

PHARMACY POLICY STATEMENT North Carolina Marketplace

DRUG NAME	Gamastan (immune globulin (human))
BILLING CODE	J1460; J1560
BENEFIT TYPE	Medical
STATUS	Prior Authorization Required

Background statement: Gamastan is a human immune globulin solution for intramuscular injection, initially approved by the FDA in 1944 with prescribing information updated in 2018. Indications for Gamastan include preexposure and postexposure prophylaxis for hepatitis A, prevention or modification of measles (Rubeola) following exposure, modification of varicella following exposure, and modification of rubella in exposed women not considering therapeutic abortion. Gamastan is a polyclonal antibody which acts as a passive immunizing agent to neutralize viruses and remedy disease. Gamastan is made from human blood and carries the potential risk of transmitting infection.

Gamastan (immune globulin (human)) will be considered for coverage when the following criteria are met:

Hepatitis A

For **initial** authorization:

1. Medication is prescribed by or in consultation with an infectious disease specialist; AND
2. Member meets one of the following:
 - a) Has been exposed to hepatitis A within the past 2 weeks
 - b) Traveling to an area with endemic hepatitis A and Gamastan will be administered prior to departure; AND
3. Member does not have clinical manifestations of hepatitis A; AND
4. **Dosage allowed/Quantity limit:**

Administer within two weeks of prior exposure	0.1 mL/kg IM (0.05 mL/lb.)
Administer before travel to areas with endemic hepatitis A:	
Length of stay up to 1 month	0.1 mL/kg IM
Length of stay up to 2 months	0.2 mL/kg IM

If all the

Measles (Rubeola)

For

Rubella

For **initial** authorization:

1. Medication is prescribed by or in consultation with an infectious disease specialist; AND
2. Member is pregnant; AND
3. Member was exposed to rubella within the last 72 hours; AND
4. Member will not consider therapeutic abortion; AND
5. **Dosage allowed/Quantity limit:** 0.55 mL/kg IM

If all the above requirements are met, one dose of the medication will be approved for 7 days.

For **reauthorization**:

1. Medication will not be reauthorized.

CareSource considers Gamastan (immune globulin (human)) not medically