

TOLVAPTAN



Included Products: Jynarque (tolvaptan)

Created: 9/13/2018

Revised: 5/9/2024

Reviewed: 5/9/2024

Updated: 5/9/2024

All Diagnoses			
Initial Criteria: All Diagnoses		If yes	If no
1.	Is the member at least 18 years old and less than or equal to 50 years old?	Continue to #2.	Do not approve.
2.	Is Jynarque being prescribed by a nephrologist?	Continue to #3.	Do not approve.
3.	Does the member have a diagnosis of typical ADPKD with high risk of disease progression (i.e. Mayo Classification of 1C, 1D, or 1E)?	Continue to #4.	Do not approve.
4.	Is the member's GFR greater than 25 ml/min?	Continue to #5.	Do not approve.
5.	Does the member have stage 3 chronic kidney disease?	Continue to #6.	Do not approve.
6.	Does the member documentation of no liver impairment (including normal baseline ALT/AST)?	Continue to #7.	Do not approve.
7	Approve for 12 months.		
Renewal Criteria		If yes	If no
1.	Is there evidence of current GFR greater than 25 ml/min and continued monitoring by nephrologist?	Continue to #2.	Do not approve.
2.	Approve for 12 months.		