SPECIALTY GUIDELINE MANAGEMENT

NATPARA (parathyroid hormone)

POLICY

I. 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 Indication

Natpara is indicated as an adjunct to calcium and vitamin D to control hypocalcemia in patients with hypoparathyroidism.

Limitations of Use:

- *Because of the potential risk of osteosarcoma, Natpara is recommended only for patients who cannot be well-controlled on calcium supplements and active forms of vitamin D alone.*
- *Natpara was not studied in patients with hypoparathyroidism caused by calcium-sensing receptor mutations.*
- *Natpara was not studied in patients with acute post-surgical hypoparathyroidism.*

All other indications are considered experimental/investigational and are not a covered benefit.

II. EXCLUSIONS

Coverage will not be provided for members with the following exclusion:
Acute postsurgical hypoparathyroidism (within 6 months of surgery) and expected to recover[2]

III. CRITERIA FOR INITIAL APPROVAL

Authorization of 12 months may be granted for members who are initiating treatment with Natpara for the treatment of hypocalcemia associated with hypoparathyroidism.

IV. CONTINUATION OF THERAPY

All members (including new members) requesting authorization for continuation of therapy must meet all initial authorization criteria.

V. REFERENCES

1. Natpara [package insert]. Bedminster, NJ: NPS Pharmaceuticals, Inc.; July 2016.
2. Khan MI, Waguespack SG, Hu MI. Medical management of postsurgical hypoparathyroidism. *Endocr Pract*. 2011;17(Suppl 1): 18-25.