

HealthAlliance**MEDICARE**

PURPOSE OF THE POLICY

To establish prior authorization criteria for Stelara.

STATEMENT OF THE POLICY

Health Alliance Medical Plans will cover Stelara, for new starts only, when the below criteria is met.

PROCEDURES

1. Criteria

- 1.1 Prescribed for all FDA indications not otherwise excluded from Part D.
- 1.2 Prescribed by a Dermatologist or Rheumatologist.
- 1.3 Prior use of Enbrel or Humira.
- 1.4 Due to the unique mechanism of action, if physician requests to bypass Enbrel or Humira for a specific reason, then coverage will also be authorized.