## ConnectiCare.

### **Commercial/Healthcare Exchange PA Criteria**

Effective: May 4, 2016

Prior Authorization: GLP-2 Analogs

#### **Products Affected:** Gattex

#### Medication Description:

Gattex is used to treat adults with short bowel syndrome (SBS) who need additional nutrition from intravenous feeding (parenteral nutrition). SBS is a condition that results from the partial or complete surgical removal of the small and/or large intestine. As a result of the shortened intestinal tract, patients with SBS will have poor absorption of nutrients necessitating parenteral nutrition. Gattex is a subcutaneous injection administered once daily that helps improve intestinal absorption of fluids and nutrients.

#### Covered Uses:

- Short Bowel Syndrome (SBS) patients who are dependent on parenteral support

#### Exclusion Criteria: None

#### **Required Medical Information:**

- Serum bilirubin
- Alkaline phosphatase, lipase, and amylase
- Colonoscopy history

Age Restrictions: 1 year of age and older

#### Prescriber Restrictions: None

#### Coverage Duration: 6 months

#### Other Criteria:

Initiation of therapy:

- A) Patient has had recent (within 6 months) colonoscopy; AND
- B) Patient has had recent (within 6 months) laboratory assessment of bilirubin, alkaline phosphatase, lipase and amylase levels; AND
- C) Patient is dependent on parenteral nutritional support

#### Continuation of therapy

- A) Demonstrated decreased need in volume of intravenous parenteral nutrition or number of infusion days per week; AND
- B) Laboratory assessments done every 6 months

#### <u>References</u>:

1. Gattex [package insert]. Bedminster, NJ: NPS Pharmaceuticals; June 2014.



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#### **Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	03/10/2016
2	Update	Updated age restriction to match FDA Label, CCI Adopted EH Policy	Age Restriction	5/31/2019



Last Res.5.31.2019