

Varicella Zoster Immune Globulin



Included Products: Varizig (varicella zoster immune globulin)

Nonformulary for outpatient benefit. PA required on medical benefit.

Created: 09/12/2013

Revised: 09/12/2013

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Updated: 09/23/2021

All Diagnoses

Initial Criteria		If yes	If no
1.	Was the member diagnosed with chicken pox and the exposure occurred within the last 4 days?	Continue to #2.	Do not approve.
2.	Is the member in one of the following high risk categories? Immunocompromised children and adults a. Newborns of mothers with varicella before or after delivery b. Premature infants, neonates, and infants < 1 year c. Adults without evidence of immunity d. Pregnant woman	Continue to #3.	Do not approve.
3.	Approve one dose.		