

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Infliximab-dyyb Subcutaneous (Zymfentra)

Notes:

- Quantity Limits: Yes
- ^ Adequate trial is defined as 3 months treatment duration
- * Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation
- ** Adalimumab-atto is the preferred adalimumab product

Initiation (new start) criteria: Non-formulary **infliximab-dyyb subcutaneous (Zymfentra)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient has a diagnosis of moderate to severe Crohn's disease or ulcerative colitis
- Prescriber is a gastroenterologist
- Patient is 18 years of age or older
- Patient is currently stable on intravenous infliximab-dyyb and has a documented barrier to attending infusion appointments OR
- Patient is naïve to infliximab and has failed an adequate trial[^] of an adalimumab product^{**} (or patient has an allergy or intolerance^{*} to an adalimumab product^{**}) AND patient has a documented barrier to attending infusion appointments

Criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously: Non-formulary **infliximab-dyyb subcutaneous (Zymfentra)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient has a diagnosis of moderate to severe Crohn's disease or ulcerative colitis
- Prescriber is a gastroenterologist
- Patient is 18 years of age or older
- Patient is currently stable on subcutaneous infliximab-dyyb and has a documented barrier to attending infusion appointments

Criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously: Non-formulary **infliximab-dyyb subcutaneous (Zymfentra)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient has a diagnosis of moderate to severe Crohn's disease or ulcerative colitis
- Prescriber is a gastroenterologist
- Patient is 18 years of age or older

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- Patient is currently stable on subcutaneous infliximab-dyyb and has a documented barrier to attending infusion appointments

Continued use criteria for patients previously approved per the above criteria who are currently stable on the medication: Non-formulary **infliximab-dyyb subcutaneous (Zymfentra)** will continue to be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Prescriber is a gastroenterologist
- Patient has responded to infliximab-dyyb subcutaneous treatment as determined by prescriber