

PREFERRED SPECIALTY MANAGEMENT POLICY

POLICY: Metabolic Disorders – Betaine Anhydrous Preferred Specialty Management Policy

- Cystadane® (betaine anhydrous powder – Recordati Rare Diseases, generic)

REVIEW DATE: 08/30/2023

OVERVIEW

Betaine anhydrous powder (Cystadane, generic), a methylating agent, is indicated for the treatment of **homocystinuria** to decrease elevated homocysteine blood concentrations in pediatric and adult patients.¹

POLICY STATEMENT

This Preferred Specialty Management program has been developed to encourage the use of the Preferred Product. For all medications (Preferred and Non-Preferred), the patient is required to meet the respective standard *Prior Authorization Policy* criteria. The program directs the patient to try one Preferred Product prior to the approval of a Non-Preferred Product. Requests for Non-Preferred Products will also be reviewed using the exception criteria (below). All approvals are provided for the duration noted below. If the patient has not tried a Preferred Product, approval for a Preferred Product will be authorized.

Documentation: Documentation is required for use of betaine anhydrous powder as noted in the criteria as **[documentation required]**. Documentation may include, but is not limited to, chart notes, prescription claims records, prescription receipts, and/or other information.

Automation: None.

Preferred Product: generic betaine anhydrous powder

Non-Preferred Product: Cystadane powder

RECOMMENDED EXCEPTION CRITERIA

08/30/2023

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REFERENCES

1. Cystadane® powder [prescribing information]. Lebanon, NJ: Recordati Rare Diseases; October 2019.