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| POLICY NAME | Bronchitol (mannitol) | POLICY # | 2842P |
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Criteria

Coverage Criteria for Cystic Fibrosis

- ☐ 1.1 Diagnosis of Cystic Fibrosis
- ☐ 1.2 Ordered by, or in consultation with a pulmonologist (lung doctor)
- ☐ 1.3 Age 18 or older
- ☐ 1.4 Documentation that the patient has passed the Bronchitol Tolerance Test (BTT)
- ☐ 1.5 Documented failure, intolerance, or contraindication to hypertonic saline
- ☐ 1.6 Bronchitol will be used concurrently with dornase alfa
- ☐ 1.7 Bronchitol will be prescribed concurrently with a short-acting bronchodilator (such as albuterol)

Exclusion Criteria – Any of the following prevents coverage

- ☐ 2.1 Patient has failed Bronchitol Tolerance Test