Qualified Health Plans offered in North Carolina by CareSource North Carolina Co., d/b/a CareSource.



For **initial** authorization:

- 1. Member must have a diagnosis of SHOX gene deficiency confirmed by genetic analyses (*must include documentation*); AND
- 2. Medication must be prescribed by an endocrinologist; AND
- 3. Member's pre-treatment height is > 2 SD below the mean and 1 year height velocity is > 1 SD below the mean for age (*must include growth charts and documentation*); AND
- 4. If member is age 12 or older, the member's epiphyses are open, confirmed by radiograph of the wrist and hand (*x-ray results must be included*). Comparison of bone age to chronological age should be documented as abnormal by > 2 SD below the mean for chronological age.
- 5. **Dosage allowed:** 0.35 mg/kg/week.

If member meets all the requirements listed above, the medication will be approved for 12 months. For <u>reauthorization</u>:

1.



If member meets all the reauthorization requirements above, the medication will be approved for an additional 12 months.

TURNER SYNDROME

For **initial** authorization:

1. Member must have a documented 90-



- Pediatric growth failure due to chronic kidney disease
- Prader-Willi Syndrome
- Wound healing in burns patients

DATE



20. Blum WF, Crowe BJ, Quigley CA, et al. Growth hormone in effective in treatment of short stature associated with short stature homeobox-containing gene deficiency: two-year results of a randomized, controlled, multicenter trial. J Clin Endocinol Metab. 2007; 92: 219-



 3) Pituitary hormones, other than growth hormone (GH): Adrenocorticotropic hormone (ACTH) Antidiuretic hormone (ADH) Follicle stimulating hormone (FSH) Luteinizing hormone (LH) Oxytocin Prolactin Thyroid stimulating hormone (TSH)