found at:

<http://www.dhhr.wv.gov/bms/Pharmacy/Pages/pdl.aspx>

We acknowledge that there may be clinical variables influencing an individual patient's management that are not apparent in claims data or that a patient may have been inadvertently identified as being under your care. We thank you for reviewing this information and caring for West Virginia Medicaid patients and welcome the opportunity to discuss any comments or concerns you may have about our quality management program. Please feel free to call our office at 1-866-923-7208 with questions or concerns.

Sincerely,

A handwritten signature in cursive script that reads "Lyle Henry MD".

Lyle Henry, MD, FACS,  
Medical Director

1. Grundy SM, Cleeman JI, Baird Merz CN, et al. Implications of recent clinical trials for the National Cholesterol Education Program Adult Treatment Panel III Guidelines. *Circulation*. 2004; 110:227-239.