DRUG QUANTITY MANAGEMENT POLICY - PER DAYS

POLICY: abatacept for subcutaneous injection (Orencia® - Bristol-Myers Squibb Company) Duration Limit

DATE REVIEWED: 03/10/2021

OVERVIEW

Orencia subcutaneous injection is indicated for the treatment of Rheumatoid Arthritis (RA), Juvenile Idiopathic Arthritis (JIA), and Psoriatic Arthritis (PsA).

Dosing

Orencia is administered by subcutaneous injection**.** Injection sites should be rotated and injections should not be given into areas where the skin is tender, bruised, red, hard, or not intact.

Rheumatoid Arthritis (RA)

The recommended dose for adult patients with RA is 125 mg administered by subcutaneous injection once weekly.

Psoriatic Arthritis (PsA)

The recommended dose for adult patients with PsA is 125 mg administered by subcutaneous injection once weekly.

Juvenile Idiopathic Arthritis (JIA)

Body Weight of Patient	Dose (once weekly)
10 to less than 25 kg	50 mg
25 to less than 50 kg	87.5 mg
50 kg or more	125 mg

Orencia 50 mg/0.4 ml prefilled syringe Maximum quantity per 28 days = 4 prefilled syringes
Orencia 87.5 mg/0.7 ml prefilled syringe Maximum quantity per 28 days = 4 prefilled syringes
Orencia 125 mg/ml prefilled syringe Maximum quantity per 28 days = 4 prefilled syringes
Orencia 125 mg/ml autoinjector Maximum quantity per 28 days = 4 autoinjectors

A quantity of four 50 mg, 87.5 mg, or 125 mg pre-filled syringes or four 125 mg autoinjectors every 28 days will be allowed without coverage review. This is enough drug for a 28-day supply for weekly administration. There are no exceptions allowed for greater quantities.

The objective of this program is to manage potential premature dose escalation of Orencia in treatment of the Rheumatoid Arthritis (RA), Juvenile Idiopathic Arthritis (JIA), and Psoriatic Arthritis (PsA). This Drug Quantity Management Policy has been developed to complement the coverage provided by *Inflammatory Conditions – Orencia SC Prior Authorization Policy*. Consult the *Inflammatory Conditions – Orencia SC Prior Authorization Policy* for detailed information about evidence-supported approved treatment regimens and durations.[2]

CRITERIA

No overrides to criteria are recommended.

REFERENCES

1. Orencia [prescribing information]. Princeton, NJ: Bristol-Myers Squibb Company; June 2020.
2. Inflammatory Conditions – Orencia SC Prior Authorization Policy. Updated 06/27/2020.