

COMMON PA CRITERIA

Utilize this checklist to help ensure you have the information needed to submit a complete PA.

1 Patient and Insurance Information

- Name of product
- Patient's full name, gender, address, and date of birth
- Patient's pharmacy benefit plan information (plan or PBM name or ID card BIN/PCN/RxGroup)

2 Prior Treatment History

Documentation of other treatments tried and failed

OTC (over-the-counter) products such as artificial tears:

- Type of artificial tear such as gel, ointment, or solution
- Dose and frequency used
- Dates used and duration of treatment
- Patient's response to treatment

Prescription medications:

- Medication name and dosing information
- Dates used and duration of treatment
- Patient's response to treatment

3 Clinical Information and Treatment Rationale

Provide documentation that validates the need for the medication

Supporting diagnosis information specific to the medication requested

- ICD-10 diagnosis code(s)
- Date of diagnosis
- Diagnostic testing with results

Examples may include^{1,2}:

- Schirmer's Test Score
- Tear film break-up time (TBUT)
- Ocular surface staining
- Slit-lamp examination
- Blink rate
- Matrix metalloproteinase-9 (MMP-9)
- Corneal sensitivity

Supporting clinical information specific to the medication requested

Examples may include:

- Dosing
- Mechanism of action
- Route of administration
- Clinical trial information
- Relevant publications

Relevant patient history

Examples may include:

- Medical contraindications to alternative therapies
- Pertinent comorbid conditions
- Changes in diagnosis or condition that justify the requested medication
- Patient adherence to prior treatments
- Functional impact of dry eye disease on work and home life, if any

Note: The information must be substantiated in the patient's medical record and be available to payers upon request.

If you prescribe Tyrvaya through PhilRx, you'll receive a notification to complete and submit the PA request to the payer.

Note: If the PA was initiated at the pharmacy, enter the unique code contained in the fax notification you received – when you select the PA, it will be pre-populated with the above information for you to verify. Please verify any pre-populated information prior to submission.



QUICK TIP

- Remember to collect prior treatment history from patients, and document it in the EHR
- Patients should provide a thorough history, including OTC medications like artificial tears. Document name, date tried, and response to therapy
- Collecting this information up front can facilitate the PA process



COMMON REASONS FOR PA DENIAL:

Missing prior treatment history

- Incomplete list of names of drugs tried, including OTC medications (such as artificial tears), with dates used
- Lacking a description of patient's clinical response to prior treatments and formulary alternatives

Incorrect, incomplete, or missing ICD-10 code or diagnostic testing history

- Patient must be diagnosed with a disease consistent with the FDA-approved indication for the medication
- Valid ICD-10 coding must include the full 7 characters to provide the greatest level of detail to describe the patient diagnosis

EHR=electronic health record; FDA=Food and Drug Administration; ICD-10=International Classification of Diseases, Tenth Revision; PBM=pharmacy benefit manager.

INDICATION

Tyrvaya (varenicline solution) Nasal Spray is indicated for the treatment of the signs and symptoms of dry eye disease.

IMPORTANT SAFETY INFORMATION

Adverse Reactions

The most common adverse reaction reported in 82% of patients was sneezing. Events that were reported in 5-16% of patients were cough, throat irritation, and instillation-site (nose) irritation.

[Please click here for full Prescribing Information.](#)

NDC Code³

Product	NDC Code
Tyrvaya Nasal Spray	73521-030-02

ICD-10 Codes⁴

Example ICD-10 Codes for Dry Eye Diagnosis

Description	ICD-10	Right	Left	Bilateral	Unspecified
Dry eye syndrome: tear film insufficiency, nitric oxide synthase (NOS) (lacrima gland)	–	H04.121	H04.122	H04.123	H04.129
Keratoconjunctivitis sicca, not specified as Sjögren's syndrome	–	H16.221	H16.222	H16.223	H16.229
Punctate keratitis	–	H16.141	H16.142	H16.143	H16.149
Unspecified keratoconjunctivitis	–	H16.201	H16.202	H16.203	H16.209
Exposure keratoconjunctivitis	–	H16.211	H16.212	H16.213	H16.219
Unspecified superficial keratitis	–	H16.101	H16.102	H16.103	H16.109
Sicca syndrome (Sjögren) with keratoconjunctivitis	M35.01				
Sicca syndrome (Sjögren), unspecified	M35.00				

This information is current as of October 2021 and is subject to change. Payer coding requirements vary and can frequently change, so please check with each payer as to payer-specific requirements. You are solely responsible for determining the appropriate codes and for any action you take in billing. The information provided here is not intended to be definitive or exhaustive, and is not intended to replace the guidance of a qualified professional advisor.

NDC=National Drug Code.

Prescribing Tyrvaya to PhilRx allows your patients to take advantage of TEAMTyrvaya, which offers benefits verification assistance and coverage support for the steps discussed.



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References: **1.** Akpek EK et al. *Ophthalmology*. 2019;126(1):P286-P334. **2.** Zeev MS et al. *Clin Ophthalmol*. 2014;8:581-590. **3.** Tyrvaya (varenicline solution) Prescribing Information. Oyster Point Pharma, Inc.; 2021. **4.** CMS.gov. 2022 ICD-10-CM. Accessed August 19, 2021. <https://www.cms.gov/medicare/icd-10/2022-icd-10-cm>.