DRUG QUANTITY MANAGEMENT POLICY – PER RX

POLICY: Pulmonary Arterial Hypertension – Orenitram Drug Quantity Management Policy – Per Rx
- Orenitram® (treprostinil extended-release tablets – United Therapeutics)

REVIEW DATE: 03/22/2023

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. 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 GUIDELINES. IN CERTAIN MARKETS, DELEGATED VENDOR GUIDELINES MAY BE USED TO SUPPORT MEDICAL NECESSITY AND OTHER COVERAGE DETERMINATIONS.

CIGNA NATIONAL FORMULARY COVERAGE:

OVERVIEW

Orenitram, a prostacyclin mimetic, is indicated for the treatment of **pulmonary arterial hypertension** (PAH) World Health Organization (WHO) Group 1 to delay disease progression and to improve exercise capacity.[1]

Dosing

The recommended starting dose of Orenitram is 0.125 mg three times daily (TID) with food, taken approximately 8 hours apart or 0.25 mg twice daily (BID) with food, taken approximately 12 hours apart.[1] The dose should be titrated by 0.125 mg TID or 0.25 mg or 0.5 mg BID not more frequently than every 3 or 4 days. The maximum dose is determined by tolerability. The mean dose in a controlled clinical trial at Week 12 was 3.4 mg BID. In another investigation, at Week 60, the median dose of Orenitram was approximately 5 mg TID. Maximum doses investigated were 12 mg BID in a 12-week blinded trial and up to 21 mg BID in an open-label long-term investigation.

Consider a slower titration if dose increments are not tolerated.[1] If the patient experiences intolerable adverse events (AEs), reduce the dose in increments of

0.125 mg TID or 0.25 BID. Avoid abrupt discontinuation. Orenitram tablets should be swallowed whole; do not crush, split, or chew.

If the patient is transitioning from subcutaneous (SC) or intravenous (IV) treprostinil, decrease the dose of SC or IV Remodulin, while simultaneously increasing the dose of Orenitram up to 6 mg per day (2 mg TID) if tolerated.[1] The Prescribing Information provides an equation to estimate the target total daily dose of Orenitram in mg using a patient's dose of IV or SC treprostinil and weight.

If the patient has mild hepatic impairment, the recommended initial Orenitram dose is 0.125 mg BID with 0.125 mg BID dose increases not more frequently than every 3 to 4 days.[1] The use of Orenitram is not recommended in patients with moderate hepatic impairment and is contraindicated in patients with severe hepatic impairment.

If Orenitram is co-administered with strong cytochrome P450 (CYP)2C8 inhibitors (e.g., gemfibrozil), the recommended initial dose is 0.125 mg BID with 0.125 mg BID dose increases not more frequently than every 3 to 4 days.[1]

Any missed doses of Orenitram should be taken as soon as possible.[1] If a patient misses two or more doses, restart at a lower dose and re-titrate. In the event of a planned, short-term Orenitram treatment interruption, consider a temporary infusion of SC or IV treprostinil.

Availability

Orenitram is available as 0.125 mg, 0.25 mg, 1 mg, 2.5 mg, and 5 mg extended-release tablets in bottles of 10 and 100 tablets.[1] Three titration kits are also available (Table 1).

Table 1. Orenitram Titration Kits.[1]

Titration Kit	Blister Configurations
Month 1 (4 weekly cartons)	Seven daily wallet blister packs, each in a weekly carton containing the following: • Week 1 (21 x 0.125 mg tablets) • Week 2 (42 x 0.125 mg tablets) • Week 3 (21 x 0.125 mg tablets and 21 x 0.25 mg tablets) • Week 4 (42 x 0.125 mg tablets and 21 x 0.25 mg tablets)
Month 2 (4 weekly cartons)	Seven daily wallet blister packs, each in a weekly carton containing the following: • Week 5 (21 x 0.125 mg tablets and 42 x 0.25 mg tablets) • Week 6 (42 x 0.125 mg tablets and 42 x 0.25 mg tablets) • Week 7 (21 x 0.125 mg tablets and 63 x 0.25 mg tablets) • Week 8 (42 x 0.125 mg tablets and 63 x 0.25 mg tablets)
Month 3 (4 weekly cartons)	Seven daily wallet blister packs, each in a weekly carton containing the following: • Week 9 (21 x 0.125 mg tablets and 21 x 1 mg tablets) • Week 10 (42 x 0.125 mg tablets and 21 x 1 mg tablets) • Week 11 (21 x 0.125 mg tablets, 21 x 0.25 mg tablets, and 21 x 1 mg tablets) • Week 12 (42 x 0.125 mg tablets, 21 x 0.25 mg tablets, and 21 x 1 mg tablets)

POLICY STATEMENT

This Drug Quantity Management program has been developed to promote the safe, effective, and economic use of Orenitram. 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 will be provided for 1 year in duration.

Drug Quantity Limits

Product	Strength and Form	Retail Maximum Quantity per Rx	Home Delivery Maximum Quantity per Rx
Orenitram® (treprostinil extended-release tablets)	Month 1 Titration Kit	168 tablets (1 kit)	168 tablets (1 kit)
	Month 2 Titration Kit	336 tablets (1 kit)	336 tablets (1 kit)
	Month 3 Titration Kit	252 tablets (1 kit)	252 tablets (1 kit)
	0.125 mg extended-release tablets	90 tablets	270 tablets
	0.25 mg extended-release tablets	90 tablets	270 tablets
	1 mg extended-release tablets	90 tablets	270 tablets
	2.5 mg extended-release tablets	90 tablets	270 tablets
	5 mg extended-release tablets	90 tablets	270 tablets

Pulmonary Arterial Hypertension – Orenitram 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

Orenitram 0.125 mg extended-release tablets

1. If the patient's dose is being titrated using the requested product, approve the quantity requested, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.
2. If the patient requires a dose of more than 0.375 mg per day approve the requested quantity, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.

Orenitram 0.25 mg extended-release tablets

1. If the patient's dose is being titrated using the requested product, approve the quantity requested, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.
2. If the patient requires a dose of more than 0.75 mg per day, approve the requested quantity, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.

Orenitram 1 mg extended-release tablets

1. If the patient's dose is being titrated using the requested product, approve the quantity requested, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.
2. If the patient requires a dose of more than 3 mg per day, approve the requested quantity, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.

Orenitram 2.5 mg extended-release tablets

1. If the patient's dose is being titrated using the requested product, approve the quantity requested, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.
2. If the patient requires a dose of more than 7.5 mg per day, approve the requested quantity, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.

Orenitram 5 mg extended-release tablets

1. If the patient's dose is being titrated using the requested product, approve the quantity requested, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.
2. If the patient requires a dose of more than 15 mg per day, approve the requested quantity, not to exceed a 30-day supply per dispensing at retail or a 90-day supply per dispensing at home delivery.

Orenitram Titration Kits (Month 1 kit, Month 2 kit, and Month 3 kit)
No exceptions.

REFERENCES

1. Orenitram® extended-release tablets [prescribing information]. Research Triangle Park, NC: United; February 2023.

HISTORY

Type of Revision	Summary of Changes	Review Date
New Policy	--	08/10/2022
Early Annual Revision	**Orenitram Month 1 Titration Kit**: A new quantity limit of 1 kit (168 tablets) per dispensing at retail and home delivery was added to the policy. No clinical exceptions apply. **Orenitram Month 2 Titration Kit**: A new quantity limit of 1 kit (336 tablets) per dispensing at retail and home delivery was added to the policy. No clinical exceptions apply. **Orenitram Month 3 Titration Kit**: A new quantity limit of 1 kit (252 tablets) per dispensing at retail and home delivery was added to the policy. No clinical exceptions apply.	03/22/2023