Reference number	
1697-H	

# SPECIALTY QUANTITY LIMIT PROGRAM

# **VPRIV** (velaglucerase alpha)

### I. PROGRAM DESCRIPTION

The standard limit is designed to allow a quantity sufficient for the most common uses of the medication. If the member's plan allows a quantity limit exception review for the requested medication, coverage of an additional quantity may be provided up to the exception limit with prior authorization.

### II. COVERED QUANTITIES

Medication	Standard Limit	Exception Limit*	FDA-recommended dosing
VPRIV (velaglucerase alpha) injection 400 units vial	15 vials per 14 days	30 vials per 14 days	60 units/kg infusion every other week

<sup>\*</sup>Coverage up to the exception limits may be provided with prior authorization via the Specialty Post Limit Quantity Exception Criteria for approval.

### **III. REFERENCES**

1. VPRIV [package insert]. Lexington, MA: Shire Human Genetic Therapies, Inc.; April 2015.



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