	TTER HEALTH® Policy/Guideline		<b>*</b> a	etna <sup>®</sup>
Name: Daliresp (roflumilast)		st)	Page:	1 of 1
Effective Date: 4/1/2024			Last Review Date:	3/2024
Applies to:	⊠Illinois	□Florida	⊠Florida Kids	
	⊠New Jersey	⊠Maryland	□Michigan	
	⊠Pennsylvania Kids	□Virginia	□Texas	

### Intent:

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

### **Description:**

Daliresp (roflumilast) is indicated as a treatment to reduce the risk of COPD exacerbations in patients with severe COPD associated with chronic bronchitis and a history of exacerbations.

Limitations of Use

Daliresp (roflumilast) is not a bronchodilator and is not indicated for the relief of acute bronchospasm.

Daliresp (roflumilast) 250 mcg is a starting dose, for the first 4 weeks of treatment only and is not the effective (therapeutic) dose.

## **Applicable Drug List:**

Roflumilast

# **Policy/Guideline:**

The requested drug will be covered with prior authorization when the following criteria are met:

 The requested drug is being prescribed to reduce the risk of chronic obstructive pulmonary disease (COPD) exacerbations in a patient with severe COPD associated with chronic bronchitis and a history of exacerbations

### **Approval Duration and Quantity Restrictions:**

**Approval:** 12 months

#### **References:**

- 1. Daliresp [package insert]. Wilmington, DE: AstraZeneca Pharmaceuticals LP; March 2019.
- 2. Lexicomp Online, AHFS DI (Adult and Pediatric) Online, Waltham, MA: UpToDate, Inc.; 2023. https://online.lexi.com. Accessed August 8, 2023.
- 3. Micromedex (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: https://www.micromedexsolutions.com/ (cited: 08/08/2023).