



## Pre - PA Allowance

None

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## Prior-Approval Requirements

**Age** 18 years of age and older

### Diagnoses

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

1. Acromegaly
  - a. Inadequate treatment response or patient is **NOT** a candidate for **ALL** of the following:
    - i. Surgery resection
    - ii. Pituitary irradiation
    - iii. A dopamine agonist (e.g., bromocriptine, cabergoline, etc.)
  - b. Response to and tolerance of prior treatment with 2 weeks of immediate release octreotide
2. Severe diarrhea or flushing episodes associated with metastatic carcinoid tumor(s)
  - a. Response to and tolerance of prior treatment with 2 weeks of immediate release octreotide
  - b. Prescriber agrees to simultaneously administer Sandostatin LAR and immediate release octreotide injections for at least two weeks when initiating therapy
3. Profuse watery diarrhea associated with VIP-secreting tumor(s)
  - a. Response to and tolerance of prior treatment with 2 weeks of immediate release octreotide
  - b. Prescriber agrees to simultaneously administer Sandostatin LAR and immediate release octreotide injections for at least two weeks when initiating therapy
4. Neuroendocrine Tumor of the Gastrointestinal Tract or Pancreas (GEP-NETs)

## Prior - Approval Limits

**Duration** 12 months

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**BlueCross.  
BlueShield.**

Federal Employee Program.

**SANDOSTATIN LAR  
(octreotide acetate)**

## **Prior – Approval *Renewal* Requirements**

**Age** 18 years of age or older

### **Diagnoses**

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

1. Acromegaly
2. Severe diarrhea or flushing episodes associated with metastatic carcinoid tumor(s)
3. Profuse watery diarrhea associated with VIP-secreting tumor(s)
4. Neuroendocrine Tumor of the Gastrointestinal Tract or Pancreas (GEP-NETs)

**AND** the following:

- a. **NO** disease progression or unacceptable toxicity

## **Prior – Approval *Renewal* Limits**

Same as above