STANDARD COMMERCIAL DRUG FORMULARY
PRIOR AUTHORIZATION GUIDELINES

TRIENTINE - CUVRIOR

Generic	Brand	HICL	GCN	Medi-Span	Exception/Other
TRIENTINE TETRAHYDROCHLORIDE	CUVRIOR	45888		GPI-10 (9920002020)	

GUIDELINES FOR USE

INITIAL CRITERIA (NOTE: FOR RENEWAL CRITERIA SEE BELOW)

1. Does the patient have a diagnosis of Wilson's disease and meet **ALL** of the following criteria?
   - The patient is 18 years of age or older
   - The patient has a prior or current Leipzig score of 4 or greater
   - The patient has a non-ceruloplasmin copper (NCC) level between 50 to 150 mcg/L or a 24-hour urinary copper excretion (UCE) of between 100 to 500 mcg/24 hours
   - Therapy is prescribed by or in consultation with a hepatologist or gastroenterologist
   - The patient is willing to maintain a diet that avoids high copper foods (e.g., shellfish, nuts, chocolate, mushrooms, organ meat)
   - The patient had a trial of penicillamine (Depen, Cuprimine) for at least one year prior to starting Cuvrior
   - The patient had a trial of trientine hydrochloride (Syprine)

   If yes, **approve for 12 months by HICL or GPI-10 with a quantity limit of #10 per day.**
   If no, do not approve.
   INITIAL DENIAL TEXT: *Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.

   Our guideline named **TRIENTINE - CUVRIOR** requires the following rule(s) be met for approval:
   A. You have Wilson's disease (a genetic disorder that leads to copper accumulation in the organs)
   B. You are 18 years of age or older
   C. You have a prior or current Leipzig score (a type of diagnostic score) of 4 or higher
   D. You have a non-ceruloplasmin copper (NCC: a type of test to check copper levels) level between 50 to 150 mcg/L or a 24-hour urinary copper excretion (UCE: a type of test to check copper levels) between 100 to 500 mcg per 24 hours
   E. Therapy is prescribed by or in consultation with a hepatologist (a type of liver doctor) or gastroenterologist (a type of digestive system doctor)
   F. You are willing to maintain a diet that avoids high copper foods (such as shellfish, nuts, chocolate, mushrooms, organ meat)
   G. You had a trial of penicillamine (Depen, Cuprimine) for at least one year prior to starting Cuvrior
   H. You had a trial of trientine hydrochloride (Syprine)
   (Initial denial text continued on the next page)

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TRIENTINE - CUVRIOR

INITIAL CRITERIA (CONTINUED)

Your doctor told us [INSERT PT SPECIFIC INFO PROVIDED]. We do not have information showing you [INSERT UNMET CRITERIA]. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

RENEWAL CRITERIA

1. Does the patient have a diagnosis of Wilson's disease **AND** meet the following criterion?
   - The patient's copper levels are monitored via non-ceruloplasmin copper (NCC) or 24-hour urinary copper excretion (UCE) laboratory test

   If yes, **approve for lifetime by HICL or GPI-10 with a quantity limit of #10 per day.**
   If no, do not approve.
   RENEWAL DENIAL TEXT: *Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.

   Our guideline named **TRIENTINE - CUVRIOR** requires the following rules be met for renewal:
   A. You have Wilson's disease (a genetic disorder that leads to copper accumulation in the organs)
   B. Your body's copper levels are monitored by a non-ceruloplasmin copper (NCC: a type of test to check copper levels) test or 24-hour urinary copper excretion (UCE: a type of test to check copper levels) test

   Your doctor told us [INSERT PT SPECIFIC INFO PROVIDED]. We do not have information showing you [INSERT UNMET CRITERIA]. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

RATIONALE

For further information, please refer to the Prescribing Information and/or Drug Monograph for Cuvrior.

REFERENCES

- Cuvrior [Prescribing Information]. Paris, France: Orphalan SA; April 2022.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A
Commercial Effective: 05/08/23
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