

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

L-glutamine (Endari)

Notes:

- Quantity Limits: Yes
- ^ Adequate trial is defined as 3 months treatment duration

Initiation (new start) criteria: Non-formulary **L-glutamine (Endari)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient is at least 5 years old
- Medication is prescribed by a hematologist/oncologist
- Patient has a diagnosis of sickle cell anemia or sickle beta-thalassemia (documented by hemoglobin electrophoresis)
- Patient is currently taking hydroxyurea for a minimum of three months OR has failed an adequate trial[^] of hydroxyurea or patient declines use due to potential adverse effects
- Patient has one of the following:
 - Two or more sickle cell pain crises within prior 12 months requiring intervention (home-managed, hospitalizations, emergency department or urgent care visits)
 - History of acute chest syndrome (documented by pulmonary infiltrate on chest X-ray)

Criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously: Non-formulary **L-glutamine (Endari)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient is at least 5 years old
- Medication is prescribed by a hematologist/oncologist
- Patient has a diagnosis of sickle cell anemia or sickle beta-thalassemia (documented by hemoglobin electrophoresis)
- Patient is currently taking hydroxyurea OR has failed an adequate trial[^] of hydroxyurea or patient declines use due to potential adverse effects

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Criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously: Non-formulary L-glutamine (Endari) will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient is at least 5 years old
- Patient has a diagnosis of sickle cell anemia or sickle beta-thalassemia (documented by hemoglobin electrophoresis)
- Patient is currently taking hydroxyurea OR has failed an adequate trial[^] of hydroxyurea or patient declines use due to potential adverse effects

Continued use criteria for patients previously approved per the above criteria who are currently stable on the medication: Non-formulary L-glutamine (Endari) will continue to be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient has had a reduction in frequency of sickle cell pain crises and/or acute chest syndrome events