

## UnitedHealthcare Pharmacy Clinical Pharmacy Programs

Program Number	2023 P 1281-4
Program	Prior Authorization/Regulatory
Medication	Gonococcal Ophthalmia Neonatorum (GON) Prevention Zero Dollar
	Cost Share – erythromycin 0.5% ophthalmic ointment
P&T Approval Date	5/2019, 5/2020, 2/2022, 4/2023
Effective Date	7/1/2023;
	Oxford only: 7/1/2023

# 1. Background:

The U.S. Preventive Services Task Force (USPSTF)<sup>1</sup> recommends prophylactic ocular topical medication for all newborns to prevent gonococcal ophthalmia neonatorum (GON). GON can cause corneal scarring, ocular perforation, and blindness as early as 24 hours after birth. Erythromycin ophthalmic ointment is the only FDA approved drug for the prophylaxis of GON. Ocular prophylaxis of newborns is mandated in most states and is considered standard neonatal care.

This program is designed to meet Health Care Reform requirements which require coverage of 0.5% erythromycin ophthalmic ointment at zero dollar cost share if being used for primary prevention of GON.

## 2. Coverage Criteria:

- A. Coverage of erythromycin 0.5% ophthalmic ointment at zero dollar cost share will be approved based on <u>one</u> of the following criteria:
  - 1. Member or health care provider intends to administer medication to newborn for the prophylaxis of gonococcal ophthalmia neonatorum

#### -OR-

2. Newborn is 0 -1 month of age

Authorization will be issued for zero copay with deductible bypass for up to 1 month from approval.

### 3. Additional Clinical Rules: N/A

### 4. References:

1. Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum. U.S. Preventive Services Task Force <u>https://jamanetwork.com/journals/jama/fullarticle/2722778</u> Accessed 3/2023



Program	Prior Authorization/Regulatory - Gonococcal Ophthalmia Neonatorum (GON) Prevention Zero Dollar Cost Share – erythromycin 0.5%
	ophthalmic ointment
Change Control	
Date	Change
5/2019	New program.
5/2020	Annual review. No changes to coverage criteria.
2/2022	Annual review. No changes to coverage criteria.
4/2023	Annual review. No changes to coverage criteria.