blue 🦁 of california

peanut allergen powder (PALFORZIA)

Diagnosis Considered for Coverage:

• Allergic reaction management - Allergy to peanut

Coverage Criteria:

For diagnosis above:

- Dose does not exceed 300 mg per day, and
- Being prescribed by or in consultation with an allergist or immunologist, **and**
- One of the following:
 - Request is for INITIAL therapy and patient is aged 4 through 17 years of age, **or**
 - Request is for CONTINUATION in a patient who has started therapy between ages of 4 and 17 years.

Coverage Duration: one year

Effective Date: 11/02/2023