

Reference number
1960-H

SPECIALTY QUANTITY LIMIT PROGRAM

SIGNIFOR LAR (pasireotide)

I. PROGRAM DESCRIPTION

The standard limit is designed to allow a quantity sufficient for the most common uses of the medication. The recommended dosing parameters for all FDA-approved indications fall within the standard limits. Coverage of an additional quantity may be reviewed on a case-by-case basis upon request.

II. COVERED QUANTITIES

Medication	Standard Limit	FDA-recommended dosing
Signifor LAR 10 mg kit	1 kit per 28 days	<p>Acromegaly: 40 mg once every 4 weeks (every 28 days)*</p> <p>20 mg every 4 weeks recommended as initial dose for moderately impaired hepatic function (maximum recommended dose 40 mg every 4 weeks)</p> <p>*May be increased to a maximum of 60 mg for patients who have not normalized growth hormone and/or age and sex adjusted insulin-like growth factor-1 levels after 3 months of treatment with Signifor LAR at 40 mg.</p> <p>Dose may be decreased, either temporarily or permanently, by 20 mg decrements for management of adverse reactions or over-response to treatment.</p> <p>Cushing's disease: 10 mg once every 4 weeks (every 28 days)*</p> <p>10 mg every 4 weeks recommended as initial dose for moderately impaired hepatic function (maximum recommended dose 20 mg every 4 weeks)</p> <p>*May be increased to a maximum of 40 mg for patients who have not normalized 24-hour urinary free cortisol (UFC) and who tolerate this dose after 4 months of treatment with Signifor LAR at 10 mg.</p> <p>Dose may be decreased, interrupted, or discontinued for management of adverse reactions or over-response to treatment.</p>
Signifor LAR 20 mg kit	1 kit per 28 days	
Signifor LAR 30 mg kit	1 kit per 28 days	
Signifor LAR 40 mg kit	1 kit per 28 days	
Signifor LAR 60 mg kit	1 kit per 28 days	

Reference number
1960-H

III. REFERENCES

1. Signifor LAR [package insert]. East Hanover, NJ: Novartis Pharmaceuticals Corporation; June 2018.