

LINZESS
(linaclotide)

Pre - PA Allowance

None

Prior-Approval Requirements

Diagnoses

Patient must have **ONE** of the following:

1. Chronic idiopathic constipation (CIC)
 - a. 18 years of age or older
2. Irritable bowel syndrome with constipation (IBS-C)
 - a. 18 years of age or older
3. Functional constipation (FC)
 - a. 6 to 17 years of age

AND ALL of the following for **ALL** indications:

- a. Absence of gastrointestinal obstruction
- b. **NO** dual therapy with other legend constipation medications (see Appendix 1)

Prior - Approval Limits

Quantity

Medication	Quantity Limit
72 mcg	90 capsules per 90 days
145 mcg	
290 mcg	

Duration 12 months

Prior – Approval *Renewal* Requirements

Diagnoses

Patient must have **ONE** of the following:

1. Chronic idiopathic constipation (CIC)
 - a. 18 years of age or older
2. Irritable bowel syndrome with constipation (IBS-C)
 - a. 18 years of age or older

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3. Functional constipation (FC)
 - a. 6 to 17 years of age

AND ALL of the following for **ALL** indications:

- a. Improvement in constipation symptoms
- b. Absence of gastrointestinal obstruction
- c. **NO** dual therapy with other legend constipation medications (see Appendix 1)

Prior - Approval *Renewal* Limits

Same as above

Appendix 1 - List of Legend Constipation Medications

Generic Name	Brand Name
linaclotide	Linzess
lubiprostone	Amitiza
methylnaltrexone	Relistor
naldemedine	Symproic
naloxegol	Movantik
plecanatide	Trulance
prucalopride	Motegrity
tenapanor	Ibsrela