## Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

## Tacrolimus extended-release (Astagraf XL)

## Initiation (new start) criteria:

Non-formulary **tacrolimus extended-release capsule (Astagraf XL)** will be covered on the prescription drug benefit when the following criteria are met:

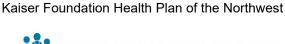
- Patient is 16 years of age or older
- Patient received a kidney transplant and the indication of tacrolimus extended-release capsule is to prevent organ rejection following kidney transplant
- Tacrolimus extended-release capsules will be concurrently used with a corticosteroid and mycophenolate
- Patient has documented intolerance to immediate release tacrolimus, or unable to adhere to twice daily dosing requirements of immediate release tacrolimus, or maintain adequate tacrolimus levels with immediate release tacrolimus

## -OR-

Patient is currently stabilized on tacrolimus extended-release capsule

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