PRIOR AUTHORIZATION CHECKLIST

Help appropriate patients access VYZULTA

VYZULTA® (latanoprostene bunod ophthalmic solution), 0.024%

Use this checklist as a guide when completing a prior authorization (PA) request to help ensure necessary information is documented, including a **detailed patient treatment history**.*
Note: Accurately completing the PA with all requested information may help expedite the process and prevent rejected or denied claims.

Desired Medication

VYZULTA® (latanoprostene bunod ophthalmic solution), 0.024%	2.5 mL or 5 mL

Patient's Clinical Records (including ocular history)

Patient history and/or symptoms, such as[1]:

- Family history of glaucoma or blindness
- Visual field loss
- Decreased visual acuity
- Haloes around lights

Clinical observations, such as[1]:

- Raised intraocular pressure
- Cloudy (edematous) cornea
- Optic disc changes (ie, cupping or optic disc hemorrhage)
- Venous occlusion

Clinical diagnosis of open-angle glaucoma or ocular hypertension, including the following information[2,3]:

- Date of diagnosis
- Valid ICD-10 diagnosis code
- Diagnostic exam/testing and results which may include the following:
  - Visual acuity measurement
  - Pupil examination
  - Confrontational visual fields
  - Slit-lamp biomicroscopy
  - IOP measurement
  - Gonioscopy
  - Optic nerve head (ONH) and retinal nerve fiberlayer (RNFL) examination
  - Fundus examination
  - Central corneal thickness (CCT) measurement
  - Visual field evaluation
  - ONH, RNFL, and macular imaging
  - Corneal hysteresis

Prior treatment history for open-angle glaucoma or ocular hypertension. It is important to include the following:
Drugs tried and failed (failure may require inadequate response to at least 2 formulary alternatives and/or over-the-counter medications based on the insurance plan's policy):

- Product name
- Frequency of use
- Response to treatment
- Dose
- Dates of treatment
- Outcome
- History of allergy or intolerance to any products
- History of procedures (such as laser or incisional surgery)

Some examples of prior therapies include: latanoprost 0.005% ophthalmic solution, bimatoprost 0.03% ophthalmic solution, travoprost 0.004% ophthalmic solution, tafluprost 0.0015% ophthalmic solution.

Impact of open-angle glaucoma or ocular hypertension on visual function, such as the following:

- Reading
- Driving
- Social and physical functioning
- Daily activities
- Productivity at work
- Quality of life

- Attach a copy of the letter of medical necessity and patient's medical records, including chart note (when required by the plan)
- Ensure prescriber signature is included (when required by the plan)

*The information is for reference only. Bausch + Lomb cannot guarantee insurance coverage or reimbursement. Coverage and reimbursement may vary significantly by payer, plan, patient, and setting of care. It is the sole responsibility of the eye care professional to select the proper codes and ensure the accuracy of all statements used in seeking coverage and reimbursement.

INDICATION
VYZULTA® (latanoprostene bunod ophthalmic solution), 0.024% is indicated for the reduction of intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension.

IMPORTANT SAFETY INFORMATION
- Increased pigmentation of the iris and periorbital tissue (eyelid) can occur. Iris pigmentation is likely to be permanent

Please see continued Important Safety Information on reverse side. Please click here for full Prescribing Information.

VYZULTA EXAMPLE ICD-10 CODES

Help appropriate patients access VYZULTA

VYZULTA® (latanoprostene bunod ophthalmic solution), 0.024%

These diagnosis code examples are provided for general informational purposes only and are not intended to be directive, a guarantee of coverage, or a substitute for an independent clinical decision.

Example ICD-10 Codes[4]				
Description	**Right**	**Left**	**Bilateral**	**Unspecified**
Open-angle glaucoma with borderline findings, low risk	H40.011	H40.012	H40.013	H40.019
Open-angle glaucoma with borderline findings, high risk	H40.021	H40.022	H40.023	H40.029
Primary open-angle glaucoma	H40.111	H40.112	H40.113	H40.10
Ocular hypertension	H40.051	H40.052	H40.053	H40.059

References: 1. Khaw PT, Shah P, Elkington AR. Glaucoma-1: diagnosis. *BMJ*. 2004;328(7431):97-99. doi:10.1136/bmj.328.7431.97 **2.** American Academy of Opthalmology. Primary open-angle glaucoma preferred practice pattern; 2020 **3.** Sit AJ, Chen TC, Takusagawa HL, et al. Corneal hysteresis for the diagnosis of glaucoma and assessment of progression risk: A Report by the American Academy of Ophthalmology. *Ophthalmology*. 2023;130(4):433-442. doi:10.1016/j.ophtha.2022.11.009 **4.** ICD10Data.com. Glaucoma. Accessed April 15, 2024. https://www.icd10data.com/ICD10CM/Codes/H00-H59/H40-H42/H40-

ICD-10=International Classification of Diseases.

IMPORTANT SAFETY INFORMATION (CONTINUED)

- Gradual changes to eyelashes, including increased length, increased thickness, and number of eyelashes, may occur. These changes are usually reversible upon treatment discontinuation
- Use with caution in patients with a history of intraocular inflammation (iritis/uveitis). VYZULTA should generally not be used in patients with active intraocular inflammation
- Macular edema, including cystoid macular edema, has been reported during treatment with prostaglandin analogs. Use with caution in aphakic patients, in pseudophakic patients with a torn posterior lens capsule, or in patients with known risk factors for macular edema
- There have been reports of bacterial keratitis associated with the use of multiple-dose containers of topical ophthalmic products that were inadvertently contaminated by patients
- Contact lenses should be removed prior to the administration of VYZULTA and may be reinserted 15 minutes after administration
- Most common ocular adverse reactions with incidence ≥2% are conjunctival hyperemia (6%), eye irritation (4%), eye pain (3%), and instillation site pain (2%)

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please click here for full Prescribing Information.

BAUSCH + LOMB