Xuriden (uridine triacetate)

Override(s)	Approval Duration
Prior Authorization Quantity Limit	1 year

Medications	Quantity Limit
Xuriden (uridine triacetate) 2 gm packets	4 packets per day

APPROVAL CRITERIA

Requests for Xuriden (uridine triacetate) may be approved for the following indications, when accompanying criterion is met:

I. Individual has a diagnosis of Hereditary Orotic Aciduria.

State Specific Mandates		
State name	Date effective	Mandate details (including specific bill if applicable)
N/A		

Key References:

Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2015. URL: http://www.clinicalpharmacology.com. Updated periodically.

DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. http://dailymed.nlm.nih.gov/dailymed/about.cfm.

DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.

Drug Facts and Comparisons. Facts and Comparisons [database online]. St. Louis, MO: Wolters Kluwer Health, Inc; 2015. Updated periodically.

Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2015; Updated periodically.