

NHP uses BriovaRx as its specialty vendor for Synagis.



Synagis Guidelines



Overview Neighborhood Health Plan (NHP) will be using BriovaRx as our specialty vendor for Synagis. NHP will be covering the cost of the injection as well as the administration of Synagis throughout the respiratory syncytial virus (RSV) infection season (November through March) *only* if obtained from BriovaRx. Synagis and all supplies necessary for the administration will be shipped out and delivered to your office within 24 to 48 hours after ordering. NHP can be billed for administration of the drug.

- Authorization Criteria**
1. Children under two years old with chronic lung disease (formerly bronchopulmonary dysplasia) who have received medical therapy (supplemental oxygen or diuretics, bronchodilators or corticosteroids) for CLD within six months preceding the onset of the RSV season (November through March).
 2. Children under two years old with hemodynamically significant cyanotic and acyanotic congenital heart disease. Hemodynamically significant is defined as:
 - Currently receiving medications to control congestive heart failure, or
 - Infants with moderate to severe pulmonary hypertension, or
 - Infants with cyanotic heart disease.
 3. Infants born at ≤ 28 weeks, six days of gestation and under 12 months of age at the onset of the RSV season.
 4. Infants born at 29 weeks, 0 days through 31 weeks, six days of gestation and under six months of age at the onset of the RSV season.
 5. Infants born at 32 weeks, 0 days through 34 weeks, six days of gestation and under three months of age at the onset of the RSV season, if at least one additional qualifying risk factor is present per AAP Guidelines. Qualifying risk factors include child care attendance or sibling(s) younger than five years old. Please be sure to document the sibling's age since the criteria have changed from "school-aged siblings" to "siblings under the age of five years." Exposure to environmental air pollution (including tobacco smoke) does not qualify as a risk factor. If the child the request is for is an infant of multiple births (i.e., the member is a twin, triplet, etc.) the other infant born as the twin or triplet does not count as an additional sibling younger than five years. Multiple births younger than one year of age do not qualify as fulfilling this risk factor. In addition, the sibling(s) must be residing permanently within the same household.

- Requesting Authorization**
1. Complete the enclosed *Synagis Enrollment Form*, also available at www.nhp.org (Providers > Pharmacy > Prior Authorization).
 2. Fax the form directly to BriovaRx at 1-866-391-1890. (If you have questions, call 866-235-3193.)
 3. If your patient meets the above criteria, Synagis will be delivered to your office within 24 to 48 hours after ordering.

- Approval Process**
- **For patients meeting criteria #1 through #4:** Once an approval is given, Synagis will be approved for the entire RSV season for a maximum of five monthly doses during RSV season, beginning November 1. Synagis coverage is not recommended beyond March 15 unless there is evidence of significant ongoing community circulation of RSV.
 - **For patients meeting criteria #5:** Synagis will be approved up to three months and 0 days of age for a maximum of three monthly doses within the Synagis season, November 1–March 15.