

Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date:	April 11, 2013
Revision Date:	June 28, 2018, January 18, 2019, October 3, 2019, August 19, 2024

Ravicti® (glycerol phenylbutyrate) oral liquid

LENGTH OF AUTHORIZATION: Initial therapy: 3 months

Continuation of therapy: One year

INITIAL REVIEW:

• Patient must have a diagnosis of urea cycle disorder (UCD).

• Patient must be on dietary protein restriction (verified by supporting documentation).

- Patient must have tried and failed sodium phenylbutyrate (Buphenyl®) oral solution/tablets and sodium phenylbutyrate (Pheburane®) granules as evidenced by unmanaged chronic hyperammonemia over the past 365 days. (Clinical documentation detailing treatment response must be provided).
- Medication must be prescribed by a physician experienced in management of UCDs (e.g. geneticist).

CONTINUATION OF THERAPY:

- Patient must continue to meet the above criteria; AND
- Documentation of improved clinical response; AND
- Patient has not have experienced any treatment-restricting adverse effects; AND
- Dosing is appropriate as per labeling or is supported by compendia.

DOSING & ADMINISTRATION:

- Refer to product labeling at https://www.accessdata.fda.gov/scripts/cder/daf/
- Available as a 1.1 g/mL oral liquid.

