

# HealthAlliance**MEDICARE**

## **PURPOSE OF THE POLICY**

To provide prior authorization criteria for Zetia®.

## **STATEMENT OF THE POLICY**

Health Alliance will cover Zetia®, for new starts only, when the below criteria has been met:

## **PROCEDURES**

### **1. Inclusion Criteria**

- 1.1 Approval for high risk patients w cardiovascular disease plus multiple major risk factors (especially diabetes) or severe and poorly controlled risk factors (especially continual cigarette smoking) or multiple risk factors of the metabolic syndrome (especially high triglycerides greater than 200mg/dl, non HDL-C greater than 130mg/dl, with low HDL-C less than 40mg/dl OR
- 1.2 Acute coronary syndromes must have tried the highest dose tolerated of a statin and failed to come to an LDL goal of at least 100mg/dl or had a contraindication to doing so.

### **2. Exclusion Criteria**

- 2.1 Active liver disease, unexplained persistent increases in liver function tests.