Cerezyme (imiglucerase)

**Effective Date: January 1, 2021**

**Number: MG.MM.PH.223**

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**Definition**

Cerezyme is an analogue of β-glucocerebrosidase produced via recombinant DNA technology in Chinese hamster ovary cells. Cerezyme differs from human placental glucocerebrosidase by one amino acid at position 495. Cerezyme catalyzes the breakdown of glucocerebroside to glucose and ceramide.

Cerezyme is indicated for the long-term enzyme replacement therapy for pediatric and adult patients with a confirmed diagnosis of Type 1 Gaucher disease that results in at least one of the following: anemia, thrombocytopenia, bone disease, hepatomegaly, or splenomegaly.

**Length of Authorization**

Coverage will be provided for 12 months

**Dosing**

Each individual dose must not exceed 60 U/kg administered intravenously no more frequently than three times per week.
Guideline

Gaucher Disease, Type 1

- Cerezyme is prescribed by or in consultation with a geneticist, endocrinologist, a metabolic disorder sub-specialist, or a physician who specializes in the treatment of lysosomal storage disorders; AND
- Patient’s diagnosis is established by one of the following:
  - Demonstration of deficient β-glucocerebrosidase activity in leukocytes or fibroblasts; OR
  - Molecular genetic testing documenting glucocerebrosidase gene mutation

Applicable Procedure Codes

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<th>Code</th>
<th>Description</th>
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<td>J1786</td>
<td>Injection, imiglucerase, 10 units</td>
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Applicable NDC’s

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<td>58468-4663-xx</td>
<td>Cerezyme 400 unit injection</td>
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<td>58468-1983-xx</td>
<td>Cerezyme 200 unit injection</td>
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Applicable Diagnosis Codes

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<tr>
<td>E75.22</td>
<td>Lipidosis (Gaucher Disease)</td>
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Revision History

<table>
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<th>Date</th>
<th>Description</th>
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<tr>
<td>1/1/2021</td>
<td>Criteria apply to Commercial, Medicare, and Medicaid members.</td>
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References