



Prior Authorization Approval Criteria

Bystolic (nebivolol)

Generic name:	Nebivolol
Brand name:	Bystolic
Medication class:	antihypertensive agent; beta-blocker
FDA-approved uses:	Treatment of hypertension
Available dosage forms:	2.5 mg, 5 mg, and 10 mg tablets
Usual dose range:	5 mg to 40 mg once daily
Duration of therapy:	Indefinite
Cost (based on AWP 2008):	\$47.25-\$189.00 per month, dependent on the dose (5 mg-40 mg per day)

Criteria for use (*bullet points below are all inclusive unless otherwise noted*):

- Clinically diagnosed hypertension.
- Failed or intolerant to at least 2 other FCHP-preferred beta-blockers.

Contraindications:

- Severe bradycardia, heart block greater than first degree, cardiogenic shock, decompensated cardiac failure, sick sinus syndrome (unless a permanent pacemaker is in place), or severe hepatic impairment.
- Hypersensitivity to any component of Bystolic.

Not approved if:

- Does not meet the above-stated criteria.
- Any contraindications to the use of Bystolic.

Special considerations:

- Nebivolol is a 3rd-generation beta-blocker, like carvedilol and labetalol.
- It is a vasodilatory beta-blocker but it does not antagonize alpha receptors. It stimulates release of nitric oxide.
- Nebivolol is highly beta-1 selective up to doses of 10 mg.

Step therapy requirements:

- 2 generic beta blockers

FCHP Pharmacy and Therapeutics Committee approval: _____

Date: _____

Adopted: 03/12/08