

UnitedHealthcare Pharmacy
Clinical Pharmacy Programs

Program Number	2021 P 1035-9
Program	Prior Authorization/Notification
Medication	Gattex [®] (teduglutide [rDNA origin]), for injection, for subcutaneous use
P&T Approval Date	2/2013, 11/2013, 11/2014, 11/2015, 9/2016, 9/2017, 9/2018, 9/2019, 9/2020, 9/2021
Effective Date	12/1/2021; Oxford only: 12/1/2021

1. Background:

Gattex (teduglutide) is a glucagon-like peptide-2 (GLP-2) analog indicated for the treatment of adults and pediatric patients 1 year of age and older with Short Bowel Syndrome (SBS) who are dependent on parenteral support.

Members will be required to meet the coverage criteria below.

2. Coverage Criteria:

A. Initial Authorization

1. Gattex will be approved based upon **both** of the following criteria:

a. Diagnosis of Short Bowel Syndrome (SBS)

-AND-

b. Dependent on parenteral support.

Authorization will be issued for 6 months.

B. Reauthorization

1. Gattex will be approved based on the following criterion:

a. Documentation of positive clinical response to Gattex therapy

Authorization will be issued for 24 months.

3. Additional Clinical Rules:

- Notwithstanding Coverage Criteria, UnitedHealthcare may approve initial and re-authorization based solely on previous claim/medication history, diagnosis codes (ICD-10) and/or claim logic. Use of automated approval and re-approval processes varies by program and/or therapeutic class.
- Supply limits may be in place.

4. Reference:

1. Gattex [package insert]. Lexington, MA: Shire-NPS Pharmaceuticals, Inc.; January 2021.

Program	Prior Authorization/Notification - Gattex (teduglutide [rDNA origin]) Notification
Change Control	
2/2013	New criteria.
11/2013	Formatting update. Removal of dose information in Background Section.
11/2014	Annual review. Increased reauthorization approval duration to 60 months.
11/2015	Annual review. Revised initial authorization criteria to remove 12 consecutive months of PN/IV support therapy.
9/2016	Annual review. Reduced reauthorization approval duration to 24 months. Updated reference.
9/2017	Annual review. No changes.
9/2018	Annual review. No changes.
9/2019	Annual review. Updated background and references. No changes to criteria.
9/2020	Annual review. No changes to criteria.
9/2021	Annual review with no changes to criteria. Updated references.