



AETNA BETTER HEALTH®
Coverage Policy/Guideline

Name:	Brilinta	Page:	1 of 2
Effective Date:	8/1/2024	Last Review Date:	12/21/2022; 5/2024
Applies to:	<input type="checkbox"/> Illinois <input checked="" type="checkbox"/> New Jersey <input type="checkbox"/> Pennsylvania Kids	<input type="checkbox"/> Florida <input checked="" type="checkbox"/> Maryland <input type="checkbox"/> Virginia	<input type="checkbox"/> Florida Kids <input type="checkbox"/> Michigan <input type="checkbox"/> Texas

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Brilinta under the patient's prescription drug benefit.

Description:

Brilinta is indicated for:

- Arterial thromboembolism prophylaxis in persons with acute coronary syndrome (ACS) (unstable angina, acute myocardial infarction), including those undergoing percutaneous coronary intervention (PCI)
- The reduction in risk of first myocardial infarction (myocardial infarction prophylaxis) or stroke in patients with coronary artery disease (CAD) at high risk for these events
- Stroke prophylaxis in patients with acute ischemic stroke or high risk transient ischemic attack (TIA)

Applicable Drug List:

Non-Formulary: Brilinta

Policy/Guideline:

Brilinta will be covered with prior authorization when the following criteria are met:

- A. Member has a diagnosis of Coronary Artery Disease (CAD) and is at high risk for Myocardial Infarction (MI) or stroke

OR

- B. Member has a diagnosis of Acute Ischemic Stroke or Transient Ischemic Attack (TIA)

AND

1. Member has a documented inadequate response, intolerable adverse event, or contraindication with clopidogrel.

OR

- C. Member has a diagnosis of Acute Coronary Syndrome (ACS) or a history of Myocardial Infarction (MI)

AND

1. Member has a documented inadequate response, intolerable adverse event, or contraindication with prasugrel.



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Approval Duration and Quantity Restrictions:

Approval: 12 months

Quantity Level Limit: 2 tablets/day

References:

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2. O’Gara, Patrick, Kushner, Frederick et al. 2013 ACCF/AHA Guideline for the Management of ST-Elevation Myocardial Infarction: Journal of the American College of Cardiology http://www.onlinejacc.org/content/accj/61/4/e78.full.pdf?_ga=2.16281206.1583954993.1522813721-1795673358.1522813721 Accessed April 03, 2018.
3. Levine, Glenn N., Bates, Eric R., Bittl, John A., et al. 2016 ACC/AHA Guideline Focused Update on Duration of Dual Antiplatelet Therapy in Patients with Coronary Artery Disease. A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines http://www.onlinejacc.org/content/accj/68/10/1082.full.pdf?_ga=2.139399226.861223083.1560897735-963373453.1560897735. Accessed June 18, 2019.
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6. S C Johnston, P Amarenco, H Denison, S. Evans. Ticagrelor and Aspirin or Aspirin Alone in Acute Ischemic Stroke or TIA. *N Engl J Med* 2020; 383:207-217. <https://www.nejm.org/doi/full/10.1056/nejmoa1916870>. Accessed July 22, 2021.
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10. Brilinta (ticagrelor) tablets [package insert]. Wilmington, DE: AstraZeneca; May 2022.
11. Effient (prasugrel) tablets [package insert]. South Plainfield, NJ: Cosette Pharmaceuticals; September 2022.
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