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5.90.045

Section:	Prescription Drugs	**Effective Date:**	January 1, 2024
Subsection:	Topical Products	**Original Policy Date:**	January 29, 2021
Subject:	Upneeq	**Page:**	1 of 4

Last Review Date: December 8, 2023

Upneeq

Description

Upneeq (oxymetazoline hydrochloride ophthalmic solution)

Background
Upneeq (oxymetazoline) is an alpha adrenoceptor agonist targeting a subset of adrenoreceptors in Mueller's muscle of the eyelid. Upneeq is used to treat blepharoptosis which is a condition in which one or both upper eyelids droop. The eyelid may droop slightly or may droop enough to cover the pupil and block vision (1-2).

Regulatory Status
FDA-approved indication: Upneeq is indicated for the treatment of acquired blepharoptosis in adults (1).

Instill one drop of Upneeq into one or both ptotic eye (s) once daily. Patients should discard the single patient-use container immediately after dosing (1).

Alpha-adrenergic agonists may impact blood pressure. Upneeq should be used with caution in patients with severe or unstable cardiovascular disease, orthostatic hypotension, and uncontrolled hypertension or hypotension (1).

Upneeq may increase the risk of angle closure glaucoma in patients with untreated narrow-angle glaucoma. Patients should be advised to seek immediate medical care if signs and symptoms of acute angle closure glaucoma develop (1).

The safety and effectiveness of Upneeq has not been established in pediatric patients under 13 years of age (1).

Related policies

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Upneeq may be considered **medically necessary** if the conditions indicated below are met.

Upneeq may be considered **investigational** for all other indications.

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have **ALL** of the following:

1. Acquired blepharoptosis (droopy eyelid)
    a. Condition impairs the visual field
    b. Prescribed by or recommended by an ophthalmologist
    c. Prescriber agrees to advise the patient of the signs and symptoms of acute angle closure glaucoma and to seek medical care if needed
    d. **NOT** exclusively for cosmetic use

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

Patient must have **ALL** of the following:

1. Acquired blepharoptosis (droopy eyelid)
    a. Patient has had an improvement in symptoms (e.g., improved field of

vision)
b. Prescribed by or recommended by an ophthalmologist
c. Prescriber agrees to advise the patient of the signs and symptoms of acute angle closure glaucoma and to seek medical care if needed
d. **NOT** exclusively for cosmetic use

Policy Guidelines

Pre - PA Allowance
None

Prior - Approval Limits

Quantity 90 single-use containers

Duration 3 months

Prior – Approval *Renewal* Limits

Quantity 90 single-use containers per 90 days

Duration 12 months

Rationale

Summary
Upneeq (oxymetazoline) is an alpha adrenoceptor agonist targeting a subset of adrenoreceptors in Mueller's muscle of the eyelid. Upneeq is used to treat blepharoptosis which is a condition in which one or both upper eyelids droop. The eyelid may droop slightly or may droop enough to cover the pupil and block vision (1-2).

Prior approval is required to ensure the safe, clinically appropriate, and cost-effective use of Upneeq while maintaining optimal therapeutic outcomes.

References
1. Upneeq [package insert]. Bridgewater, NJ: RVL Pharmaceuticals, Inc.; Mayy 2023.
2. Blepharoptosis (Droopy Eyelid). UCLA Health Eye Care. Los Angeles, CA. https://www.uclahealth.org/eye/blepharoptosis-droopy-eyelid.

Policy History

Date	Action
January 2021	Addition to PA
March 2021	Annual review
December 2022	Annual review and reference update. Changed policy number to 5.90.045
December 2023	Annual review and reference update

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on December 8, 2023 and is effective on January 1, 2024.