

Medical Coverage Policy



Denosumab-PREAUTH

Device/Equipment Drug Medical Surgery Test Other

Effective Date:	12/07/2010	Policy Last Updated:	5/7/2013
-----------------	------------	----------------------	----------

Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.

Prospective review is not required.

Description:

Denosumab is a fully human monoclonal antibody that specifically binds to and inhibits the receptor activator of NF-kappaB ligand (RANK Ligand), the primary mediator of bone resorption. RANK Ligand is the protein responsible for activating osteoclasts, the cells that break down bone. An increased amount of the protein has been linked as the primary cause of a broad range of bone loss conditions including osteoporosis, treatment-induced bone loss, bone erosions, and bone metastases.

In June 2010 the FDA approved denosumab (Prolia) for the treatment of postmenopausal women with osteoporosis at high risk for fracture. November of 2010 the FDA approved the same drug, denosumab (Xgeva) in a higher dose for the prevention of skeletal-related events in patients with bone metastases from solid tumors. In September 2011 the FDA also approved denosumab (the treatment of bone loss in patients with non-metastatic prostate or breast cancer. In September 2012 denosumab (Prolia) was approved by the FDA as a treatment of bone loss in men with osteoporosis at high-risk for fracture. They were given distinct trade names in order to differentiate between their unique dosing schedules and indications for use. The two are the same drug, but they have different clinical indications for use and dosing.

Indicated Treatment:

Osteoporosis and as a treatment to increase bone mass

Denosumab is indicated for the treatment of postmenopausal women with osteoporosis at high risk for fracture and to increase bone mass in men with osteoporosis. It is also indicated as a treatment to increase bone mass in men at high risk for fracture receiving androgen deprivation therapy for nonmetastatic prostate cancer and to increase bone mass in women at high risk for fracture receiving adjuvant aromatase inhibitor therapy for breast cancer. The recommended dose of denosumab is 60 mg administered as a single subcutaneous injection once every 6 months. Pre-existing hypocalcemia must be corrected prior to initiating therapy with denosumab. Hypocalcemia is a serious risk in patients with severe renal impairment (creatinine clearance < 30 mL/min), or receiving dialysis. Calcium levels must be maintained with adequate calcium and vitamin D supplementation. Denosumab is supplied in a single-use prefilled

syringe with a safety guard or in a single-use vial as 60 mg/1 mL in a single-use prefilled syringe in 1 vial per carton or a 60 mg/1 mL in a single-use vial in 1 per carton.

Bone Metastases from solid tumors

Denosumab is indicated for the prevention of skeletal-related events in patients with bone metastases from solid tumors. Denosumab is not indicated for the prevention of skeletal-related events in patients with multiple myeloma. The recommended dose of denosumab is 120 mg administered as a subcutaneous injection every 4 weeks. Calcium and vitamin D are necessary to treat or prevent hypocalcemia. Denosumab is supplied in a single-use 120 mL vial.

Medical Criteria:

All BCBSRI Products

- Treatment of osteoporosis and to increase bone mass

Denosumab is considered medically necessary for treatment of osteoporosis and to increase bone mass for the following:

- Women with postmenopausal osteoporosis; or
- Men with osteoporosis; or
- Women with breast cancer who are receiving adjuvant aromatase inhibitor therapy; or
- Men with nonmetastatic prostate cancer who are receiving androgen deprivation therapy;

In addition to meeting one of the above indications, the patient must meet all of the criteria below:

1. Do not have uncorrected hypocalcemia; and
2. Vitamin D status has been evaluated and corrected; and
3. Will receive adequate intake of supplemental calcium and vitamin D; and
4. Has tried an oral bisphosphonate or an intravenous bisphosphonate; and
 - Had an inadequate response to at least one bisphosphonate:
 - a. Received osteoporosis-related fracture while on the bisphosphonate for at least one year; or
 - b. Had significant decline in bone mineral density while on the bisphosphonate for at least one year; and
 - c. Was compliant with bisphosphonate therapy and received adequate calcium and vitamin D supplementation; or
5. Was unable to tolerate at least two different bisphosphonates; or
6. Has a diagnosis of esophageal stricture, achalasia, or other severe esophageal dysmotility disorder; or
7. Is unable to stand or sit upright for 60 minutes; or

8. Has a history of severe malabsorption making the use of oral bisphosphonates ineffective; or
 9. Has renal impairment (creatinine clearance <35 nK/min).
- Bone metastases from solid tumors
- Denosumab is considered medically necessary for the prevention of skeletal related events for patients with the following:
1. Documented bone metastases from a solid tumor cancer; and
 2. Does not have multiple myeloma; and
 3. Does not have pre-existing hypocalcemia; or
 4. Will have hypocalcemia corrected prior to starting denosumab therapy; and
 5. Will receive calcium and vitamin D as needed to prevent hypocalcemia.

Policy:

Pre authorization is required for BlueCHIP for Medicare and recommended for all other BCBSRI products.

Denosumab is considered medically necessary when the medical criteria for each indication above are met.

Denosumab is considered not medically necessary for other treatments not mentioned above due to insufficient evidence in the published, peer reviewed, scientific literature to support its use.

Coverage:

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for the applicable **Specialty Pharmacy** guidelines.

Specialty Pharmacy:

For contracts with specialty drug coverage, please refer to the member agreement for benefits and preauthorization guidelines.

Coding:

J0897 injection, denosumab, 1mg

Related Policies:

None

Published:

Provider Update, July 2013

Provider Update, August 2012

Provider Update, December 2011

Provider Update, February 2011

References:

Amgen. Prolia (denosumab) injection product information. Thousand Oaks, CA: Amgen Inc. Sept 2012.

Amgen. Xgeva (denosumab) injection product information. Thousand Oaks, CA: Amgen Inc. Sept 2012.

Review History:

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice.