Medical Policy:

Sandostatin LAR (octreotide suspension)

POLICY NUMBER	LAST REVIEW	ORIGIN DATE
MG.MM.PH.103	February 19, 2025	October 12, 2020

Length of Authorization

Coverage will be provided for 6 months and may be renewed.

Dosing Limits [Medical Benefit]

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

- Acromegaly: 40 units every 28 days
- Carcinoid Tumors and VIPomas: 30 units every 28 days
- Thymic Carcinoma/Thymoma: 20 units every 14 days

Guideline

I.Initial Approval Criteria

Coverage is provided in the following conditions:

- Patient is at least 18 years old; **AND**

1. **Carcinoid tumors/Neuroendocrine tumors (e.g. GI tract, Lung, Thymus, Pancreas, Adrenal)** †

A. Patient has severe diarrhea/flushing episodes (carcinoid syndrome) † Φ; **OR**

B. Used as primary treatment for symptom and/or tumor control of unresected primary gastrinoma; **OR**

C. Used for symptom and/or tumor control of bronchopulmonary or thymic disease; **AND**

   i. Used for somatostatin receptor (SSTR) positive disease and/or hormonal symptoms; **AND**

   ii. Used in one of the following treatment settings:

      a. Used as primary therapy; **OR**

      b. Used as subsequent therapy (as alternate primary therapy) if progression on primary therapy; **OR**

      c. Used at above label dosing after disease progression on standard doses *(**Note: Only applies to recurrent and/or metastatic disease)*; **OR**

      d. Patient has disease progression with functional tumors and will be continuing treatment with octreotide LAR; **AND**

   iii. Patient has one of the following:

      a. Recurrent and/or locoregional unresectable disease; **OR**

      b. Recurrent and/or distant metastatic disease; **AND**

         1) Patient has clinically significant tumor burden and low grade (typical carcinoid) histology; **OR**

         2) Patient has evidence of disease progression; **OR**

         3) Patient has intermediate grade (atypical carcinoid) histology; **OR**

         4) Patient has symptomatic disease; **OR**

   iv. Used for symptom and/or tumor control of multiple lung nodules or tumorlets and evidence of diffuse idiopathic pulmonary neuroendocrine cell hyperplasia (DIPNECH); **AND**

      a. Used as primary therapy if chronic cough/dyspnea is not responsive to inhalers or conventional treatment; **OR**

      b. Used for symptom and/or tumor control of recurrent, locoregional advanced and/or distant metastatic disease of the gastrointestinal tract; **AND**

         1) Used as single agent for unresectable disease with a low tumor burden; **OR**

         2) Used as a single agent or in combination with alternative front-line therapy if unresectable and patient has a clinically significant tumor burden; **OR**

         3) Used as a single agent for disease progression if not already receiving octreotide LAR; **OR**

         4) Used as a single agent following resection of primary tumor if unresectable and locally symptomatic from primary tumor; **OR**

         5) Used as a single agent as subsequent therapy at above label dosing after clinical, symptomatic, or radiographic progression on standard doses if SSTR-positive; **OR**

- Patient has disease progression with functional tumors and will be continuing treatment with octreotide LAR; **OR**

c. Used for symptom and/or tumor control of somatostatin-receptor positive neuroendocrine tumors of the pancreas (well differentiated grade 1/2); **AND**

1) Patient has locoregional gastrinoma, insulinoma, glucagonoma, or VIPoma *(**Note: Somatostatin-receptor positive disease ONLY applies to insulinoma)*; **OR**

2) Used as subsequent therapy at above label dosing after clinical, symptomatic or radiographic progression on standard doses; **OR**

3) Patient has recurrent or locoregional advanced and/or distant metastatic disease; **AND**

- Used as a single agent if patient is asymptomatic with a low tumor burden and stable disease; **OR**
- Patient is symptomatic; **OR**
- Patient has a clinically significant tumor burden; **OR**
- Patient has clinically significant progression and is not already receiving octreotide LAR; **OR**
- Patient has disease progression with functional tumors and will be continuing treatment with octreotide LAR; **OR**

d. Patient has pheochromocytoma or paraganglioma; **AND**

1) Used as primary treatment for secreting tumors for symptom and/or tumor control; **AND**

2) Patient has locally unresectable or distant metastatic disease; **OR**

e. Patient has well-differentiated grade 3 neuroendocrine tumors; **AND**

1) Used for treatment of symptoms and/or tumor control for somatostatin receptor positive disease and/or hormonal symptoms; **AND**

2) Patient has unresectable locally advanced or metastatic disease with favorable biology (e.g., relatively low Ki-67 [<55%], slow growing, positive SSTR-based PET imaging)

2. **<u>Diarrhea associated with Vasoactive intestinal peptide tumors (VIPomas) †</u>**
   A. Patient has profuse watery diarrhea
3. **<u>Acromegaly †</u>**
   A. Patient diagnosis confirmed by elevated (age-adjusted) or equivocal serum IGF-1 as well as inadequate suppression of GH after a glucose load; **AND**
   B. Used as long-term maintenance therapy; **AND**
   C. Patient's tumor has been visualized on imaging studies (i.e., MRI or CT-scan); **AND**
   D. Baseline growth hormone (GH) and IGF-I blood levels (renewal will require reporting of current levels); **AND**
      i. Patient has documented inadequate response to surgery and/or radiotherapy; **OR**

ii. Surgery and/or radiotherapy is not an option for this patient.

4. **Meningiomas (CNS Cancers) ‡**
   A. Used in combination with everolimus**; AND**
   B. Patient's disease is recurrent or progressive meningioma; **AND**
   C. Radiation treatment is not possible for the patient's disease
5. **Thymic Carcinomas/Thymomas ‡**
   A. Used with or without prednisone therapy; **AND**
   B. Patient has a positive octreotide scan or is dotatate PET/CT positive; **AND**
      i. Used for patients who are unable to tolerate first-line combination regimens; **AND**
         a. Used as first-line therapy for recurrent, advanced, or metastatic disease **OR**
         b. Used as preoperative systemic therapy for surgically resectable disease if R0 resection is considered uncertain; **OR**
         c. Used as postoperative treatment after R2 resection; **OR**
      ii. Used as second-line therapy for unresectable locally advanced or metastatic disease

† FDA Approved Indication(s); ‡ Compendia recommended indication(s)

II.Renewal Criteria

1. Patient continues to meet criteria identified above; **AND**
2. Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include the following: biliary tract abnormalities, hypothyroidism, goiter, sinus bradycardia, cardiac arrhythmias, cardiac conduction abnormalities, pancreatitis, etc.; **AND**
   a. Disease response with improvement in patient's symptoms including reduction in symptomatic episodes (such as diarrhea, rapid gastric dumping, flushing, bleeding, etc.) and/or stabilization of glucose levels and/or decrease in size of tumor or tumor spread; **OR**
   b. **Acromegaly ONLY:**
      i. Disease response indicated by reduction of growth hormone (GH) and/or IGF-I blood levels from baseline**; OR**
      ii. Age-adjusted normalization of serum IGF-1

Limitations/Exclusions

Sandostatin is not considered medically necessary for indications other than those listed above due to insufficient evidence of therapeutic value.

Applicable Procedure Codes

Code	Description
J2353	Injection, octreotide, depot form for intramuscular injection, 1 mg: 1 mg = 1 billable unit

Applicable NDCs

Code	Description

00078-0811-XX	10 mg single-use kit
00078-0818-XX	20 mg single-use kit
00078-0825-XX	30 mg single-use kit

ICD-10 Diagnoses

Code	Description
C25.4	Malignant neoplasm of endocrine pancreas
C37	Malignant neoplasm of thymus
C70.0	Malignant neoplasm of cerebral meninges
C70.1	Malignant neoplasm of spinal meninges
C70.9	Malignant neoplasm of meninges, unspecified
C7A.00	Malignant carcinoid tumor of unspecified site
C7A.010	Malignant carcinoid tumor of the duodenum
C7A.011	Malignant carcinoid tumor of the jejunum
C7A.012	Malignant carcinoid tumor of the ileum
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion
C7A.020	Malignant carcinoid tumor of the appendix
C7A.021	Malignant carcinoid tumor of the cecum
C7A.022	Malignant carcinoid tumor of the ascending colon
C7A.023	Malignant carcinoid tumor of the transverse colon
C7A.024	Malignant carcinoid tumor of the descending colon
C7A.025	Malignant carcinoid tumor of the sigmoid colon
C7A.026	Malignant carcinoid tumor of the rectum
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion
C7A.090	Malignant carcinoid tumor of the bronchus and lung
C7A.091	Malignant carcinoid tumor of the thymus
C7A.092	Malignant carcinoid tumor of the stomach
C7A.093	Malignant carcinoid tumor of the kidney
C7A.094	Malignant carcinoid tumor of the foregut, unspecified
C7A.095	Malignant carcinoid tumor of the midgut, unspecified
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified
C7A.098	Malignant carcinoid tumors of other sites
C7A.1	Malignant poorly differentiated neuroendocrine tumors
C7A.8	Other malignant neuroendocrine tumors
C7B.00	Secondary carcinoid tumors, unspecified site
C7B.01	Secondary carcinoid tumors of distant lymph nodes
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites
C7B.8	Other secondary neuroendocrine tumors
C74.10	Malignant neoplasm of medulla of unspecified adrenal gland
C74.11	Malignant neoplasm of medulla of right adrenal gland
C74.12	Malignant neoplasm of medulla of left adrenal gland
C74.90	Malignant neoplasm of unspecified part of unspecified adrenal gland

C74.91	Malignant neoplasm of unspecified part of right adrenal gland
C74.92	Malignant neoplasm of unspecified part of left adrenal gland
C75.5	Malignant neoplasm of aortic body and other paraganglia
D15.0	Benign neoplasm of thymus
D32.0	Benign neoplasm of cerebral meninges
D32.1	Benign neoplasm of spinal meninges
D32.9	Benign neoplasm of meninges, unspecified
D3A.00	Benign carcinoid tumor of unspecified site
D3A.010	Benign carcinoid tumor of the duodenum
D3A.011	Benign carcinoid tumor of the jejunum
D3A.012	Benign carcinoid tumor of the ileum
D3A.019	Benign carcinoid tumor of the small intestine, unspecified portion
D3A.020	Benign carcinoid tumor of the appendix
D3A.021	Benign carcinoid tumor of the cecum
D3A.022	Benign carcinoid tumor of the ascending colon
D3A.023	Benign carcinoid tumor of the transverse colon
D3A.024	Benign carcinoid tumor of the descending colon
D3A.025	Benign carcinoid tumor of the sigmoid tumor
D3A.026	Benign carcinoid tumor of the rectum
D3A.029	Benign carcinoid tumor of the large intestine, unspecified portion
D3A.090	Benign carcinoid tumor of the bronchus and lung
D3A.091	Benign carcinoid tumor of the thymus
D3A.092	Benign carcinoid tumor of the stomach
D3A.0963A	Benign carcinoid tumor of the hindgut, unspecified
D3A.098	Benign carcinoid tumors of other sites
D42.0	Neoplasm of uncertain behavior of cerebral meninges
D42.1	Neoplasm of uncertain behavior of spinal meninges
D42.9	Neoplasm of uncertain behavior of meninges, unspecified
E16.1	Other hypoglycemia
E16.3	Increased secretion of glucagon
E16.4	Increased secretion of gastrin
E16.8	Other specified disorders of pancreatic internal secretion
E22.0	Acromegaly and pituitary gigantism
E34.0	Carcinoid syndrome
Z85.020	Personal history of malignant carcinoid tumor of stomach
Z85.030	Personal history of malignant carcinoid tumor of large intestine
Z85.040	Personal history of malignant carcinoid tumor of rectum
Z85.060	Personal history of malignant carcinoid tumor of small intestine
Z85.07	Personal history of malignant neoplasm of pancreas
Z85.110	Personal history of malignant carcinoid tumor of bronchus and lung
Z85.230	Personal history of malignant carcinoid tumor of thymus
Z85.841	Personal history of malignant neoplasm of brain
Z85.848	Personal history of malignant neoplasm of other parts of nervous system
Z85.858	Personal history of malignant neoplasm of other endocrine glands

Revision History

Company(ies)	DATE	REVISION
EmblemHealth & ConnectiCare	2/19/2025	Annual Review: Initial Criteria: Removed (some was reworded) the following: Carcinoid tumors/Neuroendocrine tumors (e.g. GI tract, Lung, Thymus, Pancreas, Adrenal) "Patient has severe diarrhea/flushing episodes (carcinoid syndrome) †; Primary treatment of unresected primary gastrinoma; OR Used for management of primary non-metastatic glucagonoma; OR Used for the management of locoregional advanced or metastatic disease of the bronchopulmonary, thymic, gastrointestinal tract; OR Used for treatment of neuroendocrine tumor of the pancreas; OR Used for symptom control for Pheochromocytoma/Paraganglioma." Added: "Patient has severe diarrhea/flushing episodes (carcinoid syndrome) † Φ; OR Used as primary treatment for symptom and/or tumor control of unresected primary gastrinoma; OR Used for symptom and/or tumor control of bronchopulmonary or thymic disease; AND Used for somatostatin receptor (SSTR) positive disease and/or hormonal symptoms; AND Used in one of the following treatment settings: Used as primary therapy; OR Used as subsequent therapy (as alternate primary therapy) if progression on primary therapy; OR Used at above label dosing after disease progression on standard doses (**Note: Only applies to recurrent and/or metastatic disease); OR Patient has disease progression with functional tumors and will be continuing treatment with octreotide LAR; AND Patient has one of the following: Recurrent and/or locoregional unresectable disease; OR Recurrent and/or distant metastatic disease; AND Patient has clinically significant tumor burden and low grade (typical carcinoid) histology; OR Patient has evidence of disease progression; OR Patient has intermediate grade (atypical carcinoid) histology; OR Patient has symptomatic disease; OR Used for symptom and/or tumor control of multiple lung nodules or tumorlets and evidence of diffuse idiopathic pulmonary neuroendocrine cell hyperplasia (DIPNECH); AND Used as primary therapy if chronic cough/dyspnea is not responsive to inhalers or conventional treatment; OR Used for symptom and/or tumor control of recurrent, locoregional advanced and/or distant metastatic disease of the gastrointestinal tract; AND Used as single agent for unresectable disease with a low tumor burden; OR Used as a single agent or in combination with alternative front-line therapy if unresectable and patient has a clinically significant tumor burden; OR Used as a single agent for disease progression if not already receiving octreotide LAR; OR Used as a single agent following resection of primary tumor if unresectable and locally symptomatic from primary tumor; OR Used as a single agent as subsequent therapy at above label dosing after clinical, symptomatic, or radiographic progression on standard doses if SSTR-positive; OR Patient has disease progression with functional tumors and will be continuing treatment with octreotide LAR; OR Used for symptom and/or tumor control of somatostatin-receptor positive neuroendocrine tumors of the pancreas (well differentiated grade 1/2); AND Patient has locoregional gastrinoma, insulinoma, glucagonoma, or VIPoma (**Note: Somatostatin-receptor positive disease ONLY applies to insulinoma); OR Used as subsequent therapy at above label dosing after clinical, symptomatic or radiographic progression on standard doses; OR Patient has recurrent or locoregional advanced and/or distant metastatic disease; AND Used as a single agent if patient is asymptomatic with a low tumor burden and stable disease; OR Patient is symptomatic; OR Patient has a clinically significant tumor burden; OR Patient has clinically significant progression and is not already receiving octreotide LAR; OR Patient has disease progression with functional tumors and will be continuing treatment with octreotide LAR; OR Patient has pheochromocytoma or paraganglioma; AND Used as primary treatment for secreting tumors for symptom and/or tumor control; AND

		Patient has locally unresectable or distant metastatic disease; OR Patient has well-differentiated grade 3 neuroendocrine tumors; AND Used for treatment of symptoms and/or tumor control for somatostatin receptor positive disease and/or hormonal symptoms; AND Patient has unresectable locally advanced or metastatic disease with favorable biology (e.g., relatively low Ki-67 [<55%], slow growing, positive SSTR-based PET imaging)" Meningiomas (CNS Cancers) ‡ Removed: "Patient's disease is unresectable; AND" Added: " Used in combination with everolimus; AND" Thymic Carcinomas/Thymomas ‡ Removed (some was reworded): "Must be used as second-line therapy with or without prednisone Patient has unresectable disease following first-line chemotherapy for potentially resectable locally advanced disease, solitary metastasis, or ipsilateral pleural metastasis; OR Patient has extrathoracic metastatic disease" Added: "Used with or without prednisone therapy; AND Patient has a positive octreotide scan or is dotatate PET/CT positive; AND Used for patients who are unable to tolerate first-line combination regimens; AND Used as first-line therapy for recurrent, advanced, or metastatic disease OR Used as preoperative systemic therapy for surgically resectable disease if R0 resection is considered uncertain; OR Used as postoperative treatment after R2 resection; OR Used as second-line therapy for unresectable locally advanced or metastatic disease" Renewal Criteria: removed: "Neuroendocrine tumors (gastrointestinal tract, bronchopulmonary, thymus, or pancreas) ONLY: Patient has had disease progression and therapy will be continued in patients with functional tumors"
EmblemHealth & ConnectiCare	1/8/2024	Annual Review: Updated dosing limits; Initial Criteria: Acromegaly: Added: "Patient diagnosis confirmed by elevated (age-adjusted) or equivocal serum IGF-1 as well as inadequate suppression of GH after a glucose load; AND Used as long-term maintenance therapy; AND ent's tumor has been visualized on imaging studies (i.e., MRI or CT-scan); AND" Thymic Carcinomas/Thymomas Added: "Patient has unresectable disease following first-line chemotherapy for potentially resectable locally advanced disease, solitary metastasis, or ipsilateral pleural metastasis; OR Patient has extrathoracic metastatic disease" Renewal Criteria Acromegaly : added: "Age-adjusted normalization of serum IGF-1" added renewal criteria for neuroendocrine tumors
EmblemHealth & ConnectiCare	5/09/2023	Annual Review: updated formatting, no criteria changes
EmblemHealth & ConnectiCare	1/12/2023	Transfer to New Template
EmblemHealth & ConnectiCare	10/12/2020	Clarified use in carcinoid tumors/neuroendocrine tumors; added use in Pheochromocytoma/Paraganglioma; removed separate criteria for pancreatic cancer renewal

References

1. Sandostatin LAR [package insert]. East Hanover, NJ; Novartis Pharmaceuticals Corporation; April 2019. Accessed October 2020.
2. Giustina A, Chanson P, Kleinberg D, et al. Expert consensus document: A consensus on the medical treatment of acromegaly. Nat Rev Endocrinol. 2014 Apr; 10(4):243-8. doi: 10.1038/nrendo.2014.21. Epub 2014 Feb 25.

3. Katznelson L, Laws ER Jr, Melmed S, et al. Acromegaly: an endocrine society clinical practice guideline. J Clin Endocrinol Metab. 2014 Nov; 99(11):3933-51. doi: 10.1210/jc.2014-2700. Epub 2014 Oct 30.
4. Referenced with permission from the NCCN Drugs & Biologics Compendium (NCCN Compendium®) for Octreotide. National Comprehensive Cancer Network, 2018. The NCCN Compendium® is a derivative work of the NCCN Guidelines®. NATIONAL COMPREHENSIVE CANCER NETWORK®, NCCN®, and NCCN GUIDELINES® are trademarks owned by the National Comprehensive Cancer Network, Inc." To view the most recent and complete version of the Compendium, go online to NCCN.org. Accessed March 2018.
5. Palmetto GBA. Local Coverage Determination (LCD): Octreotide Acetate for Injectable Suspension (Sandostatin LAR depot) (L33438). Centers for Medicare & Medicaid Services, Inc. Updated on 12/7/2017 with effective date 2/26/2018. Accessed March 2018.