

Commercial/Healthcare Exchange PA Criteria

Effective: January 1, 2020

Prior Authorization: Sivextro

Products Affected: Sivextro (tedizolid phosphate) oral tablets

Medication Description: Sivextro is an oxazolidinone-class antibacterial drug indicated in adults for the treatment of acute bacterial skin and skin structure infections (ABSSSI) caused by designated susceptible bacteria.

Covered Uses: Sivextro is indicated for the treatment of acute bacterial skin and skin structure infections (ABSSSI) caused by susceptible isolates of the following gram-positive microorganisms: Staphylococcus aureus (including methicillin-resistant [MRSA] and methicillin-susceptible [MSSA] isolates), Streptococcus pyogenes, Streptococcus agalactiae, Streptococcus anginosus Group (including Streptococcus anginosus, Streptococcus intermedius, and Streptococcus constellatus), and Enterococcus faecalis.

Exclusion Criteria: N/A

Required Medical Information:

1. Diagnosis
2. Culture and sensitivity (C&S) testing

Age Restrictions: Patient is 18 years of age or older

Prescriber Restrictions: Prescribed by, or in consultation with, an Infectious disease specialist.

Coverage Duration: 6 days

Other Criteria:

- A. Patient has a diagnosis of acute bacterial skin and skin structure infection (ABSSSI); **AND**
- B. Culture and sensitivity (C&S) testing shows isolated pathogen is susceptible to Sivextro [documentation required]:
 - a. Staphylococcus aureus (including methicillin-resistant [MRSA] and methicillin-susceptible [MSSA] isolates), Streptococcus pyogenes, Streptococcus agalactiae, Streptococcus anginosus Group (including Streptococcus anginosus, Streptococcus intermedius, and Streptococcus constellatus), and Enterococcus faecalis; **AND**
- C. The C&S report shows resistance of the isolated pathogen to ALL formulary antibiotics FDA approved for member's diagnosis.

References:

1. Product Information: SIVEXTRO^(R) intravenous injection, oral tablets, tedizolid phosphate intravenous injection, oral tablets. Merck Sharp & Dohme, Whitehouse Station, NJ, 2019.

Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	10/15/2019

