

PHARMACY POLICY STATEMENT



POLYARTICULAR JUVENILE IDIOPATHIC ARTHRITIS (pJIA)

For <u>initial</u> authorization:

- 1. Member must be 2 years of age or older; AND
- 2. Member has a confirmed diagnosis of active pJIA; AND
- 3. Must have a documented negative TB test (i.e., tuberculosis skin test (PPD), interferon-gamma release assay (IGRA)) within 12 months prior to starting therapy; AND
- 4. Medication must be prescribed by or in consultation with a rheumatologist; AND





11/01/2020	Updated list of preferred agents and drug trials for all diagnoses to match Ohio Department of Medicaid Unified Preferred Drug List. Added that if member previously tried a non-preferred option in the same drug class as preferred options, the trial is accepted.
11/12/2020	New diagnosis of pJIA added. Replaced list of excluded diagnoses with the generic statement. Updated references. For all diagnoses: Removed repeat TB in reauth for all diagnoses. For AS: Removed list of symptoms of spondyloarthritis because imaging result should be sufficient. Removed peripheral arthritis requirement – not relevant for this diagnosis. For PsA: Age requirement expanded to 2 years or older. Updated dosing and biologic trials reflective of age label change. Added requirement of diagnosis of PsA. Changed the trial section to be 4 weeks of an NSAID AND 3 months of a DMARD unless other circumstances apply (e.g., concomitant axial disease, severe PsA, etc.). For RA: Changed the trials to require methotrexate as one of the non-biologic DMARD trials; only one trial is needed if member has poor prognostic factors.

References:



Effective date: 04/01/2021 Revised date: 11/12/2020