

Aldurazyme®

(*laronidase*)

COVERAGE POLICY:

Aldurazyme® is covered for members who meet the following criteria:

- Diagnosis is documented as Hurler syndrome (MPS 1H) or Hurler-Scheie syndrome (MPS 1H-S).
- AND prescribing physician is a specialist in condition
- **AND** diagnosis has been confirmed by diagnostic method (measurement of alpha-iduronidase activity) or antenatal diagnosis (enzymatic assay).
- **AND/OR** the diagnosis is documented as Scheie form (MPS IS).
 - **AND** the patient has at least two of the listed moderate-to-severe symptoms.

Impaired vision	Recurrent otitis media	Recurrent sinopulmonary infections
Impaired hearing	Upper airway obstruction	Malaise and reduced endurance
Corneal clouding	Macrocephaly	Reduced joint range of motion
Progressively coarse facial features	Coarse facial features	Umbilical and inguinal hernias
Carpal tunnel syndrome	Delayed or regressed mental development	Hepatosplenomegaly
Cardiac abnormalities and valvular disease	Communicating hydrocephalus	Spinal cord compression
Sleep apnea	Short stature	Reduced pulmonary function
Bone deformities		

- **AND** if the patient has previously received at least 26 weeks of Aldurazyme® therapy, they must show an improvement in symptoms such as lung function, cardiac status, growth velocity 6 MWT from when therapy was started.