

Effective Date: 02/01/2022
Reviewed: 11/2021, 7/2023
Scope: Medicaid

Chemet (succimer) capsules

POLICY

I. CRITERIA FOR APPROVAL

An authorization may be granted when all the following criteria are met:

- A. Patient is 12 months of age or older; AND
- B. Patient has documented diagnosis of lead poisoning as evidenced by blood lead levels between 45-69 mcg/L; AND
- C. Medication is being used for acute lead poisoning and not for prophylaxis against lead poisoning in a lead-containing environment; AND
- D. Medication is prescribed by or in consultation with a provider who specializes in chelation therapy (e.g., a medical toxicologist or poison control specialist); AND
- E. Patient's with liver disease are routinely monitored (CBC with differential, LFTs, platelet count and serum creatinine/BUN)

II. COVERAGE DURATION

- 1 month