

**Elaprase (idursulfase)  
Effective 09/01/2021**

<b>Plan</b>	<input checked="" type="checkbox"/> MassHealth <input type="checkbox"/> Commercial/Exchange	<b>Program Type</b>	<input checked="" type="checkbox"/> Prior Authorization <input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
<b>Benefit</b>	<input type="checkbox"/> Pharmacy Benefit <input checked="" type="checkbox"/> Medical Benefit (NLX)		
<b>Specialty Limitations</b>	N/A		
<b>Contact Information</b>	<b>Specialty Medications</b>		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	<b>Non-Specialty Medications</b>		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	<b>Medical Specialty Medications (NLX)</b>		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
<b>Exceptions</b>	N/A		

**Overview**

Elaprase (idursulfase) is a recombinant form of the enzyme iduronate-2-sulfatase that is indicated for patients with mucopolysaccharidosis II (Hunter syndrome).

**Coverage Guidelines**

Authorization may be granted for members new to AllWays Health Partners who are currently receiving treatment with Elaprase excluding when the product is obtained as samples or via manufacturer’s patient assistance programs.

**OR**

Authorization of 12 months may be granted for treatment of MPS II when the diagnosis of MPS II was confirmed by enzyme assay demonstrating a deficiency of iduronate 2-sulfatase enzyme activity or by genetic testing.

**Continuation of Therapy**

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for Mucopolysaccharidosis II (MPS II) who are responding to therapy (e.g., improvement, stabilization, or slowing of disease progression for 6-minute walk test [6-MWT], percent predicted forced vital capacity [%-predicted FVC], spleen volume, or liver volume).

**Limitations**

1. Initial authorizations and reauthorizations will be granted for 12 months

**References**



1. Elaprase (idursulfase) [prescribing information]. Cambridge, MA: Shire Human Genetic Therapies Inc; November 2018.
2. Idursulfase. Lexi-Drugs. Lexicomp Online. Hudson, OH: Wolters Kluwer Clinical Drug Information Inc. <http://online.lexi.com>. Accessed July 1, 2016.

### **Review History**

01/20/2021—Reviewed Jan P&T, changed from CVS template to custom template; overview added, and references updated. Effective 09/01/2021.

### **Disclaimer**

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