



Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	June 27, 2018

**DALIRESP® (roflumilast)**

**LENGTH OF AUTHORIZATION:** UP TO ONE YEAR

**REVIEW CRITERIA:**

- Must be 18 years of age or older.
- Must have a diagnosis of chronic obstructive pulmonary disorder with chronic bronchitis.
- Trial and failure (further exacerbations) on triple therapy with a long acting beta agonist, long acting muscarinic antagonist, and an inhaled corticosteroid and FEV<sub>1</sub> <50% predicted.

**DOSING:**

Start with 250mcg by mouth once daily for 4 weeks, then 500mcg once daily thereafter.