
CareSource
Innovations

**CareSource considers Tegsedi (inotersen) not medically necessary for the treatment of conditions that are not listed in this document. For any other indication, please refer to the Off-Label policy.**

| DATE | ACTION/DESCRIPTION |
|---|---|
| **08/07/2019** | New policy for Tegsedi created. |
| **07/06/2020** | physicians who specialize in treating amyloidosis. Simplified diagnostic requirement of hATTR to just any method of confirmation by chart notes. Separated genetic testing and FAP staging into their own mandatory requirements. Removed the following exclusions: type 1 or type 2 DM, sensorimotor or autonomic neuropathy, Acute Coronary Syndrome or major surgery, HF Class III, anticipated survival less than 2 years. |
| **08/03/2022** | Transferred to new template. Updated and added references. Removed other specialists except neurology. Removed exclusions except liver transplant. Added baseline monitoring (platelets, UPCR, GFR). Simplified FAP stage descriptions. Increased initial auth duration from 6 mo to 9 mo. Edited renewal criteria. |
| **02/22/2024** | Simplify reauth criteria and allow stabilization as well as improvement. Added Wainua to list of drugs not to be used in combination with. |

References:


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