

Reference number(s)

4350-A

Specialty Guideline Management Chenodal

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated

Brand Name	Generic Name
Chenodal	chenodiol

Indications

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-approved Indications¹

Chenodal is indicated for patients with radiolucent stones in well-opacifying gallbladders, in whom selective surgery would be undertaken except for the presence of increased surgical risk due to systemic disease or age. The likelihood of successful dissolution is far greater if the stones are floatable or small. For patients with nonfloatable stones, dissolution is less likely and added weight should be given to the risk that more emergent surgery might result from a delay due to unsuccessful treatment. Safety of use beyond 24 months is not established. Chenodal will not dissolve calcified (radiopaque) or radiolucent bile pigment stones.

All other indications are considered experimental/investigational and not medically necessary.

Documentation

Submission of the following information is necessary to initiate the prior authorization review: Chart notes

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or medical record documentation supporting an inadequate treatment response or an intolerance to ursodiol.

Coverage Criteria

Radiolucent Stones in Well-Opacifying Gallbladders¹⁻³

[Note: Chenodal will not dissolve calcified (radiopaque) or radiolucent bile pigment stones.]

Authorization of 12 months may be granted for treatment of members with radiolucent stones in wellopacifying gallbladders when all of the following criteria are met:

- Member has an increased surgical risk due to systemic disease or age.
- Member experienced an inadequate treatment response or intolerance to ursodiol.
- Member will not exceed a dose of 16 mg/kg/day. Member's current weight must be provided.

Continuation of Therapy

Radiolucent Stones in Well-Opacifying Gallbladders¹

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization when all of the following criteria are met:

- Member has experienced partial (or complete) dissolution of stones, or member has not experienced a partial dissolution and provider will discontinue therapy with the requested drug if response is not seen by 18 months of treatment.
- Member has not experienced signs and symptoms of hepatoxicity (e.g., abdominal pain, bruising, dark-colored urine, jaundice).
- Member will not exceed a dose of 16 mg/kg/day. Member's current weight must be provided.
- Cumulative use with Chenodal will not exceed 24 months.

References

- 1. Chenodal [package insert]. San Diego, CA: Travere Therapeutics; December 2024.
- 2. Micromedex (electronic version). Merative; 2025. Accessed March 7, 2025. https://www.micromedexsolutions.com
- 3. Abraham S, Rivero HG, Erlikh IV, Griffith LF, Kondamudi VK. Surgical and nonsurgical management of gallstones. Am Fam Physician. 2014;89(10):795-802.

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