# REGRANEX (becaplermin)

### **Pre - PA Allowance**

None

# **Prior-Approval Requirements**

Age 16 years of age or older

## Diagnoses

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

- 1. Diabetes
- 2. Lower extremity neuropathic ulcers
  - a. That extend into the subcutaneous tissue or beyond with adequate blood supply

#### **AND NONE** of the following:

- 1. Neoplasm(s) at the sites(s) of application
- 2. Use in pressure ulcers, venous stasis ulcers, or ischemic diabetic ulcers
- 3. Exposed joints, tendons, ligaments, and bone (at application site)
- 4. Use in wounds that close by primary intention (such as suturing or gluing)

# **Prior - Approval Limits**

**Duration** 3 tubes per 20 weeks

# Prior - Approval Renewal Requirements

Same as above

## Prior - Approval Renewal Limits

Same as above