

Market Applicability/Effective Date														
Market	FL & FHK	FL MMA	FL LTC	GA	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	X

*FHK- Florida Healthy Kids

Procysbi (cysteamine bitartrate, delayed release)

Override(s)	Approval Duration
Step Therapy	1 year

Medications	Quantity Limit
Procysbi (cysteamine bitartrate, delayed release)	N/A

APPROVAL CRITERIA

Requests for Procysbi (cysteamine bitartrate, delayed release) may be approved if the following criteria are met:

- I. Individual has had a trial and inadequate response or intolerance to Cystagon (cysteamine bitartrate).

State Specific Mandates		
N/A	N/A	N/A

Key References:

Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2015. URL: <http://www.clinicalpharmacology.com>. Updated periodically.

DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Accessed: June 23, 2015.

DrugPoints[®] System (electronic version). Truven Health Analytics, Greenwood Village, CO. Updated periodically.

Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2015; Updated periodically.

This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market-specific restrictions or transition-of-care benefit limitations may apply.