

### **DRUG QUANTITY MANAGEMENT POLICY – PER RX**

#### **POLICY:** Proton Pump Inhibitors Drug Quantity Management Policy – Per Rx

Prescription	Products Targeted	Manufacturer	
Proton Pump	-		
Inhibitor			
Dexlansoprazole	Dexilant <sup>®</sup> delayed-release capsules, generic	Takeda	
Esomeprazole	Nexium <sup>®</sup> delayed-release capsules, generic	AstraZeneca	
	Nexium <sup>®</sup> delayed-release oral granules, generic		
	Esomeprazole strontium delayed-release capsules	Generic only	
	(obsolete 10/2022)		
Lansoprazole Prevacid <sup>®</sup> delayed-release capsules, generic		Takeda	
Prevacid <sup>®</sup> SoluTab <sup>®</sup> delayed-release orally			
	disintegrating tablets, generic		
Omeprazole	Omeprazole delayed-release capsules	Generic only	
	Prilosec <sup>®</sup> delayed-release oral granules	AstraZeneca	
Omeprazole and	Konvomep <sup>™</sup> oral suspension	Azurity	
sodium	Zegerid <sup>®</sup> capsules, generic Salix		
bicarbonate	Zegerid <sup>®</sup> powder for oral suspension, generic		
Pantoprazole			
Rabeprazole	zole Aciphex <sup>®</sup> delayed-release tablets, generic Eisai/Wo		
	Aciphex <sup>®</sup> Sprinkle <sup>™</sup> delayed-release capsules, generic	Aytu	

#### **Review Date:** 04/02/2025

#### **INSTRUCTIONS FOR USE**

The following Coverage Policy applies to health benefit plans administered by Cigna Companies. Certain Cigna Companies and/or lines of business only provide utilization review services to clients and do not make coverage determinations. References to standard benefit plan language and coverage determinations do not apply to those clients. Coverage Policies are intended to provide guidance in interpreting certain standard benefit plans administered by Cigna Companies. Please note, the terms of a customer's particular benefit plan document [Group Service Agreement, Evidence of Coverage, Certificate of Coverage, Summary Plan Description (SPD) or similar plan document] may differ significantly from the standard benefit plans upon which these Coverage Policies are based. For example, a customer's benefit plan document may contain a specific exclusion related to a topic addressed in a Coverage Policy. In the event of a conflict, a customer's benefit plan document always supersedes the information in the Coverage Policies. In the absence of a controlling federal or state coverage mandate, benefits are ultimately determined by the terms of the applicable benefit plan document. Coverage determinations in each specific instance require consideration of 1) the terms of the applicable benefit plan document in effect on the date of service; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Coverage Policies and; 4) the specific facts of the particular situation. Each coverage request should be reviewed on its own merits. Medical directors are expected to exercise clinical judgment where appropriate and have discretion in making individual coverage determinations. Where coverage for care or services does not depend on specific circumstances, reimbursement will only be provided if a requested service(s) is submitted in accordance with the relevant criteria outlined in the applicable Coverage Policy, including covered diagnosis and/or procedure code(s). Reimbursement is not allowed for services when billed for conditions or diagnoses that are not covered under this Coverage Policy (see "Coding Information" below). When billing, providers must use the most appropriate codes as of the effective date of the submission. Claims submitted for services that are not accompanied by covered code(s) under the applicable Coverage Policy will be denied as not covered. Coverage Policies relate exclusively to the administration of health benefit plans. Coverage Policies are not recommendations for treatment and should never be used as treatment quidelines. In certain markets, delegated vendor quidelines may be used to support medical necessity and other coverage determinations.

### Cigna National Formulary Coverage:

#### **Overview**

The FDA-approved indications for the proton pump inhibitors (PPIs) are in Table 1.

	Table 1.	FDA-Appro	oved Indications for the Oral Prescription Proton Pump Inhibitors. <sup>1-11</sup>
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Brand	Indications
(generic)	
Dexilant®	<ul> <li>Erosive esophagitis (short-term treatment)</li> </ul>
(dexlansoprazole	<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
delayed-release	<ul> <li>Gastroesophageal reflux disease</li> </ul>
capsules, generic)	
Nexium®	<ul> <li>Erosive esophagitis (short-term treatment)</li> </ul>
(esomeprazole	<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
magnesium	Gastroesophageal reflux disease
delayed-release	• <i>H. pylori</i> infection
capsules and	<ul> <li>NSAID-associated gastric ulcer, risk reduction</li> </ul>
delayed-release	<ul> <li>Pathological hypersecretory conditions (e.g., ZES)</li> </ul>
granules for oral	
suspension	
[packets], generic)	
Esomeprazole	Erosive esophagitis (short-term treatment)
strontium (no trade	Erosive esophagitis, healed (maintenance)
name)	Gastroesophageal reflux disease
	• <i>H. pylori</i> infection
	NSAID-associated gastric ulcer, risk reduction
	<ul> <li>Pathological hypersecretory conditions (e.g., ZES)</li> </ul>

## Table 1 (continued). FDA-Approved Indications for the Oral Prescription Proton Pump Inhibitors.<sup>1-11</sup>

Indications
<ul> <li>Duodenal ulcer, active (short-term treatment)</li> </ul>
<ul> <li>Duodenal ulcer, healed (maintenance)</li> </ul>
<ul> <li>Erosive esophagitis (short-term treatment)</li> </ul>
<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
<ul> <li>Gastric ulcer, active benign (short-term treatment)</li> </ul>
Gastroesophageal reflux disease
H. pylori infection
<ul> <li>NSAID-associated gastric ulcer, risk reduction</li> </ul>
<ul> <li>NSAID-associated gastric ulcer, treatment</li> </ul>
<ul> <li>Pathological hypersecretory conditions (e.g., ZES)</li> </ul>
Duodenal ulcer, active (short-term treatment)
• Erosive esophagitis (short-term treatment)
<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
<ul> <li>Gastric ulcer, active benign (short-term treatment)</li> </ul>
Gastroesophageal reflux disease
• <i>H. pylori</i> infection
<ul> <li>Pathological hypersecretory conditions (e.g., ZES)</li> </ul>
Benign gastric ulcer
<ul> <li>Reduction of risk of upper GI bleeding in critically ill patients</li> </ul>

(omeprazole and	
sodium bicarbonate	
for oral	
suspension)	
Zegerid <sup>®</sup>	<ul> <li>Duodenal ulcer, active (short-term treatment)</li> </ul>
(omeprazole and	<ul> <li>Erosive esophagitis (short-term treatment)</li> </ul>
sodium bicarbonate	<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
capsules and	<ul> <li>Gastric ulcer, active benign (short-term treatment)</li> </ul>
powder for oral	Gastroesophageal reflux disease
suspension,	• Gastrointestinal bleeding in critically ill patients, risk reduction (suspension
generic)	only)
Protonix®	<ul> <li>Erosive esophagitis (short-term treatment)</li> </ul>
(pantoprazole	<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
sodium delayed-	<ul> <li>Gastroesophageal reflux disease</li> </ul>
release tablets and	<ul> <li>Pathological hypersecretory conditions (e.g., ZES)</li> </ul>
oral suspension,	
generic)	
Aciphex®	<ul> <li>Duodenal ulcer, active (short-term treatment)</li> </ul>
(rabeprazole	<ul> <li>Erosive esophagitis (short-term treatment)</li> </ul>
sodium delayed-	<ul> <li>Erosive esophagitis, healed (maintenance)</li> </ul>
release tablets,	<ul> <li>Gastroesophageal reflux disease</li> </ul>
generic)	• <i>H. pylori</i> infection
	<ul> <li>Pathological hypersecretory conditions (e.g., ZES)</li> </ul>
Aciphex <sup>®</sup> Sprinkle <sup>™</sup>	
(rabeprazole	
sodium delayed-	
release capsules,	
generic)	
ZES – Zollinger-Ellis	on syndrome; ODT – Oral disintegrating tablet; NSAID – Nonsteroidal anti-

ZES – Zollinger-Ellison syndrome; ODT – Oral disintegrating tablet; NSAID – Nonsteroidal antiinflammatory drug.

#### **Dosing and Availability**

Refer to Drug Quantity Limit table below for dosing and availability of the PPIs.

#### **G**UIDELINES

Gastroesophageal Reflux Disease (GERD) and Erosive/Reflux Esophagitis The American College of Gastroenterology (ACG) guidelines on the treatment of GERD (2021) note that PPIs eliminate symptoms and heal esophagitis more frequently and more rapidly than the other agents (e.g., histamine<sub>2</sub> receptor antagonists [H<sub>2</sub>RAs]).<sup>12</sup> All seven of the available (at time of publication) PPIs (omeprazole, lansoprazole, rabeprazole, pantoprazole, esomeprazole, omeprazole/sodium bicarbonate, and dexlansoprazole) have been demonstrated to control GERD symptoms and to heal esophagitis when used at prescription strengths. The ACG guidelines also note that chronic PPI therapy is effective and appropriate for maintenance therapy of GERD in patients who continue to have symptoms after an 8-week course of PPI therapy and in patients with complications including erosive esophagitis and Barrett's esophagus. For optimal use, the ACG quidelines note that when giving PPIs once daily (QD), it is best to administer 30 to 60 minutes prior to meals and prior to the morning meal for most patients (with the exception of omeprazole-sodium bicarbonate [administer at bedtime for nighttime acid] and dexlansoprazole [administer at any time of the day]). For patients with partial response to QD therapy, tailored therapy with adjustment of dose timing and/or twice daily (BID) dosing should be considered in patients with night-time

symptoms, variable schedules, and/or sleep disturbance. BID dosing has also been shown to improve nighttime acid control.<sup>13</sup>

The American Gastroenterological Association (AGA) published a clinical practice update on the management of GERD in 2022.<sup>14</sup> The AGA position statement is similar to the ACG guidelines and indicates that PPIs are more effective than H<sub>2</sub>RAs. In addition, BID PPI therapy for patients with esophageal syndrome with an inadequate response to QD PPI therapy may improve outcomes.

#### Extraesophageal GERD

Several extraesophageal symptoms have been associated with GERD, including cough, laryngeal hoarseness, dysphonia, pulmonary fibrosis, asthma, dental erosions/caries, sinus disease, ear disease, post-nasal drip, and throat clearing. Patients with extraesophageal GERD may not complain of heartburn or reflux, and therefore, it is difficult to determine whether acid reflux is causing the symptoms. Laryngopharyngeal reflux (LPR) is an extraesophageal variant of GERD involving the backflow of stomach contents (acid) into the throat.<sup>15</sup> According to a clinical practice update on the diagnosis and management of extraesophageal GERD from the AGA (2023), in patients with extraesophageal GERD, a trial of a PPI, titrating up to BID for 8 to 12 weeks, is reasonable. Some patients may require maintenance treatment, at the lowest effective PPI dose.

#### Helicobacter pylori

The ACG guidelines for the management of *H. pylori* infection were updated in 2024.<sup>16</sup> Despite FDA-approval of various dual drug regimens, the ACG recommends use of triple or quadruple drug regimens for the management of *H. pylori* since these regimens are more effective. PPIs are a component of all of the first-line recommended regimens. Of note, some PPIs are supplied in combination kits with other medications for the treatment of *H. pylori* infections.

#### **Additional Information**

The intent of the drug quantity management on lower strength PPIs is dose consolidation. The highest strength dosage form for each product does not have a quantity limit. For example, if a drug is available in a 20 mg and 40 mg strength, only the 20 mg strength has a quantity limit and criteria. Patients are encouraged to take one 40 mg unit instead of two 20 mg units. The highest strengths of the proton pump inhibitors do not have quantity limits since it is clinically appropriate in certain patients, such as for acute healing of ulcers and patients with a hypersecretory condition (e.g., Zollinger-Ellison syndrome, endocrine adenoma, systemic mastocytosis), to take a dose above the highest strength. Over-thecounter PPIs are managed by plan design and are not subject to quantity limits under this program.

#### **POLICY STATEMENT**

This Drug Quantity Management program has been developed to promote dose consolidation of proton pump inhibitors. If the Drug Quantity Management rule is

not met for the requested medication at the point of service, coverage will be determined by the Criteria below. All approvals are provided for 1 year in duration. "One-time" approvals are provided for 30 days in duration.

Brand (generic)	FDA-Approved Dosing	Availability	Retail Maximum Quantity per Rx	Home Delivery Maximum Quantity per Rx
Dexiansoprazole	Patients $\geq 12$ years of age	30 mg	30 capsules	90 capsules
(dexlansoprazole delayed-release capsules,	<ul> <li>Healing of EE: 60 mg QD for up to 8 weeks.</li> <li>Maintenance of healed EE and</li> </ul>	delayed- release capsules	SU Capsules	90 capsules
<ul> <li>generic) relief of heartburn: 30 mg QD for 4 to 6 months.</li> <li>Symptomatic non-erosive GERD: 30 mg QD for 4 weeks.</li> <li><u>Note</u>: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules.</li> </ul>	60 mg delayed- release capsules	No quantity limit.	No quantity limit.	
Esomeprazole P	roducts	•		
Esomeprazole strontium delayed-release capsules (no trade name) [discontinued]	<ul> <li><u>Adults</u></li> <li><i>GERD</i>: 24.65 mg or 49.3 mg QD for 4 to 8 weeks.</li> <li><i>Risk Reduction of NSAID-</i> <i>associated gastric ulcer</i>: 24.65 mg or 49.3 mg QD for up to 6 months.</li> <li><i>H. pylori eradication</i>: 49.3 mg QD for 10 days, in combination with other agents</li> <li><i>Pathological hypersecretory</i> <i>conditions</i>: 49.3 mg BID.</li> <li><u>Note</u>: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible.</li> </ul>	49.3 mg delayed- release capsules	No quantity limit.	No quantity limit

#### **Drug Quantity Limits**

Brand	FDA-Approved Dosing	Availability	Retail	Home	
(generic)		Availability	Maximum Quantity per Rx	Delivery Maximum Quantity per Rx	
Esomeprazole	Products (continued)				
Nexium <sup>®</sup> (esomeprazole magnesium delayed-	Adults • Healing of EE: 20 mg to 40 mg QD for 4 to 8 weeks. • Maintenance of healing of EE: 20 mg QD (no studies beyond	20 mg delayed- release capsules	30 capsules	90 capsules	
release20 mg QD (no studies beyond 6 months)delayed-• Treatment of symptomatic	40 mg delayed- release capsules	No quantity limit.	No quantity limit.		
granules for oral suspension [packets],	<ul> <li>additional 4 weeks if symptoms do not resolve completely).</li> <li><i>Risk reduction of NSAID-</i> <i>associated gastric ulcer</i>: 20</li> </ul>	2.5 mg delayed- release granules	30 packets	90 packets	
generic)	<ul> <li>mg to 40 mg QD (data does not extend beyond 6 months).</li> <li><i>H. pylori eradication to reduce the risk of duodenal ulcer</i></li> </ul>	5 mg delayed- release granules	30 packets	90 packets	
recurrence (triple therapy): 40 mg QD in combination with other agents (for 10 days). Some studies used 20 mg BID	10 mg delayed- release granules	30 packets	90 packets		
	<ul> <li>in combination with other agents (for 7 to 10 days).</li> <li>Pathological hypersecretory conditions including Zollinger-</li> </ul>	<ul><li>agents (for 7 to 10 days).</li><li>Pathological hypersecretory conditions including Zollinger-</li></ul>	20 mg delayed- release granules	30 packets	90 packets
<ul> <li>conditions including Zollinger- Ellison syndrome: doses up to 240 mg/day have been used as long as clinically indicated.</li> <li><u>Patient's 12 to 17 years of age</u></li> <li><i>Healing of EE (≥ 1 year)</i>: 20 mg to 40 mg QD for 4 to 8 weeks.</li> <li><i>Treatment of symptomatic</i> <i>GERD</i>: 20 mg QD for 4 weeks.</li> <li><u>Patient's 1 year to 11 years</u></li> <li><i>Healing of EE/EE due to acid- mediated GERD</i>: 10 mg QD (if &lt; 20 kg) and 10 mg or 20 mg (if ≥ 20 kg) for 8 weeks.</li> <li><u>Treatment of symptomatic</u> <i>GERD</i>: 10 mg QD for 8 weeks.</li> <li><u>Treatment of EE due to acid- mediated GERD</u>: 10 mg QD (if 3 to 5 kg), 5 mg QD (if &gt; 5 kg to 7.5 kg to 12 kg).</li> </ul>	40 mg delayed- release granules	No quantity limit.	No quantity limit.		

Brand (generic)	Ity Limits (Continued) FDA-Approved Dosing	Availability	Retail Maximum Quantity per Rx	Home Delivery Maximum Quantity per Rx
Lansoprazole P				· • • ·
Prevacid <sup>®</sup> (lansoprazole delayed- release capsules, generic)	<ul> <li><u>Adults</u></li> <li><i>Duodenal ulcers</i>: 15 mg QD for 4 weeks as short-term treatment and ongoing for maintenance.</li> <li><i>Eradication of H. pylori to</i> <i>reduce the risk of duodenal</i></li> </ul>	15 mg delayed- release capsules (discontinued) 30 mg	30 capsules	90 capsules
Prevacid SoluTab® (lansoprazole	<i>ulcer recurrence</i> : 30 mg BID for 10 or 14 days as triple therapy in combination with	delayed- release capsules 15 mg	limit. 30 tablets	limit. 90 tablets
delayed- release ODT, generic)	other agents or 30 mg TID for 14 days as dual therapy in combination with another	delayed- release ODT		
generic)	<ul> <li>combination with another agent.</li> <li>Benign gastric ulcer: 30 mg QD for 8 weeks.</li> <li>Risk reduction of NSAID-associated gastric ulcer: 15 mg QD for up to 12 weeks.</li> <li>Healing of NSAID-associated gastric ulcer: 30 mg QD for 8 weeks.</li> <li>Short-term treatment of symptomatic GERD: 15 mg QD for up to 8 weeks.</li> <li>Short-term treatment of EE: 30 mg QD for up to 8 weeks.</li> <li>Short-term treatment of EE: 15 mg QD.</li> <li>Pathological hypersecretory conditions including Zollinger-Ellison syndrome: 60 mg QD.</li> <li>Patient's 1 to 11 years of age</li> <li>Symptomatic GERD and treatment of EE: 30 kg: 15 mg QD for up to 12 weeks.</li> <li>&gt; 30 kg: 30 mg QD for up to 12 weeks.</li> <li>Patient's 12 to 17 years of age</li> <li>Non-erosive GERD: 15 mg QD for up to 12 weeks.</li> <li>EE associated with symptomatic GERD: 30 mg QD for up to 8 weeks.</li> </ul>	30 mg delayed- release ODT	No quantity limit.	No quantity limit.

Brand	FDA-Approved Dosing	Availability	Retail	Home
(generic)			Maximum Quantity per Rx	Delivery Maximum Quantity per Rx
<b>Omeprazole P</b>	roducts			
omeprazole delayed- release capsules	Adults • Duodenal ulcers: 20 mg QD for 4 weeks; patients may require 4 more weeks.	10 mg delayed- release capsules	30 capsules	90 capsules
(generic only) Prilosec <sup>®</sup> (omeprazole	• Eradication of H. pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 10 days as triple therapy in combination with other	20 mg delayed- release capsules	30 capsules	90 capsules
magnesium delayed- release oral suspension)	agents or 40 mg QD for 14 days as dual therapy in combination with another	40 mg delayed- release capsules	No quantity limit	No quantity limit
	agent. • Active benign gastric ulcer: 40 mg QD for 4 to 8 weeks. • Symptomatic GERD: 20 mg QD for up to 4 weeks.	2.5 mg delayed- release oral suspension packets	60 packets	180 packets
Omenrazele a	<ul> <li>EE due to acid-mediated GERD: 20 mg QD for 4 to 8 weeks.</li> <li>Maintenance healing of EE due to acid-mediated GERD: 20 mg QD.</li> <li>Pathological hypersecretory conditions: 60 mg QD as long as clinically indicated.</li> <li>Patient's 1 to 16 years of age</li> <li>Symptomatic GERD, treatment of EE due to acid- mediated GERD, and maintenance healing of EE due to acid-mediated GERD::</li> <li>5 kg to &lt; 10 kg: 5 mg QD for 4 to 8 weeks (12 months for maintenance).</li> <li>10 kg to &lt; 20 kg: 10 mg QD for 4 to 8 weeks.</li> <li>≥ 10 kg: 20 mg QD for 4 to 8 weeks.</li> <li>Patient's 1 month to &lt; 1 year of age</li> <li>Treatment of EE due to acid- mediated GERD: 2.5 mg QD (if 3 kg to &lt; 5 kg), 10 mg QD (if 5 kg to &lt; 10 kg), or 10 mg QD (if ≥ 10 kg) for up to 6 weeks.</li> </ul>	10 mg delayed- release oral suspension packets	30 packets	90 packets
Konvomep <sup>®</sup>	Adults	90 mL kit (2	90 mL (1 kit)	90 mL (1 kit)
(omeprazole and sodium	Benign gastric ulcer: 40 mg     QD for 4 to 8 weeks.	mg omeprazole/84		

bicarbonate for oral	• Reduction of risk of upper GI bleeding in critically ill patients	mg Na bicarb per mL)		
suspension)	40 mg initially, followed by 40 mg 6 to 8 hours later, then 40 mg QD thereafter for a total of 14 days.	150 mL kit (2 mg omeprazole/84 mg Na bicarb per mL)	150 mL (1 kit)	150 mL (1 kit)
		300 mL kit (2 mg omeprazole/84 mg Na bicarb per mL)	600 mL (2 kits)	600 mL (2 kits)

Brand (generic)	FDA-Approved Dosing	Availability	Retail Maximum	Home Delivery
(3)			Quantity per Rx	Maximum Quantity per Rx
	d Sodium Bicarbonate Products			
Zegerid <sup>®</sup> (omeprazole and sodium	<u>Adults</u> • Active duodenal ulcer: 20 mg QD for 4 weeks; some patients	20 mg/1,100 mg capsules 40 mg/1,100	30 capsules No quantity	90 capsules No quantity
bicarbonate	may require an additional 4	mg capsules	limit.	limit.
capsules and powder for oral suspension, generic)	<ul> <li>weeks.</li> <li>Active benign gastric ulcer: 40 mg QD for 4 to 8 weeks.</li> <li>Symptomatic GERD: 20 mg QD for up to 4 weeks.</li> </ul>	20 mg/1,680 mg packets of powder for oral suspension	30 packets	90 packets
	<ul> <li><i>EE</i> due to acid-mediated GERD: 20 mg QD for 4 to 8 weeks.</li> <li><i>Maintenance healing of EE due</i> to acid-mediated GERD: 20 mg QD.</li> <li><i>Reduction of risk of upper GI</i> bleeding in critically ill patients (40 mg oral suspension only): 40 mg initially, followed by 40 mg 6 to 8 hours later and 40 mg QD thereafter for 14 days.</li> </ul>	40 mg/1,680 mg packets of powder for oral suspension	No quantity limit.	No quantity limit.
Pantoprazole P		I	I	
Protonix <sup>®</sup> (pantoprazole sodium delayed-	Adults • EE associated with GERD: 20 mg QD for up to 8 weeks. • Maintenance healing of EE: 40	20 mg delayed- release tablets	30 tablets	90 tablets
release tablets and oral suspension, generic)	<ul> <li>mg QD.</li> <li>Pathological hypersecretory conditions: 40 mg BID.</li> <li>Patients ≥ 5 years to 17 years of</li> </ul>	40 mg delayed- release tablets	No quantity limit.	No quantity limit.
	age • EE associated with GERD: ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks.	40 mg packets of delayed- release granules for oral suspension	No quantity limit.	No quantity limit.
Rabeprazole P	roducts			

Aciphex <sup>®</sup> (rabeprazole sodium delayed- release tablets, generic)	<ul> <li><u>Adults</u></li> <li><u>Healing of erosive or ulcerative</u> <i>GERD</i>: 20 mg QD for 4 to 8 weeks.</li> <li><u>Maintenance healing of erosive</u> or ulcerative GERD: 20 mg QD (studied for 12 months).</li> <li><u>Symptomatic GERD</u>: 20 mg QD for 4 weeks.</li> <li><u>Healing of duodenal ulcers</u>: 20 mg QD after morning meal for up to 4 weeks.</li> <li><u>Eradication of H. pylori to</u> reduce the risk of duodenal ulcer recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents.</li> <li><u>Pathological hypersecretory</u></li> </ul>	20 delayed- release tablets	mg	No quantity limit.	No quantity limit.
	for 7 days as triple therapy in combination with other agents.				

Brand (generic)	FDA-Approved Dosing	Availabilit	ty	Retail Maximum Quantity per Rx	Home Delivery Maximum Quantity per Rx		
Rabeprazole Products (continued)							
Aciphex <sup>®</sup> Sprinkle <sup>™</sup> (rabeprazole sodium	<ul> <li>Patients 1 to 11 years of age</li> <li>Weight &lt; 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may</li> </ul>	5 n delayed- release capsules	ng	30 capsules	90 capsules		
delayed- release capsules, generic)	<ul> <li>increase to 10 mg QD.</li> <li>Weight ≥ 15 kg: 10 mg QD for up to 12 weeks.</li> <li><u>Note</u>: If a larger dose is required, the patient should be referred to the 20 mg tablet.</li> </ul>	10 r delayed- release capsules (branded generic)	ng	30 capsules	90 capsules		

QD – Once daily; EE – Erosive esophagitis; GERD – Gastroesophageal reflux disease; NSAID – Nonsteroidal anti-inflammatory drug; BID – Twice daily; ODT – Oral disintegrating tablet; GI – Gastrointestinal.

*Proton Pump Inhibitors Drug Quantity Management Policy – Per Rx* product(s) is(are) covered as medically necessary when the following criteria is(are) met. Any other exception is considered not medically necessary.

#### CRITERIA

#### **Dexlansoprazole Products**

Dexlansoprazole 30 mg delayed-release capsules (Dexilant, generic)

 If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

<u>Note</u>: This override provides for 30 mg twice daily dosing.

**2.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

#### **Esomeprazole Products**

Nexium 2.5 mg packets of delayed-release granules for oral suspension

 If the patient is < 1 year of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery. <u>Note</u>: This override provides for 2.5 mg twice daily dosing.

Nexium 5 mg packets of delayed-release granules for oral suspension

 If the patient is ≤ 11 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery. <u>Note</u>: This override provides for 5 mg twice daily dosing.

Esomeprazole magnesium 10 mg packets of delayed-release granules for oral suspension (Nexium, generic)

 If the patient is ≤ 17 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery. <u>Note</u>: This override provides for 10 mg twice daily dosing.

Esomeprazole magnesium 20 mg packets of delayed-release granules for oral suspension (Nexium, generic)

- If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery. Note: This override provides for 20 mg twice daily dosing.
- If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery.

Esomeprazole magnesium 20 mg delayed-release capsules (Nexium, generic)

 If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

<u>Note</u>: This override provides for 20 mg twice daily dosing.

2. If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

#### Lansoprazole Products

Lansoprazole 15 mg delayed-release capsules (Prevacid, generic)

- 1. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.
- **2.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

# Lansoprazole 15 mg delayed-release orally-disintegrating tablets (Prevacid SoluTab, generic)

- **1.** If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 tablets per dispensing at retail or 180 tablets per dispensing at home delivery.
- **2.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 tablets per dispensing at retail or 180 tablets per dispensing at home delivery.

#### **Omeprazole Products**

Prilosec 2.5 mg delayed-release oral suspension packets

 If the patient is ≤ 16 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 120 packets per dispensing at retail or 360 packets per dispensing at home delivery. Note: This override provides for 2.5 mg or 5 mg twice daily dosing.

#### Prilosec 10 mg delayed-release oral suspension packets

 If the patient is taking a dose that does not correspond to a commerciallyavailable dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 packets at retail or 270 packets at home delivery.

<u>Note</u>: An example of this situation is a patient receiving 30 mg once daily (three packets per day), a quantity of 90 packets per dispensing at retail or 270 packets per dispensing at home delivery would be approved.

- If the patient is ≤ 16 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery. Note: This override provides for 10 mg twice daily dosing.
- **3.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery.

#### Omeprazole 10 mg delayed-release capsules

 If the patient is taking a dose that does not correspond to a commerciallyavailable dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 capsules at retail or 270 capsules at home delivery. <u>Note</u>: For example, if a patient is receiving 30 mg once daily (three capsules per day), a quantity of 90 capsules per dispensing would be approved at retail or 270 capsules per dispensing at home delivery.

- If the patient is ≤ 16 years of age and according to the prescriber, the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery. Note: This override provides for 10 mg twice daily dosing.
- **3.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

#### Omeprazole 20 mg delayed-release capsules

- If the patient has a hypersecretory condition, (e.g., Zollinger-Ellison syndrome, endocrine adenomas, or systemic mastocytosis), approve 90 capsules per dispensing at retail or 270 capsules per dispensing at home delivery. <u>Note</u>: If a larger dose is required, the patient should be referred to the 40 mg prescription omeprazole capsule.
- If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.
  - <u>Note</u>: This override provides for 20 mg twice daily dosing.
- **3.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.
- **4.** If the patient has an ulcer caused by *H. pylori*, approve a one-time override of 46 capsules at retail or home delivery.
- **5.** If the patient is taking a dose that does not correspond to a commerciallyavailable dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 tablets at retail or 270 tablets at home delivery.

<u>Note</u>: An example of this would be if a patient is receiving 60 mg once daily (three tablets per day), a quantity override for 90 capsules per dispensing would be approved at retail or 270 capsules per dispensing per dispensing at home delivery.

#### **Omeprazole and Sodium Bicarbonate Products**

Konvomep 2 mg/84 mg per mL Kits (90 mL, 150 mL, and 300 mL) No overrides recommended.

Omeprazole and sodium bicarbonate 20 mg/1,100 mg capsules (Zegerid, generic)

 If the patient has a hypersecretory condition (e.g., Zollinger-Ellison syndrome, endocrine adenomas, systemic mastocytosis), approve 90 capsules per dispensing at retail or 270 capsules per dispensing at home delivery). <u>Note</u>: If a larger dose of omeprazole and sodium bicarbonate (Zegerid, generic) is required, the patient should be referred to the 40 mg/1,100 mg capsules. **2.** If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

<u>Note</u>: This override provide for 20 mg/1,100 mg twice daily dosing.

**3.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

<u>Omeprazole and sodium bicarbonate 20 mg/1,680 mg oral suspension (Zegerid, generic)</u>

- If the patient has a hypersecretory condition (e.g., Zollinger-Ellison syndrome, endocrine adenomas, systemic mastocytosis), approve 90 packets per dispensing at retail or 270 packets per dispensing at home delivery. <u>Note</u>: If a larger dose of omeprazole and sodium bicarbonate (Zegerid, generic) is required, the patient should be referred to the 40 mg/1,680 mg packets.
- **2.** If according to the prescriber the patient's symptoms are not controlled by once daily, approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery.

<u>Note</u>: This override provides for 20 mg/1,680 mg twice daily dosing.

**3.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 packets per dispensing at retail or 180 packets per dispensing at home delivery.

#### **Pantoprazole Products**

Pantoprazole 20 mg delayed-release tablets (Protonix, generic)

 If the patient is taking a dose that does not correspond to a commerciallyavailable dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 tablets at retail or 270 tablets at home delivery.

<u>Note</u>: An example of this would be if a patient is receiving 60 mg once daily (three tablets per day), a quantity override for 90 tablets at retail or 270 tablets at home delivery would be approved.

- **2.** If the patient is  $\geq$  5 years of age and according to the prescriber the patient's symptoms are not controlled with once daily dosing, approve 60 tablets per dispensing at retail or 180 tablets per dispensing at home delivery.
- **3.** If the patient has extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux), approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

#### **Rabeprazole Products**

Aciphex Sprinkle 5 mg delayed-release capsules

 If the patient is ≤ 11 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.

Rabeprazole 10 mg delayed release capsules (Aciphex Sprinkle, branded generic)

- If the patient is ≤ 11 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing at retail or 180 capsules per dispensing at home delivery.
- **2.** If the patient is unable to swallow a 20 mg rabeprazole delayed-release tablet (Aciphex, generic), approve the requested quantity per dispensing, not to exceed 180 capsules at retail or 540 capsules at home delivery.

#### References

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- Aciphex<sup>®</sup> Sprinkle<sup>™</sup> delayed-release capsules [prescribing information]. Englewood, CO: Aytu; November 2020.
- 3. Dexilant<sup>®</sup> delayed-release capsules [prescribing information]. Lexington, MA: Takeda; July 2023.
- 4. Nexium<sup>®</sup> delayed-release capsules/delayed-release oral granules [prescribing information]. Wilmington, DE: AstraZeneca; July 2023.
- 5. Esomeprazole strontium delayed-release capsules [prescribing information]. Glasgow, KY: Amneal; March 2022.
- 6. Prevacid<sup>®</sup>/Prevacid<sup>®</sup> SoluTab<sup>™</sup> delayed-release capsules/delayed-release orally disintegrating tablets [prescribing information]. Deerfield, IL: Takeda; August 2023.
- 7. Prilosec<sup>®</sup> delayed-release oral granules [prescribing information]. Wilmington, DE: AstraZeneca; July 2023.
- 8. Omeprazole delayed-release capsules [prescribing information]. Bachupally, India: Dr. Reddy's; April 2023.
- 9. Konvomep<sup>™</sup> oral suspension [prescribing information]. Woburn, MA: Azurity; August 2022.
- 10. Protonix<sup>®</sup> delayed-release tablets/delayed-release oral suspension [prescribing information]. Philadelphia, PA: Wyeth; July 2023.
- 11. Zegerid<sup>®</sup> powder for oral suspension/capsules [prescribing information]. Bridgewater, NJ: Salix; July 2023.
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- 13. Johnson DA, Katz PO. Nocturnal gastroesophageal reflux disease: issues, implications, and management strategies. *Rev Gastroenterol Disord.* 2008; 8:98-108.
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- 15. Chen JW, Vela MF, Peterson KA, et al. AGA clinical practice update on the diagnosis and management of extraesophageal gastroesophageal reflux disease: expert review. Clin Gastroenterol Hepatol. 2023;21(6):1414-1421.
- 16. Chey WD, , Howden CW, Moss SF, et al. ACG Clinical Guideline: Treatment of *Helicobacter pylori* infection. *Am J Gastroenterol*. 2024;119(9):1730-1753.

HISTORY		
Type of	Summary of Changes	Review
Revision		Date
Early Annual Revision	Policy was updated to reflect the existing quantity limits when a product is obtained via home delivery.	03/22/2023
	Konvomep (omeprazole and sodium bicarbonate 2 mg/84 mg per mL oral suspension; 90 mL kit): A new quantity limit of 1 kit (90 mL) per dispensing at retail and home delivery was added to the policy. No clinical overrides apply.	
	Konvomep (omeprazole and sodium bicarbonate 2 mg/84 mg per mL oral suspension; 150 mL kit): A new quantity limit of 1 kit	

	(150 mL) per dispensing at retail and home delivery was added to the policy. No clinical overrides apply.	
	Konvomep (omeprazole and sodium bicarbonate 2 mg/84 mg per mL oral suspension; 300 mL kit): A new quantity limit of 2 kits (600 mL) per dispensing at retail and home delivery was added to the policy. No clinical overrides apply.	
Annual Revision	Throughout the policy, "laryngopharyngeal reflux" was changed to "extraesophageal gastroesophageal reflux disease (including laryngopharyngeal reflux)".	04/19/2024
Annual Revision	Policy Statement was clarified to note that "one-time" approvals are provided for 30 days in duration.	04/02/2025

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