

Division: Pharmacy Policy	Subject: State of Florida's Agency for Health Care Administration's Prior Authorization Criteria (Orilissa Criteria)
Original Development Date: Original Effective Date: Revision Date:	January 18, 2019

## ORILISSA™ (elagolix)

**LENGTH OF AUTHORIZATION: SIX MONTHS**

**REVIEW CRITERIA:**

- Patient is  $\geq$  18 years of age.
- Diagnosis of moderate to severe pain associated with endometriosis
- Prescribed or in consultation with a gynecologist Patient is premenopausal
- Documented trial and failure of analgesics
- Documented trial and failure of hormonal contraceptives, and/or progestin containing oral or depot (e.g. norethindrone)

**DOSING AND ADMINISTRATION:**

- 150 mg orally once daily for up to 24 months
- 200mg orally twice daily for up to 6 months (dyspareunia)
- 150 mg orally once daily for up to 6 months (moderate hepatic impairment)