**Drug Monograph**

**Drug/Drug Class:** Rebif® Rebidose® (interferon beta-1a) Autoinjector / Immunomodulator  
**Prepared for:** MO HealthNet  
**Prepared by:** Xerox Heritage, LLC

<table>
<thead>
<tr>
<th>New Criteria</th>
<th>Revision of Existing Criteria</th>
</tr>
</thead>
</table>

### Executive Summary

**Purpose:**
The purpose of this monograph is to provide a review of new therapy to determine whether the reviewed drug should be made available on an open access basis to prescribers, require a clinical edit or require prior authorization for use.

**Dosage Forms:**
Rebif® Rebidose® is available as a titration pack including six 8.8 mcg/0.2mL autoinjectors and six 22 mcg/0.5mL autoinjectors. It is also available in two maintenance doses; 22 mcg/0.5mL and 44 mcg/0.5mL autoinjectors.

**Manufacturer:**
EMD Serono, Inc. Rockland, MA 02370

**Indications:**
Rebif® (interferon beta-1a) is indicated for the treatment of patients with relapsing forms of multiple sclerosis to decrease the frequency of clinical exacerbations and delay the accumulation of physical disability.

**Costs:**
$944.92 per titration pack of Rebif® Rebidose®. $661.44 per 22mcg strength autoinjector of Rebif® Rebidose®. $717.68 per 44mcg strength autoinjector of Rebif® Rebidose®.

**Summary of Findings:**
The Division recommends this product for inclusion in the state specific Preferred Drug List as a non-preferred agent.

**Status Recommendation:**
- ☒ Prior Authorization (PA) Required
- ☐ Open Access  
- ☒ PDL

**Type of PA Criteria:**
- ☐ Increased Risk of ADE
- ☒ Non-Preferred Agent  
- ☐ Appropriate Indications
- ☐ Under Solicitation

Prepared By: Kathleen Wilbers, Pharm.D.  
Date: May 13, 2013