

Market Applicability/Effective Date															
Market	FL & FHK	FL MMA	FL LTC	GA	IND	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	X	NA	NA	X	X	NA	X	X	X	X	X	X	NA	NA	X

*FHK- Florida Healthy Kids

Medication	Strength	Comments
Oxandrin (oxandrolone)	2.5mg, 10mg tablets	N/A

OVERRIDE(S)

Prior Authorization of Benefits

APPROVAL DURATION

6 months

APPROVAL CRITERIA

Requests for Oxandrin (oxandrolone) may be approved for individuals who meet the following criteria:

- I. Individual is using as an adjunct to conventional therapy to promote weight gain after weight loss following one of the following:
 - a. Extensive surgery; **OR**
 - b. Chronic infections; **OR**
 - c. Severe trauma;

OR

- II. Individual is using as an adjunct to conventional therapy to promote weight gain or maintain a normal weight following weight loss from an unexplained pathophysiologic reason;

OR

- III. Individual is using as an adjunct to conventional therapy to offset protein catabolism (such as, muscle wasting) associated with prolonged corticosteroid administration;

OR

- IV. Individual is using as an adjunct to conventional therapy to relieve osteoporosis-related bone pain.

Oxandrin (oxandrolone) may not be approved for any of the following:

- I. Known or suspected carcinoma of the prostate or breast in male individuals; **OR**
- II. Carcinoma of the breast in females with hypercalcemia; **OR**
- III. Individual is using to enhance athletic performance or physique; **OR**

This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market specific restrictions or transition-of-care benefit limitations may apply.

Market Applicability/Effective Date															
Market	FL & FHK	FL MMA	FL LTC	GA	IND	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	X	NA	NA	X	X	NA	X	X	X	X	X	X	NA	NA	X

*FHK- Florida Healthy Kids

- IV. Individual has a diagnosis of nephrosis (nephrotic phase of nephritis); **OR**
- V. Individual has a diagnosis of hypercalcemia.

Note: Oxandrin (oxandrolone) has black box warnings for the risk of peliosis hepatis, liver cell tumors, and blood lipid changes. Peliosis hepatis, a condition in which liver and sometimes splenic tissue is replaced with blood-filled cysts, and liver cell tumors have been reported in individuals receiving androgenic anabolic steroid therapy. These conditions can lead to life-threatening liver failure, intra-abdominal hemorrhage, or death. Withdrawal of the medication usually results in either complete disappearance of cysts or regression of or cessation of progression of tumors. Use may cause marked blood lipid changes that are known to be associated with an increased risk of atherosclerosis and coronary artery disease.

This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market specific restrictions or transition-of-care benefit limitations may apply.
 WEB-PEC-0424-16