I. Policy

1. A non-formulary drug may be considered for off-label coverage through IEHP’s prior authorization process, provided that all of the following conditions have been met:
   a. Meet all requirements in IEHP Prescription Drug Prior Authorization Drug Treatment Criteria and Policy.
   b. The drug is approved by the FDA.
   c. The drug is prescribed by a participating licensed health care professional for the treatment of a life-threatening condition*; or the drug is prescribed by a participating licensed health care professional for the treatment of a chronic and seriously debilitating condition**.
   d. The drug has been recognized for treatment of that condition by one of the following:
      i. American Hospital Formulary Service Drug Information
      ii. DRUGDEX Information System
      iii. The National Comprehensive Cancer Network Drug and Biologics Compendium
      iv. Two articles from major peer reviewed medical journals that present data supporting the proposed off-label use or uses as generally safe and effective unless there is clear and convincing contradictory evidence presented in a major peer reviewed medical journal
   e. The drug has a clinically significant therapeutic advantage in safety, effectiveness, or clinical outcome over other drugs that are included in IEHP’s formulary.

2. If a drug does not meet the above requirements, the Pharmacist’s recommendation is to be reviewed with IEHP Medical Directors on a case by case basis.

* For purposes of this section, "life-threatening" means either or both of the following:
   (1) Diseases or conditions where the likelihood of death is high unless the course of the disease is interrupted
   (2) Diseases or conditions with potentially fatal outcomes, where the end point of clinical intervention is survival.

** For purposes of this section, “chronic and seriously debilitating” means diseases or conditions that require ongoing
Reference:
1. Social Security Act Section 1927(k)(6)
2. CA Health & Safety Code §1342.71
3. CA Health & Safety Code §1367.24 (Coverage for Non-formulary Drugs);

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<tr>
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<th>Change</th>
<th>Authors</th>
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<td>Add meet all requirements in IEHP Prescription Drug Prior Authorization Drug Treatment Criteria and Policy.</td>
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<td>Update references, medical conditions (life-threatening and debilitating) and two articles from major peer reviewed medical journals that present data supporting the proposed off-label use.</td>
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