



## Commercial/Healthcare Exchange PA Criteria Effective: June 2005

**Prior Authorization:** Sucraid

**Products Affected:** Sucraid (sacrosidase oral solution)

**Medication Description:** Sacrosidase is an oral enzyme produced as a by-product of the manufacture of baker's yeast (*Saccharomyces cerevisiae*). It is used for treating sucrose deficiency associated with congenital sucrase-isomaltase deficiency (CSID). CSID is a rare genetic disease in which the body lacks sucrase and isomaltase, enzymes necessary to break down and absorb sucrose and isomaltose, respectively.

**Covered Uses:** Congenital Sucrase-isomaltase deficiency

**Exclusion Criteria:** N/A

**Required Medical Information:**

1. Diagnosis
2. Stool pH
3. Sucrose breath test
4. Small bowel biopsy

**Age Restrictions:** N/A

**Prescriber Restrictions:** Prescribed by, or in consultation with a gastroenterologist

**Coverage Duration:** 12 months

**Other Criteria:**

Approve Sucraid if the patient meets the following criteria:

- A) Patient has clinically documented Congenital sucrase-isomaltase deficiency (CSID) diagnosed by, or in consultation with a gastroenterologist; **AND**
- B) Patient has had a small bowel biopsy documenting  $>2$  SD below mean for sucrase activity +/- isomaltase activity with normal lactase activity and normal villous architecture; **AND**
- C) Patient has positive stool pH (pH  $< 6.0$ ); **AND**
- D) Patient has positive sucrose breath test ( $< 20$  ppm H<sub>2</sub> over baseline)

**References:**

1. Product Information: Sucraid(R) oral solution, sacrosidase oral solution. QOL Medical, LLC (per DailyMed), Vero Beach, FL, 2014.

Last Res.5.14.2020



Confidential Information

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**Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	June, 2005
2	Annual Review	<p>CCI adopted EH template;                      Removed age restriction of 5 months of age and older</p> <p>CCI P&amp;T Review History: 6/05, 12/05, 3/06, 6/06, 12/06, 6/07, 6/08, 9/09, 9/10, 12/11, 10/12, 10/13, 10/14, 11/15, 5/16, 5/17, 5/18, 5/19</p> <p>CCI Revision Record: 11/12, 2/16, 5/17, 5/18, 5/19, 11/19: Removed Aldurazyme, Fabrazyme, Kanuma – adopted EH Policies, renamed Policy Suclaird</p>	All	05/14/2020