Annual Review of Antihistamines- Fiscal Year 2009
Oklahoma HealthCare Authority
April 2010

Current Prior Authorization Criteria

Approval Criteria:

- A 14 day trial each of OTC loratadine and cetirizine within the last month is required before a Tier 2 medication can be approved.
- All Tier 2 products must be tried for 14 days each within the last 60 days before a Tier 3 medication can be approved (unless no age appropriate Tier 2 product exists).
- Diagnosis must be for a chronic allergic condition or asthma.
- Prior authorization will be for 360 days.
- For members 21 and older, prior authorization is necessary for Tier-1 products

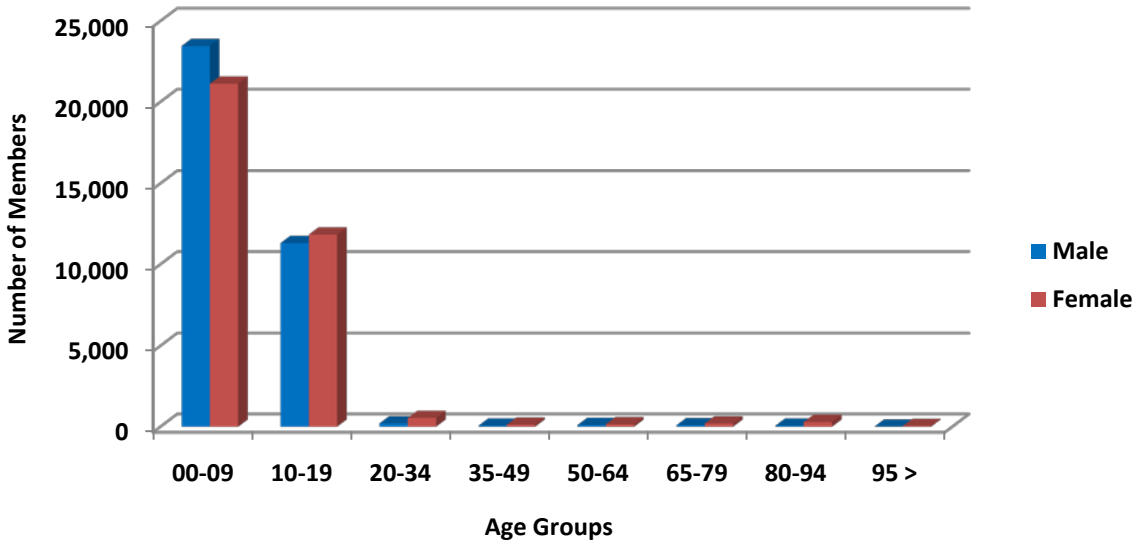
Oral Antihistamine Medications		
Tier 1	**Tier 2**	**Tier 3**
OTC Loratadine (Claritin)	fexofenadine (generic tabs)	desloratadine (Clarinex)
OTC Cetirizine (Zyrtec)		fexofenadine (brand Allegra, syrup, ODT)
		levocetirizine (Xyzal)

Utilization of Antihistamines

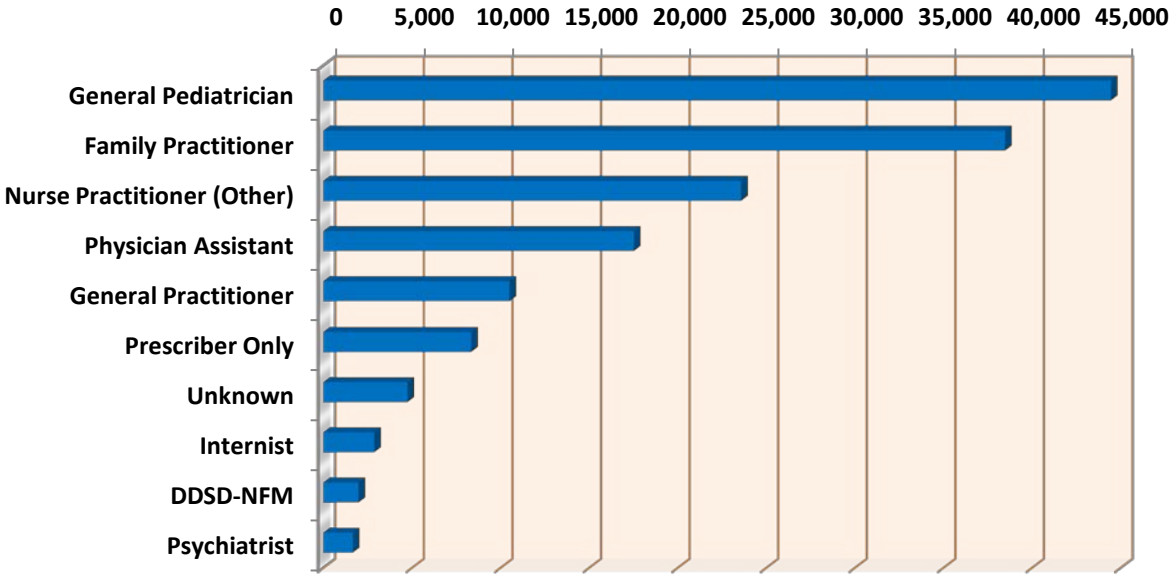
Comparison of Fiscal Years

Fiscal Year	Total Members	Total Claims	Paid	Paid per Claim	Per-Diem	Total Units	Total Days
2008	64,408	158,624	$3,297,950.24	$20.79	$0.70	12,187,759	4,702,172
2009	69,594	161,823	$2,126,338.48	$13.14	$0.45	11,705,146	4,731,345
% Change	**8.10%**	**2.00%**	**-35.50%**	**-36.80%**	**-35.70%**	**-4.00%**	**0.60%**
Change	**5,186**	**3,199**	**-($1,171,611.76)**	**-($7.65)**	**-($0.25)**	**-482,613**	**29,173**

Demographics of Members Utilizing Antihistamines: FY 2009

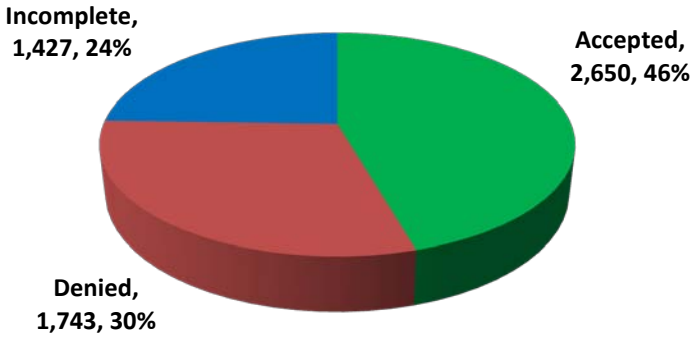


Top Ten Prescriber Specialties of Antihistamines: FY 2009



Prior Authorization of Antihistamines

There were a total of 5,820 petitions submitted for this PBPA category during fiscal year 2009. Step edits are in place for point-of-sale claims when tier trials have been met. The following chart shows the status of the submitted petitions.



Market News and Updates

Xyzal® (levocetirizine) - New pediatric age indications. As of August 21, 2009 the FDA has expanded the age range for Xyzal® use in pediatric patients to the following:

- Patients 6 months and older for chronic idiopathic urticaria (previously 12 years and older)
- Patients 6 months and older for perennial allergic rhinitis (previously 6 years and older)
- Patients 2 years and older for seasonal allergic rhinitis (previous 6 years and older)

New generic approvals:

- **Desloratadine (Clarinex), manufactured by Orchid Pharmaceuticals, approved 02/19/10.** Schering-Plough (now New Merck) was the original patent holder, but had several "pay for delay" patent settlements in August 2009 to delay the generic release until January, 2012

Patent Expirations:

- **Xyzal (levocetirizine):** February 2013
- **Allegra (fexofenadine) suspension:** November 2014
- **Allegra (fexofenadine) oral disintegrating tablets:** March 2014

Recommendations

The College of Pharmacy recommends continued monitoring of this category.

Utilization Details of Medication or Class: Fiscal Year 2009

MEDICATION	CLAIMS	MEMBERS	UNITS	DAYS	UNITS/ DAY	PER DIEM	% PAID
LORATADINE TAB 10MG	36,063	15,189	1,138,428	1,140,942	2.37	$0.24	12.70%
LORATADINE SYP 5MG/5ML	29,786	17,739	3,966,262	783,770	1.68	$0.46	16.82%
CETIRIZINE TAB 10MG	19,135	7,752	564,262	569,084	2.47	$0.32	8.65%
CETIRIZINE SYP 1MG/ML	16,819	10,010	1,900,503	466,600	1.68	$0.43	9.42%
CETIRIZINE SYP 5MG/5ML	7,732	5,030	814,778	221,110	1.54	$0.56	5.82%
ALLERGY RELF TAB 10MG	6,569	3,204	208,777	209,282	2.05	$0.27	2.68%
CETIRIZINE CHW 5MG	6,212	2,944	182,894	185,894	2.11	$0.77	6.71%
ALAVERT TAB 10MG	6,116	2,695	203,274	204,890	2.27	$0.59	5.65%
SM LORATADIN SYP 5MG/5ML	4,641	3,135	582,823	120,370	1.48	$0.41	2.35%
ALL DAY ALLG SYP 1MG/ML	3,317	2,062	392,289	90,869	1.61	$0.41	1.75%
LORATADINE SOL 5MG/5ML	2,728	1,801	350,986	71,727	1.51	$0.40	1.34%
CLARITIN CHW 5MG	2,433	1,111	76,685	71,726	2.19	$1.09	3.69%
CETIRIZINE CHW 10MG	2,360	1,113	67,117	71,331	2.12	$0.75	2.52%
CLEAR-ATADIN TAB 10MG	2,022	1,088	60,594	60,564	1.86	$0.28	0.81%
ALLERGY RELF TAB 10MG	1,918	885	55,361	56,458	2.17	$0.61	1.61%
ZYRTEC SYP 1MG/ML	1,417	1,006	163,258	39,915	1.41	$1.34	2.51%
FEXOFENADINE TAB 180MG	1,358	294	45,545	44,748	4.62	$1.05	2.21%
CETIRIZINE TAB 5MG	1,313	573	39,455	39,362	2.29	$0.31	0.57%
LORATADINE SYP 5MG/5ML	1,112	719	139,502	28,569	1.55	$0.45	0.60%
CLARITIN RDT TAB 10MG	1,075	576	32,394	33,257	1.87	$0.90	1.41%
CLARINEX SYP 0.5MG/ML	948	518	79,632	27,921	1.83	$1.20	1.58%
ALLEGRA SUS 30MG/5ML	935	256	220,820	26,216	3.65	$1.77	2.18%
ALLERGY RELF SYP CHILD	827	527	103,925	20,719	1.57	$0.49	0.48%
FEXOFENADINE TAB 30MG	697	148	39,468	20,683	4.71	$0.93	0.90%
CLEAR-ATADIN SYP 5MG/5ML	691	395	88,684	16,057	1.75	$0.51	0.38%
FEXOFENADINE TAB 60MG	672	144	36,725	20,413	4.67	$1.19	1.14%
LORATADINE 10MG TABLET	426	213	14,736	14,709	2	$0.26	0.18%
SM LORATADIN TAB 10MG	402	186	11,992	12,377	2.16	$0.77	0.45%
LORATADINE SYR 5MG/5ML	324	262	36,885	8,718	1.24	$0.34	0.14%
ALAVERT TAB 10MG	287	182	8,731	8,881	1.58	$0.27	0.11%
SM ALL DAY TAB ALLERGY	213	111	6,265	6,325	1.92	$0.32	0.09%
CETIRIZINE SOL 1MG/ML	200	128	23,134	5,369	1.56	$0.30	0.08%
ALLERGY RELIEF	190	85	4,978	5,458	2.24	$0.76	0.20%
XYZAL TAB 5MG	174	42	5,430	5,955	4.14	$2.43	0.68%
LORATADINE TAB ALLG REL	152	78	4,554	4,554	1.95	$0.80	0.17%

MEDICATION	CLAIMS	MEMBERS	UNITS	DAYS	UNITS/ DAY	PER DIEM	% PAID
CLARINEX TAB 5MG	117	29	3,540	3,570	0.99	4.03	0.63%
LORATADINE SYP ALLG REL	84	56	10,058	2,422	4.15	1.5	0.04%
ALLEGRA ODT TAB 30MG	70	24	4,110	2,100	1.96	2.92	0.34%
ALL DAY ALLG TAB 10MG	59	46	1,622	1,675	0.97	1.28	0.02%
LORATADINE 10MG TAB	57	29	1,738	1,738	1	1.97	0.02%
ALL DAY ALLG SOL 5MG/5ML	44	30	5,589	1,303	4.29	1.47	0.02%
ALL DAY ALLERGY 10 MG TAB	28	11	834	834	1	2.55	0.01%
CLARINEX RDT TAB 5MG	24	4	720	720	1	6	0.13%
CLEAR-ATADIN TAB 10MG	19	7	520	520	1	2.71	0.03%
XYZAL SOL	18	3	2,390	540	4.43	6	0.06%
ALAVERT SYP	16	14	2,114	410	5.16	1.14	0.01%
CLARINEX RDT TAB 2.5MG	15	4	435	450	0.97	3.75	0.08%
CETIRIZINE CHW 10MG	6	4	180	180	1	1.5	0.01%
ZYRTEC TAB 10MG	1	1	30	30	1	1	0.00%
CLARITIN SYP 5MG/5ML	1	1	120	30	4	1	0.00%
	161,823	69,594*	11,705,146	4,731,345	2.47	2.33	

*Total number of unduplicated members