Prolia®/Xgeva® (denosumab)

Last Review Date: January 1, 2020  Number: MG.MM.PH.100

Medical Guideline Disclaimer

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LENGTH OF AUTHORIZATION

Coverage is provided for 12 months and may be renewed

DOsing LIMITS

A. Max Units (per dose and over time) [Medical Benefit]:

<table>
<thead>
<tr>
<th>Prolia</th>
<th>All indications:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• 60 billable units every 6 months</td>
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<table>
<thead>
<tr>
<th>Xgeva</th>
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<tbody>
<tr>
<td><strong>Giant Cell Tumor of Bone; Hypercalcemia of malignancy</strong></td>
<td></td>
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<tr>
<td>– Loading Dose:</td>
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<tr>
<td></td>
<td>• 120 billable units on days 1, 8, 15, and 29</td>
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<tr>
<td>– Maintenance:</td>
<td></td>
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<tr>
<td></td>
<td>• 120 billable units every 4 weeks</td>
</tr>
</tbody>
</table>

| Bone metastases from solid tumors; Multiple Myeloma: |                      |
| • 120 billable units every 4 weeks |                      |

Guideline

I. INITIAL APPROVAL CRITERIA
Prolia®/Xgeva® (denosumab)

Coverage is provided in the following conditions:

**Osteoporosis in Men and Women †**
Women only: Patient must be post-menopausal; AND
- Patient has a documented diagnosis of osteoporosis indicated by one or more of the following:
  - Hip DXA (femoral neck or total hip) or lumbar spine T-score ≤ -2.5 and/or forearm DXA 33% (one-third) radius; OR
  - T-score ≤ -1 or low bone mass and a history of fragility fracture to the hip or spine; OR
  - T-score between -1 and -2.5 with a FRAX 10-year probability for major fracture ≥ 20% or hip fracture ≥ 3%; AND
- Documented treatment failure or ineffective response ± to a minimum (12) month trial on previous therapy with bisphosphonates (oral or IV) such as alendronate, risedronate, ibandronate, or zoledronic acid; OR
- Patient has a documented contraindication* or intolerance to BOTH oral bisphosphonates AND intravenous (IV) bisphosphonates such as alendronate, risedronate, ibandronate, or zoledronic acid

**Glucocorticoid-Induced Osteoporosis †**
- Patient will be initiating or is continuing systemic glucocorticoid therapy at a daily dosage equivalent to ≥ 7.5 mg of prednisone and is expected to remain on glucocorticoid therapy for at least 6 months; AND
  - Documented treatment failure or ineffective response ± to a minimum (12) month trial on previous therapy with bisphosphonates (oral or IV) such as alendronate, risedronate, ibandronate, or zoledronic acid; OR
  - Patient has a documented contraindication* or intolerance to BOTH oral bisphosphonates AND intravenous (IV) bisphosphonates such as alendronate, risedronate, ibandronate, or zoledronic acid

**Osteoporosis treatment and prevention in prostate cancer patients †**
- Documented Hip DXA (femoral neck or total hip) or lumbar spine T-score ≤ -1 (or patient meets the diagnostic criteria for osteoporosis above); AND
- Patient must be receiving androgen deprivation therapy for nonmetastatic prostate cancer

**Osteoporosis treatment and prevention in breast cancer patients †**
- Patient must be receiving adjuvant aromatase inhibitor therapy for breast cancer

### Ineffective response is defined as one or more of the following:
- Decrease in T-score in comparison with baseline T-score from DXA scan
- Patient has a new fracture while on bisphosphonate therapy

### High risk for fractures include, but are not limited to, one or more of the following:
- History of an osteoporotic fracture as an adult
- Parental history of hip fracture
- Low BMI
- Rheumatoid arthritis
- Alcohol intake (3 or more drinks per day)
- Current smoking
- History of oral glucocorticoids ≥5 mg/d of prednisone (or equivalent) for >3 months (ever)

*Examples of contraindications to oral bisphosphonate therapy include the following:

- Documented inability to sit or stand upright for at least 30 minutes
- Documented pre-existing gastrointestinal disorder such as inability to swallow, Barrett’s esophagus, esophageal stricture, dysmotility, or achalasia

**Xgeva**

- Administer calcium and vitamin D as necessary to treat or prevent hypocalcemia; AND

**Coverage is provided in the following conditions:**

**Prevention of skeletal-related events in patients with multiple myeloma OR bone metastases from solid tumors †**

- Patient is at least 18 years of age; AND
  - Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of Zoledronic Acid; OR
  - Patient has metastatic breast cancer or metastatic castration-resistant prostate cancer

**Giant Cell Tumor of the Bone †**

- Patient must be an adult or at least 13 years of age and skeletally mature; AND
  - Disease is unresectable or surgical resection is likely to result in severe morbidity; OR
  - For metastatic disease ‡; AND
    - Used as a single agent; OR
  - For localized disease ‡; AND
    - Used as a single agent; OR
    - In combination with interferon alpha or radiation therapy

**Hypercalcemia of malignancy †**

- Patient is at least 18 years of age; AND
- Patient must have a diagnosis of cancer (malignancy); AND
  - Patient must have a diagnosis of refractory hypercalcemia of malignancy defined as an albumin-corrected calcium of >12.5 mg/dL (3.1 mmol/L) despite treatment with a minimum seven (7) day trial on previous therapy with intravenous (IV) bisphosphonates such as ibandronate or zoledronic acid; OR
  - Patient has a documented contraindication or intolerance to intravenous (IV) bisphosphonates such as ibandronate or zoledronic acid

† FDA Approved Indication(s); ‡ Compendia recommended indication(s)
II. **RENEWAL CRITERIA**

Coverage can be renewed based on the following criteria:

- Patient continues to meet the criteria indicated above; **AND**
- Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include the following: severe symptomatic hypocalcemia, osteonecrosis of the jaw, atypical femoral fractures, dermatological adverse reactions, severe infection, etc.; **AND**

**Prolia**

- Disease response as indicated by one or more of the following:
  - Absence of fractures
  - Increase in bone mineral density compared to pretreatment baseline

**Xgeva**

- Disease response as indicated by the following:
  - **Multiple Myeloma OR Bone metastases from solid tumors**: absence/delay in skeletal-related events (e.g., pathologic fracture, radiation therapy to bone, surgery to bone, or spinal cord compression)
  - **Giant Cell Tumor of the Bone**: tumor response with disease stabilization or decrease in size or spread of tumor
  - **Hypercalcemia of Malignancy**: corrected serum calcium ≤ 11.5 mg/dL

**Limitations/Exclusions**

Prolia and Xgeva are not considered medically necessary for indications other than those listed above due to insufficient evidence of therapeutic value.

**Applicable Procedure Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>J0897</td>
<td>Injection, denosumab, 1 mg; 1 mg = 1 billable unit</td>
</tr>
</tbody>
</table>

**Applicable NDCs**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>55513-0710-XX</td>
<td>Prolia 60 mg/1 mL single-use prefilled syringe</td>
</tr>
<tr>
<td>55513-0730-XX</td>
<td>Xgeva 120 mg/1.7 mL single-use vial</td>
</tr>
</tbody>
</table>

**Applicable Diagnosis Codes**
### C50.011- C50.929
- Malignant neoplasms of breast

### C61
- Malignant neoplasm of prostate

### M80.00XA- M80.08XS
- Age-related osteoporosis with current pathological fracture

### M80.80XA- M80.88XS
- Other osteoporosis with current pathological fracture

### M81.0
- Age-related osteoporosis without current pathological fracture

### M81.6
- Localized osteoporosis [Lequesne]

### M81.8
- Other osteoporosis without current pathological fracture

### M85.80
- Other specified disorders of bone density and structure, unspecified site

### M85.851
- Other specified disorders of bone density and structure, right thigh

### M85.852
- Other specified disorders of bone density and structure, left thigh

### M85.859
- Other specified disorders of bone density and structure, unspecified thigh

### M85.88
- Other specified disorders of bone density and structure, other site

### M85.89
- Other specified disorders of bone density and structure, multiple sites

### T38.0X5A
- Adverse effect of glucocorticoids and synthetic analogues, initial encounter

### T38.0X5S
- Adverse effect of glucocorticoids and synthetic analogues, sequela

### Dual coding requirement
- Osteoporosis treatment and prevention in breast cancer patients on aromatase inhibitors:
  - One code from the M80.00XA - M80.88XS, M81.X, or M85.X series plus one code from the C50.X
- Treatment of bone loss in men with prostate cancer receiving androgen deprivation therapy:
  - One code from the M80.00XA - M80.88XS, M81.X, or M85.X series plus C61

### Xgeva

### C00-C14
- Malignant neoplasms of lip, oral cavity and pharynx

### C15-C26
- Malignant neoplasms of digestive organs

### C30-C39
- Malignant neoplasms of respiratory and intrathoracic organs

### C40-C41
- Malignant neoplasms of bone and articular cartilage

### C43-C44
- Melanoma and other malignant neoplasms of skin

### C45-C49
- Malignant neoplasms of mesothelial and soft tissue

### C50.011- C50.929
- Malignant neoplasms of breast

### C51-C58
- Malignant neoplasms of female genital organs

### C60-C63
- Malignant neoplasms of male genital organs

### C64-C68
- Malignant neoplasms of urinary tract
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>C69-C72</td>
<td>Malignant neoplasms of eye, brain and other parts of central nervous system</td>
</tr>
<tr>
<td>C73-C75</td>
<td>Malignant neoplasms of thyroid and other endocrine glands</td>
</tr>
<tr>
<td>C7A.00-C7A.8</td>
<td>Malignant neuroendocrine tumors</td>
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<tr>
<td>C7B.00-C7B.8</td>
<td>Secondary neuroendocrine tumors</td>
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<tr>
<td>C76-C80</td>
<td>Malignant neoplasms of ill-defined, other secondary and unspecified sites</td>
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<tr>
<td>C81</td>
<td>Hodgkin lymphoma</td>
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<tr>
<td>C82</td>
<td>Follicular lymphoma</td>
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<tr>
<td>C83</td>
<td>Non-follicular lymphoma</td>
</tr>
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<td>C84</td>
<td>Mature T/NK-cell lymphomas</td>
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<tr>
<td>C85</td>
<td>Other specified and unspecified types of non-Hodgkin lymphoma</td>
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<tr>
<td>C86</td>
<td>Other specified types of T/NK-cell lymphoma</td>
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<td>C88</td>
<td>Malignant immunoproliferative diseases and certain other B-cell lymphomas</td>
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<tr>
<td>C90.00</td>
<td>Multiple myeloma not having achieved remission</td>
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<tr>
<td>C90.02</td>
<td>Multiple myeloma, in relapse</td>
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<tr>
<td>C90.10</td>
<td>Plasma cell leukemia not having reached remission</td>
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<tr>
<td>C90.12</td>
<td>Plasma cell leukemia in relapse</td>
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<td>C90.20</td>
<td>Extramedullary plasmacytoma not having reached remission</td>
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<tr>
<td>C90.22</td>
<td>Extramedullary plasmacytoma in relapse</td>
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<td>C96</td>
<td>Other and unspecified malignant neoplasms of lymphoid, hematopoietic and</td>
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<td></td>
<td>related tissue</td>
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<tr>
<td>D00-D09</td>
<td>In situ neoplasms</td>
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<td>D10-D36</td>
<td>Benign neoplasms, except benign neuroendocrine tumors</td>
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<tr>
<td>D3A.00-D3A.8</td>
<td>Benign neuroendocrine tumors</td>
</tr>
<tr>
<td>D37-D44</td>
<td>Neoplasm of uncertain behavior of oral cavity and digestive organs - Neoplasm of uncertain behavior of endocrine glands</td>
</tr>
<tr>
<td>D48</td>
<td>Neoplasm of uncertain behavior of other and unspecified sites</td>
</tr>
<tr>
<td>D49.0-D49.9</td>
<td>Neoplasms of unspecified behavior</td>
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<tr>
<td>E83.52</td>
<td>Hypercalcemia</td>
</tr>
<tr>
<td>Z85</td>
<td>Personal history of malignant neoplasm</td>
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</tbody>
</table>
Revision History

N/A

References


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