

Clinical Pharmacy Program Guidelines for Zontivity

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| Program | Prior Authorization |
| Medication | Zontivity (vorapaxar) |
| Issue Date | 9/2014 |
| Pharmacy and Therapeutics Approval Date | 8/2017 |
| Effective Date | 10/2017 |

1. Background:

Zontivity (vorapaxar) is indicated for the reduction of thrombotic cardiovascular events in patients with a history of myocardial infarction (MI) or with peripheral arterial disease (PAD). Zontivity has been shown to reduce the rate of a combined endpoint of cardiovascular death, MI, stroke, and urgent coronary revascularization (UCR).

2. Coverage Criteria:

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| <p>A. <u>Initial Authorization</u></p> <p>1. Zontivity will be approved based on both of the following criteria:</p> <p style="margin-left: 40px;">a. <u>One</u> of the following:</p> <p style="margin-left: 80px;">(1) History of myocardial infarction (MI) (2) Peripheral arterial disease (PAD)</p> <p style="text-align: center;">-AND-</p> <p style="margin-left: 40px;">b. Patient does not have a history of any of the following:</p> <p style="margin-left: 80px;">1. Stroke 2. Transient ischemic attack (TIA) 3. Intracranial hemorrhage (ICH)</p> <p style="text-align: center;">Authorization will be issued for 12 months.</p> <p>B. <u>Reauthorization</u></p> <p>1. Zontivity will be approved based on both of the following criteria:</p> |
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a. Documentation of positive clinical response to Zontivity therapy

-AND-

b. Patient does not have a history of any of the following:

1. Stroke
2. Transient ischemic attack (TIA)
3. Intracranial hemorrhage (ICH)

Authorization will be issued for 12 months.

3. References:

1. Zontivity Prescribing Information. Merck & Co., Inc., Whitehouse Station, NJ. December 2015.
2. Micromedex Health Solutions. 2017.

| Program | Prior Authorization - Zontivity (vorapaxar) |
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| Change Control | |
| Date | Change |
| 9/2014 | New Policy |
| 12/2015 | Annual Review –no change |
| 9/2016 | Removed “used in combination with aspirin and/or clopidogrel therapy” to align with Employer and Individual. Updated policy template. |
| 8/2017 | Annual review. Updated references. |