Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	February 1, 2022

ORALAIR® (Sweet Vernal, Orchard, Perennial Rye, Timothy, and Kentucky Blue Grass Mixed Pollens Allergen Extract)

LENGTH OF AUTHORIZATION: 1 year

INITIAL REVIEW CRITERIA:

- Patient must be ≥ 5 years to ≤ 65 years of age.
- Patient must have a diagnosis of grass pollen-induced allergic rhinitis.
- Diagnosis has been confirmed by positive skin test or in vitro testing for pollen-specific IgE antibodies for any of the 5 grass species (Sweet Vernal, Orchard, Perennial Rye, Timothy, Kentucky Blue Grass) contained in Oralair.
- The patient does not have any of the following:
    - severe, unstable or uncontrolled asthma
    - history of any severe systemic allergic reaction or any severe local reaction to sublingual allergen immunotherapy
    - history of eosinophilic esophagitis
    - medical conditions that may reduce the ability of the patient to survive a serious allergic reaction or increase the risk of adverse reactions after epinephrine administration and is not on any medication(s) that can inhibit or potentiate the effect of epinephrine
- Attestation of initial dose administration in a healthcare setting.

CONTINUATION OF THERAPY:

- Patient met initial review criteria.
- Documentation of improved clinical response.
- Dosing is appropriate as per labeling or is supported by compendia.

DOSING AND ADMINISTRATION:

- Refer to product labeling at https://www.accessdata.fda.gov/scripts/cder/daf/