oscar

Clinical Guideline

Oscar Clinical Guideline: Nevanac (nepafenac) ophthalmic suspension (PG078, Ver. 6)

Nevanac (nepafenac) ophthalmic suspension

Disclaimer

Clinical guidelines are developed and adopted to establish evidence-based clinical criteria for utilization management decisions. Clinical guidelines are applicable according to policy and plan type. The Plan may delegate utilization management decisions of certain services to third parties who may develop and adopt their own clinical criteria.

Coverage of services is subject to the terms, conditions, and limitations of a member's policy, as well as applicable state and federal law. Clinical guidelines are also subject to in-force criteria such as the Centers for Medicare & Medicaid Services (CMS) national coverage determination (NCD) or local coverage determination (LCD) for Medicare Advantage plans. Please refer to the member's policy documents (e.g., Certificate/Evidence of Coverage, Schedule of Benefits, Plan Formulary) or contact the Plan to confirm coverage.

Summary

Nevanac (nepafenac) is a non-steroidal anti-inflammatory drug (NSAID) used to treat pain and inflammation associated with cataract surgery. Cataracts are when cloudy, opaque areas develop on the lens of the eye which cause blurry vision. Cataract surgery is the removal of the cloudy lens and replacement of an artificial lens. Pain and inflammation are common post-operative symptoms of cataract surgery which can be treated with steroid or NSAID eye drops.

Definitions

"Non-steroidal anti-inflammatory drug (NSAID)" is a type of medication that is prescribed to reduce pain and inflammation.

"Steroid" is a class of medications used to reduce inflammation in various conditions, such as uveitis.

Medical Necessity Criteria for Authorization

The Plan considers **Nevanac (nepafenac)** medically necessary when **ALL** of the following criteria are met:

1. The requested medication is being used for the management of ocular inflammation and pain associated with cataract surgery***; AND***
2. The member is unable to use or has tried and failed **ONE** (1) of the following:
    a. Bromfenac 0.09% Ophthalmic Solution***; or***
    b. Diclofenac Sodium 0.1% Ophthalmic Solution***; or***
    c. Ketorolac Tromethamine 0.5% Ophthalmic Solution***; AND***
3. Clinical chart documentation is provided for review to substantiate the above listed requirements.

If the above prior authorization criteria is met, Nevanac (nepafenac) will be approved for 30-days.

Experimental or Investigational / Not Medically Necessary

Nevanac (nepafenac) for any other indication is considered not medically necessary by the Plan, as it is deemed to be experimental, investigational, or unproven.

References

1. American Academy of Ophthalmology. Cataract in the Adult Eye Preferred Practice Pattern. Ophthalmology. Nov 2021. Available online: https://www.aao.org/preferred-practice-pattern/cataract-in-adult-eye-ppp-2021-in-press
2. Helga, et al. A review of the use of ketorolac tromethamine 0.4% in the treatment of post-surgical inflammation following cataract and refractive surgery. Clin Ophthalmol. 2007 Dec; 1(4):367-371.
3. Nevanac (nepafenac) [prescribing information]. East Hanover, NJ: Novartis Pharmaceuticals Corp; September 2021.

Clinical Guideline Revision / History Information

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