



AETNA BETTER HEALTH®
Coverage Policy/Guideline

Name: Yuviwel

Page: 1 of 2

Effective Date: 7/9/2026

Last Review Date: 6/8/2026

Applies to: Illinois
 Florida Kids

New Jersey
 Pennsylvania Kids

Maryland
 Virginia

Intent:

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

Description:

FDA-Approved Indication

Yuviwel is indicated to increase linear growth in pediatric patients 2 years of age and older with achondroplasia with open epiphyses.

This indication is approved under accelerated approval based on an improvement in annualized growth velocity. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trial(s).

All other indications are considered experimental/investigational and not medically necessary.

Applicable Drug List:

Yuviwel

Policy/Guideline:

Criteria for Initial Approval:

Documentation

Submission of the following information is necessary to initiate the prior authorization review:

- Chart notes or medical record documentation of symptoms (i.e., short stature with marked shortening of extremities due to rhizomelia, a characteristic facial configuration, trident hand) (if applicable)
- Laboratory report of X-ray findings consistent with achondroplasia or laboratory report of genetic test for FGFR3 variant
- Growth chart, chart notes, or medical record documentation showing heights and growth velocities
- For continuation requests: Chart notes or medical record documentation confirming benefit from therapy (e.g., growth chart showing improvement or stabilization of annualized growth velocity [centimeters per year])

Prescriber Specialties

This medication must be prescribed by, or in consultation with, an endocrinologist, pediatric endocrinologist, geneticist, or neurologist.



AETNA BETTER HEALTH®
Coverage Policy/Guideline

Name: Yuviwel

Page: 2 of 2

Effective Date: 7/9/2026

Last Review Date: 6/8/2026

Applies to: Illinois
 Florida Kids

New Jersey
 Pennsylvania Kids

Maryland
 Virginia

Coverage Criteria

Achondroplasia

Authorization of 12 months may be granted for treatment of achondroplasia in members 2 years of age or older when BOTH of the following criteria are met:

- The diagnosis of achondroplasia was confirmed by EITHER of the following:
 - Symptoms (i.e., short stature with marked shortening of extremities due to rhizomelia, a characteristic facial configuration, trident hand) AND X-ray findings consistent with achondroplasia
 - Genetic testing for FGFR3 variant
- Epiphyses are open.

Continuation of Therapy

Authorization of 12 months may be granted for continuation of therapy in members 2 years of age or older when BOTH of the following criteria are met:

- Member meets all requirements in the coverage criteria.
- Member is experiencing benefit from therapy (e.g., improvement or stabilization of annualized growth velocity [centimeters per year] from baseline).

Approval Duration and Quantity Restrictions:

Initial and Renewal Approval: 12 months

Quantity Level Limit:

- Single-dose vial 1.3mg – 4 vials per 30 days
- Single-dose vial 2.8mg – 4 vials per 30 days
- Single-dose vial 5.5mg – 8 vials per 30 days

References:

1. Yuviwel [package insert]. Princeton, NJ: Ascendis Pharma Endocrinology, Inc.; February 2026.
2. Kubota T, Adachi M, Kitaoka T, et al. Clinical Practice Guidelines for Achondroplasia. Clin Pediatr Endocrinol. 2020;29(1):25-42.
3. Trotter TL, Hall JG, American Academy of Pediatrics Committee on Genetics. Health supervision for children with achondroplasia. Pediatrics. 2005;116(3):771-783.
4. Hoover-Fong J, Scott CI, Jones MC, Committee on Genetics. Health supervision for people with achondroplasia. Pediatrics. 2020;145(6):e20201010.
5. Savarirayan R, Ireland P, Irving M, et al. International Consensus Statement on the diagnosis, multidisciplinary management and lifelong care of individuals with achondroplasia. Nat Rev Endocrinol. 2022;18:173-189.
6. National Organization for Rare Disorders (NORD). Achondroplasia. Available at <https://rarediseases.org/rare-diseases/achondroplasia/>. Last updated November 17, 2023. Accessed on March 4, 2026.