

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Dexlansoprazole (Dexilant)

Notes:

- Quantity Limits: Yes
- ^ Adequate trial is defined as a treatment duration of at least 14 days
- * Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

Initiation (new start) criteria and criteria for *new members* entering Kaiser Permanente already taking the medication who have not been reviewed previously:

Non-formulary **dexlansoprazole (Dexilant)** will be covered on the prescription drug benefit when the following criteria are met:

- Patient has failed an adequate trial[^], or has an allergy or intolerance* to the following medications:
 - Omeprazole (at least 40 mg per day)
 - Pantoprazole (at least 40 mg per day)
 - Lansoprazole (at least 30 mg per day)
 - Rabeprazole (at least 20 mg per day)