

# Xiidra (lifitegrast ophthalmic solution) Effective 03/01/2023

Plan	<ul> <li>MassHealth UPPL</li> <li>Commercial/Exchange</li> </ul>	December True	Prior Authorization
Benefit	<ul> <li>Pharmacy Benefit</li> <li>Medical Benefit</li> </ul>	Program Type	Quantity Limit Step Therapy
Specialty Limitations	N/A		
	Medical and Specialty Medications		
Contact	All Plans	Phone: 877-519-1908	Fax: 855-540-3693
Information	Non-Specialty Medications		
	All Plans	Phone: 800-711-4555	Fax: 844-403-1029
Exceptions	N/A		

### Overview

Xiidra (lifitegrast ophthalmic solution) is indicated for the treatment of the signs and symptoms of dry eye disease.

## **Coverage Guidelines**

Authorization may be granted for members who are new to the plan currently receiving treatment with requested medication excluding when the product is obtained as samples or via manufacturer's patient assistance programs.

### OR

Authorization will be granted when **ALL** the following criteria has been met, and documentation has been submitted:

- 1. The requested drug is being prescribed for dry eye disease
- 2. The patient has tried and failed or been intolerant to artificial tears products

### **Continuation of Therapy**

Reauthorization requires physician attestation that member demonstrates a positive response to therapy.

### Limitations

1. Initial approvals and reauthorizations will be granted for 12 months.

### References

- 1. Xiidra [package insert]. Lexington, MA: Shire US Inc.; July 2016.
- 2. Preferred Practice Pattern. Dry Eyes Syndrome. American Academy of Ophthalmology. September 2013.
- 3. Micromedex Solutions [database online]. Greenwood Village, CO: Truven Health Analytics Inc. Updated periodically. www.micromedexsolutions.com [available with subscription]. Accessed November 2016.

### **Review History**

11/16/2022 – Reviewed and created for Nov P&T. Switched to custom. Separated out MH vs Comm/Exch. Effective 03/01/2023.