This policy applies to the following:

	This policy applies to the following.						
✓	Standard Control (SF)	Managed Medicaid Template (MMT)		ACSF Chart (ACSFC)	Medical Benefit		Medicare Part B
✓	Standard Control – Choice (SCCF)	Marketplace (MF)		SF Chart (SFC)	Medical: Advanced Biosimilars First		Medicare Part B: Biosimilars First
	Preferred Drug Plan Design (PDPD)	Aetna Health Exchange (AHE)	✓	VF Chart (VFC)	Medical Benefit: Managed Medicaid		Medicare Part B: Advanced Biosimilars First
✓	Advanced Control Specialty (ACSF)	IVL		New to Market (NTM)	Medical Benefit: Add-on		
✓	Advanced Control Specialty – Choice (ACSCF)	✓ Value (VF)					

Reference #
6548-D

EXCEPTIONS CRITERIA CYSTINURIA

PREFERRED PRODUCT: TIOPRONIN AND TIOPRONIN DR

POLICY

This policy informs prescribers of preferred products and provides an exception process for targeted products through prior authorization.

I. PLAN DESIGN SUMMARY

This program applies to cystinuria products specified in this policy. Coverage for targeted products is provided based on clinical circumstances that would exclude the use of the preferred product and may be based on previous use of a product. The coverage review process will ascertain situations where a clinical exception can be made. This program applies to all members requesting treatment with a targeted product.

Each referral is reviewed based on all utilization management (UM) programs implemented for the client.

Table. Cystinuria products

	Product(s)		
Preferred*	tiopronin (generic)		
	tiopronin DR (generic)		
Targeted	Thiola (tiopronin)		
	Thiola EC (tiopronin)		

^{*:} Medications considered formulary or preferred on your plan may still require a clinical prior authorization review.

II. EXCEPTION CRITERIA

Coverage for a targeted product is provided when the member had a documented intolerable adverse event to a preferred product, and the adverse event was not an expected adverse event attributed to the active ingredient as described in the prescribing information.

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This policy applies to the following:

111118	s policy applies to the	101	iowing.				
✓	Standard Control (SF)		Managed Medicaid Template (MMT)		ACSF Chart (ACSFC)	Medical Benefit	Medicare Part B
✓	Standard Control – Choice (SCCF)		Marketplace (MF)		SF Chart (SFC)	Medical: Advanced Biosimilars First	Medicare Part B: Biosimilars First
	Preferred Drug Plan Design (PDPD)		Aetna Health Exchange (AHE)	1	VF Chart (VFC)	Medical Benefit: Managed Medicaid	Medicare Part B: Advanced Biosimilars First
✓	Advanced Control Specialty (ACSF)		IVL		New to Market (NTM)	Medical Benefit: Add-on	
✓	Advanced Control Specialty – Choice (ACSCF)	✓	Value (VF)				

Reference #
6548-D

REFERENCES

- 1. Thiola [package insert]. San Antonio, TX: Mission Pharmacal Company; January 2021.
- 2. Thiola EC [package insert]. San Antonio, TX: Mission Pharmacal Company; March 2021.
- Tiopronin [package insert]. Parsippany, NJ: Teva Pharmaceutical USA, Inc.; February 2021.
- Tiopronin DR [package insert]. Basking Ridge, NJ: Torrent Pharma Inc.; February 2024.

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