

Oseltamivir



Included Products: Tamiflu (oseltamivir)

Created: 05/23/2008

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Reviewed: 09/12/2013

Updated: 10/06/2021

All Diagnoses

Quantity Exception Criteria		If yes	If no
1.	Is the member older than 1 year of age?	Continue to #2	Do not approve.
2.	Is Tamiflu being used to treat influenza?	And the member has exceeded the annual quantity limit of 2 treatments/20 capsules) which does not require PA, review for clinical appropriateness.	Continue to #3.
3.	Is Tamiflu being used for influenza prophylaxis (prevention)?	Continue to #4.	Continue to #5.
4.	Has the member been exposed to the influenza virus (household or community outbreak)?	Continue to #5.	Do not approve.

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<p>5.</p>	<p>Does the member have any of the following that places them at high risk for developing influenza complications?</p> <ul style="list-style-type: none"> a. ≥ 65 years of age b. Pregnancy (category C) c. Children meeting the age limit or teenagers who are receiving long-term aspirin treatment and may be at risk for developing Reye’s syndrome. d. Cardiovascular disease except hypertension e. Chronic pulmonary disease (asthma or COPD) f. Weakened immune system due to HIV/AIDS, immunosuppressive medications (e.g. transplant, steroids, TNFs), chemotherapy or radiation therapy g. Renal disease h. Hematological disorders (i.e. anemia) i. Metabolic disease such as diabetes mellitus j. Any muscle or nerve condition (e.g. spinal cord injuries, seizures, or cerebral palsy) or cognitive dysfunction that can lead to difficulty breathing or swallowing and increase the aspiration risk k. Residents of nursing homes or other long-term care facilities l. Currently resides with or cares for high-risk people (meeting one of the above criteria) 	<p>Continue to #6.</p>	<p>Do not approve.</p>
<p>6.</p>	<p>Approve with the following duration:</p> <ul style="list-style-type: none"> a. 10 day therapy for household or community outbreaks. b. 30 days for institutional outbreaks. If an extension needed then the provider needs to submit another prior authorization request. 		

<h2>Treatment Dosing</h2>			
Body Weight	Recommended Dose for 5 days	Number of Bottles of the Oral Suspension (6mg/ml)	Number of Capsules (30mg, 45mg, 75mg)
≤ 15kg	30mg BID	1	10 of 30mg
16 to 23kg	45mg BID	2	10 of 45mg
24 to 40kg	60mg BID	2	20 of 30mg
> 40kg	75mg BID	3	10 of 75mg

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Prophylaxis for Household Outbreaks

Body Weight	Recommended Dose for 5 days	Number of Bottles of the Oral Suspension (6mg/ml)	Number of Capsules (30mg, 45mg, 75mg)
≤ 15kg	30mg QD	1	10 of 30mg
16 to 23kg	45mg QD	2	10 of 45mg
24 to 40kg	60mg QD	2	20 of 30mg
> 40kg	75mg QD	3	10 of 75mg