Fiscal Year 2010 Annual Review of Elidel® and Protopic®

Oklahoma HealthCare Authority April 2011

Current Prior Authorization Criteria

- Clinical Diagnosis: short term and intermittent treatment for mild to moderate atopic dermatitis (eczema).
- The first 90 days of a 12 month period will be covered without a prior authorization.
- After the initial period, authorization will be granted with documentation of one trial of a tier-1 topical corticosteroid of six weeks duration within the past 90 days.
- Therapy will be approved only once each 90 day period to ensure appropriate short-term and intermittent utilization as advised by the FDA.
- Quantities will be limited to 30 grams for use on the face, neck, and groin, and 100 grams for all other areas. Available in 30,60 and 100 gram tubes.
- Authorizations will be restricted to those patients who are not immunocompromised.
- Age restrictions:

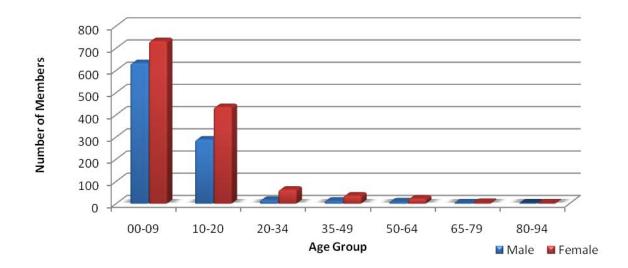
Elidel 1% ≥2 years of age
Protopic 0.03% ≥2 years of age
Protopic 0.1% ≥15 years of age (approved for adult-use only)

- Clinical Exceptions dordven beffe one dring in general brightness on traindication to tier-1 products.
 - Atopic dermatitis on the face or groin where physician does not want to use topical corticosteroids.
- Clinical Execution flow dermined to gist meeting age restriction:
 - ➤ If members need help getting to a dermatologist, please refer to case management for assistance.

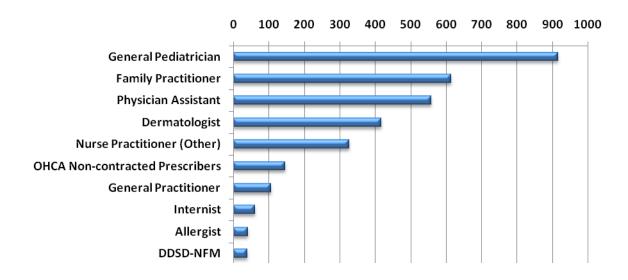
Utilization Comparison: Fiscal Year 2009 and 2010

Fiscal Year	Members	Claims	Total Paid	Paid/Claim	Per-Diem	Units	Days
2009	2,458	3,988	\$574,141.85	\$143.97	\$5.43	214,980	105,715
2010	2,253	3,365	\$515,079.29	\$153.07	\$4.97	176,050	103,690
% Change	-8.30%	-15.60%	-10.30%	6.30%	-8.50%	-18.10%	-1.90%
Change	-205	-623	-\$59,062.56	\$9.10	-\$0.46	-38,930	-2,025

Age and Gender FY 2010



Top Prescriber Specialty by Number of Claims FY 2010



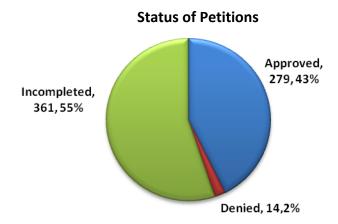
Utilization Details of Elidel/Protopic for Fiscal Year 2010

MEDICATION	CLAIMS	UNITS	DAYS	MEMBERS	PAID	CLAIMS/ MEMBER	PER- DIEM	% PAID
ELIDEL CRE 1%	2,299	119,630	69,892	1,588	\$318,334.46	1.45	\$4.55	61.80%
PROTOPIC OIN 0.03%	949	49,960	29,744	636	\$174,712.48	1.49	\$5.87	33.92%
PROTOPIC OIN 0.1%	117	6,460	4,054	86	\$22,032.35	1.36	\$5.43	4.28%
TOTALS	3,365	176,050	103,690	*2,253	\$515,079.29	1.49	\$4.97	100%

^{*}Total Number of Unduplicated Members

Prior Authorization Totals

There were a total of 654 petitions submitted for this PBPA category during fiscal year 2010. The following chart shows the status of the submitted petitions.



Recommendations

The College of Pharmacy does not recommend any changes to this category at this time.