



BUPHENYL tablet, powder for solution (sodium phenylbutyrate)
OLPRUVA packets for oral suspension (sodium phenylbutyrate)
PHEBURANE oral pellets (sodium phenylbutyrate)

Pre - PA Allowance

None

Prior-Approval Requirements

Diagnosis

Patient must have the following:

Urea cycle disorders (UCDs) involving deficiencies of carbamylphosphate synthetase (CPS), ornithine transcarbamylase (OTC), or argininosuccinic acid synthetase (AS)

AND ALL of the following:

- Failure to control ammonia level with dietary restrictions and/or amino acid supplementation
- Prescribing physician should be experienced in the management of UCDs
- Prescriber agrees to monitor electrolytes at baseline and as clinically indicated
- Must be used with dietary protein restrictions
- NO** acute hyperammonemic encephalopathy

Prior - Approval Limits

Duration 2 years

Prior – Approval *Renewal* Requirements

Diagnosis

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AND the following:

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**BlueCross.
BlueShield.**

Federal Employee Program.

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Prior – Approval *Renewal* Limits

Same as above