



AETNA BETTER HEALTH®  
Coverage Policy/Guideline

Name: Xphozah (tenapanor)

Page: 1 of 1

Effective Date: 4/16/2025

Last Review Date: 3/2025

Applies to:	<input checked="" type="checkbox"/> Illinois	<input type="checkbox"/> Florida	<input checked="" type="checkbox"/> New Jersey
	<input type="checkbox"/> Maryland	<input checked="" type="checkbox"/> Florida Kids	<input checked="" type="checkbox"/> Pennsylvania Kids
	<input type="checkbox"/> Michigan	<input checked="" type="checkbox"/> Virginia	<input type="checkbox"/> Kentucky PRMD

### Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Xphozah under the patient's prescription drug benefit.

### Description:

#### FDA-Approved Indication

Xphozah is indicated to reduce serum phosphorus in adults with chronic kidney disease (CKD) on dialysis as add-on therapy in patients who have an inadequate response to phosphate binders or who are intolerant of any dose of phosphate binder therapy.

### Applicable Drug List:

Xphozah

### Policy/Guideline:

**The requested drug will be covered with prior authorization when the following criteria are met:**

- The requested drug is being prescribed to reduce serum phosphorus in an adult patient with chronic kidney disease (CKD) who is on dialysis as add-on therapy  
**AND**
  - The patient has experienced an inadequate treatment response to phosphate binders (e.g., PhosLo, Renvela, Velphoro, etc.)**OR**
  - The patient has experienced an intolerance to any dose of phosphate binder therapy (e.g., PhosLo, Renvela, Velphoro, etc.)

### Approval Duration and Quantity Restrictions:

**Approval:** 12 Months

**Quantity Level Limit:** Reference Formulary for drug specific quantity level limits

### References:

1. Xphozah [package insert]. Waltham, MA: Ardelyx, Inc.; October 2023.
2. Lexicomp Online, AHFS DI (Adult and Pediatric) Online. Waltham, MA: UpToDate, Inc.; 2024. <https://online.lexi.com>. Accessed September 30, 2024.
3. Micromedex® (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: 09/30/2024).
4. Kidney Disease: Improving Global Outcomes (KDIGO) CKD-MBD Update Work Group. KDIGO 2017 Clinical Practice Guideline Update for the Diagnosis, Evaluation, Prevention, and Treatment of Chronic Kidney Disease Mineral and Bone Disorder (CKD-MBD). Kidney Int Suppl. 2017;7:1–59.