UnitedHealthcare Pharmacy
Clinical Pharmacy Programs

Program Number	2025 P 1480-1
Program	Prior Authorization/Notification
Medication	Qfitlia® (fitusiran)
P&T Approval Date	5/2025
Effective Date	7/1/2025

1. Background:

Qfitlia (fitusiran) is an antithrombin-directed small interfering ribonucleic acid indicated for routine prophylaxis to prevent or reduce the frequency of bleeding episodes in adult and pediatric patients aged 12 years and older with hemophilia A or B with or without factor VIII or IX inhibitors.

2. Coverage Criteria[a]:

A. Hemophilia A

1. **Initial Authorization**

a. **Qfitlia** will be approved based on **both** of the following criteria

(1) Diagnosis of hemophilia A

-AND-

(2) Prescribed for the prevention of bleeding episodes (i.e., routine prophylaxis)

Authorization of therapy will be issued for 12 months.

2. **Reauthorization**

a. Documentation of positive clinical response to Qfitlia therapy

Authorization will be issued for 12 months.

B. Hemophilia B

1. **Initial Authorization**

a. **Qfitlia** will be approved based on **both** of the following criteria

(1) Diagnosis of hemophilia B

-AND-

(2) Prescribed for the prevention of bleeding episodes (i.e., routine prophylaxis)

Authorization of therapy will be issued for 12 months.

2. **Reauthorization**

   a. Documentation of positive clinical response to Qfitlia therapy

   Authorization will be issued for 12 months.

[a] State mandates may apply. Any federal regulatory requirements and the member specific benefit plan coverage may also impact coverage criteria. Other policies and utilization management programs may apply.

3. Additional Clinical Rules:

- Notwithstanding Coverage Criteria, UnitedHealthcare may approve initial and re-authorization based solely on previous claim/medication history, diagnosis codes (ICD-10) and/or claim logic. Use of automated approval and re-approval processes varies by program and/or therapeutic class.
- Medical Necessity may be in place

4. References:

1. Qfitlia® [package insert]. Cambridge, MA: Genzyme Corporation; March 2025.

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Change Control	
5/2025	New program