

Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date:	January 18, 2019
Revision Date:	April 12, 2019, October 30, 2020

HAEGARDA® (human C1 esterase inhibitor)

LENGTH OF AUTHORIZATION: UP TO ONE YEAR

REVIEW CRITERIA:

- Must be ≥ 6 years of age.
- Must have a diagnosis of hereditary angioedema.
- Treatment for prophylaxis use against angioedema attacks.

DOSING AND ADMINISTRATION:

• 60 IU/kg subcutaneously twice weekly (every 3 to 4 days).

