



### **PRIOR AUTHORIZATION CRITERIA**

Generic/Brand: **(efalizumab (Raptiva))**

Therapeutic Class: immunosuppressant

#### **DESCRIPTION:**

Raptiva™ (efalizumab) is a humanized monoclonal antibody for the treatment of moderate-to-severe plaque psoriasis. As a targeted T-cell modulator, Raptiva (efalizumab) is designed to block the activation of disease fighting T-cells that cause psoriasis, without destroying them.

#### **Indications:**

Treatment of chronic moderate-to-severe plaque psoriasis in adults age 18 or older who are candidates for systemic therapy or phototherapy.

#### **CRITERIA FOR APPROVAL:**

1. Indication as above with at least 10% of body surface area (BSA) involvement.
2. member is  $\geq$  18 years of age
3. member is a candidate for systemic therapy or phototherapy
4. member does not have a clinically significant infection
5. member does not have a history of systemic malignancy
6. Raptiva is not to be administered with other immunosuppressants or concomitant phototherapy.
7. Member has failed therapy to one or has medical contraindication (to all) of the following medications: methotrexate, cyclosporine, azathioprine, oral steroids.

#### **FORMULARY ALTERNATIVES INCLUDE:**

- Cyclosporine
- Methotrexate
- Azathioprine
- PUVA

#### **LENGTH OF APPROVAL:**

1. The length of time requested by the prescriber, but no longer than 3 months.
2. A new request for review would need to be made when approval expires and should include patient's clinical response to the non-formulary drug.