



Manual Prior Authorization

IRRITABLE BOWEL SYNDROME/SHORT BOWEL SYNDROME AGENTS

Patients on continuous therapy with Amitiza, Fulyzaq, Gattex, Linzess, Lotronex, Relistor or Zorbtive will be allowed to remain on the current agent. Continuous therapy is defined as 1 claim with the same agent in the past 105 days.

Detailed criteria for new starts are listed below:

Amitiza (lubiprostone)

Linzess (linaclotide)

Patient is 18 years of age or older; **AND**

Patient does not have a known or suspected mechanical gastrointestinal obstruction;
AND

Patient has one of the following diagnoses and symptoms:

A diagnosis of chronic idiopathic constipation (Amitiza or Linzess) **AND**

Documentation the patient is not currently taking constipation causing therapies

OR

A diagnosis of irritable bowel syndrome with constipation (Amitiza or Linzess)

AND

Documentation the patient is not currently taking constipation causing therapies

AND

Patient is female (Amitiza only)

OR

A diagnosis of opioid-induced constipation with chronic, non-cancer pain (Amitiza only)

AND

Patient has been receiving stable opioid therapy for at least 30 days as seen in the patient's pharmacy claims

AND

Patient must have documentation of adequate trials and therapy failures **with at least one medication from each of the following categories:**

Saline laxative (milk of magnesia)

AND

Osmotic laxative (polyethylene glycol or lactulose)

AND

Stimulant laxative (senna)

If the criteria for coverage are met, initial authorization will be given for 12 weeks to assess the response to treatment. Requests for continuation of therapy may be provided if prescriber documents adequate response to treatment.

Lotronex (alosetron)

Patient is 18 years of age or older

AND

Female

AND

Prescriber is enrolled in the Prometheus Prescribing Program for Lotronex

AND

Clinically diagnosed severe diarrhea – predominant irritable bowel syndrome and **one or more** of the following:

Frequent and severe abdominal pain/discomfort

OR

Frequent bowel urgency or fecal incontinence

OR

Disability or restriction of daily activities due to IBS

AND

IBS symptoms are chronic; lasting six months or longer

AND

IBS symptoms are not due to other GI medical conditions

Gattex (teduglutide)

Zorbtive (somatropin)

Patient is 18 years of age or older

AND

Diagnosis of short bowel syndrome

AND

Must be dependent on parenteral support/specialized nutritional support

Relistor (methylnaltrexone)

Patient is 18 years of age or older

AND

Patient has **one of the following** diagnoses and symptoms:

A diagnosis of opioid-induced constipation with chronic, non-cancer pain

OR

A diagnosis of opioid-induced constipation in patients with advanced illness receiving palliative care, when response to laxative therapy has not been sufficient.

AND

Patient must have documentation of adequate trials and therapy failures **with at least one medication from each of the following categories:**

Saline laxative (milk of magnesia)

AND

Osmotic laxative (polyethylene glycol or lactulose)

AND

Stimulant laxative (senna)

AND

Patient must have documentation of adequate trials and therapy failure with Amitza

Nutrestore Powder Pack (glutamine)

Patient is 18 years of age or older

AND

A diagnosis of short bowel syndrome

AND

Must be used in conjunction with recombinant human growth hormone approved for this indication (somatropin (Zorbtive))

Fulyzaq (crofelemer)

Diagnosis of HIV

AND

Treatment with antiretrovirals

AND

Diagnosis of non-infectious diarrhea

(ver. 2014-12-15)