

# **Medical Policy:**

## Simponi ARIA (golimumab)

| POLICY NUMBER | LAST REVIEW       | ORIGIN DATE     |
|---------------|-------------------|-----------------|
| MG.MM.PH.104  | February 18, 2025 | October 8, 2020 |

#### Medical Guideline Disclaimer Property of EmblemHealth. All rights reserved.

The treating physician or primary care provider must submit to EmblemHealth, or ConnectiCare, as applicable (hereinafter jointly referred to as "EmblemHealth"), the clinical evidence that the member meets the criteria for the treatment or surgical procedure. Without this documentation and information, EmblemHealth will not be able to properly review the request preauthorization or post-payment review. The clinical review criteria expressed below reflects how EmblemHealth determines whether certain services or supplies are medically necessary. This clinical policy is not intended to pre-empt the judgment of the reviewing medical director or dictate to health care providers how to practice medicine. Health care providers are expected to exercise their medical judgment in rendering appropriate care. Health care providers are expected to exercise their medical judgment in rendering appropriate care.

EmblemHealth established the clinical review criteria based upon a review of currently available clinical information (including clinical outcome studies in the peer reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors). EmblemHealth expressly reserves the right to revise these conclusions as clinical information changes and welcomes further relevant information. Each benefit program defines which services are covered. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered and/or paid for by EmblemHealth, as some programs exclude coverage for services or supplies that EmblemHealth considers medically necessary.

If there is a discrepancy between this guideline and a member's benefits program, the benefits program will govern. Identification of selected brand names of devices, tests and procedures in a medical coverage policy is for reference only and is not an endorsement of any one device, test or procedure over another. In addition, coverage may be mandated by applicable legal requirements of a state, the Federal Government or the Centers for Medicare & Medicaid Services (CMS) for Medicare and Medicaid members. All coding and web site links are accurate at time of publication.

EmblemHealth may also use tools developed by third parties, such as the MCG™ Care Guidelines, to assist us in administering health benefits. The MCG™ Care Guidelines are intended to be used in connection with the independent professional medical judgment of a qualified health care provider and do not constitute the practice of medicine or medical advice. EmblemHealth Services Company, LLC, has adopted this policy in providing management, administrative and other services to EmblemHealth Plan, Inc., EmblemHealth Insurance Company, EmblemHealth Services Company, LLC, and Health Insurance Plan of Greater New York (HIP) related to health benefit plans offered by these entities. ConnectiCare, an EmblemHealth company, has also adopted this policy. All of the aforementioned entities are affiliated companies under common control of EmblemHealth Inc.

#### **Definitions**

Simponi ARIA is a human monoclonal antibody that binds to tumor necrosis factor alfa (TNF alfa) inhibiting the binding of TNF alfa to its receptors

# **Length of Authorization**

Coverage will be provided for six months and may be renewed

# **Dosing Limits [Medical Benefit]**

Max Units (per dose and over time):

#### **Loading Dose:**

A. 250 billable units on weeks 0 and 4

#### Maintenance:

B. 250 billable units every 8 weeks

#### Guideline

#### I. INITIAL APPROVAL CRITERIA

- A. Patient has been evaluated and screened for the presence of latent TB infection prior to initiating treatment; **AND**
- B. Patient has been evaluated and screened for the presence hepatitis B virus (HBV) prior to initiating treatment;
- C. Patient does not have an active infection, including clinically important localized infections; AND
- D. Must not be administered concurrently with live vaccines; AND
- E. Patient is not on concurrent treatment with another TNF inhibitor, biologic response modifier or other non-biologic agent (i.e., apremilast tofacitinib, baricitinib, upadacitinib,); **AND**
- F. Physician has assessed baseline disease severity utilizing an objective measure/tool; AND

#### 1. Rheumatoid Arthritis (RA) †

- A. Patient is 18 years or older; AND
- B. Must be prescribed by, or in consultation with, a specialist in rheumatology; AND
- C. Documented moderate to severe active disease; AND
- D. Patient has had at least a 3 month trial and failed of previous therapy with **ONE** oral disease modifying anti-rheumatic agent (DMARD) such as methotrexate, azathioprine, auranofin, hydroxychloroquine, penicillamine, sulfasalazine, or leflunomide; **AND**
- E. Prescribed in combination with methotrexate unless contraindicated

### 2. Psoriatic Arthritis (PsA) †

- A. Patient is 2 years or older; AND
- B. Must be prescribed by, or in consultation with, a specialist in dermatology or rheumatology; AND
- C. Documented moderate to severe active disease; AND
  - i. For patients with predominantly axial disease an adequate trial and failure of at least 4 weeks of **ONE** non-steroidal anti-inflammatory agents (NSAIDs), unless use is contraindicated; **OR**
  - ii. For patients with peripheral arthritis, **OR** dactylitis **OR** active enthesitis a trial and failure of at least a 3 month trial of **ONE** oral disease-modifying anti-rheumatic agent (DMARD) such as methotrexate, azathioprine, sulfasalazine, or hydroxychloroquine

### 3. Ankylosing Spondylitis †

- A. Patient is 18 years or older; AND
- B. Must be prescribed by, or in consultation with, a specialist in rheumatology; AND
- C. Documented active disease; AND
- D. Patient had an adequate trial and failure of at least **TWO** (2) non-steroidal anti-inflammatory agents (NSAIDs), over 4 weeks (in total), unless use is contraindicated

#### 4. Polyarticular Juvenile Idiopathic Arthritis (pJIA) †

- A. Patient is 2 of age or older; AND
- B. Must be prescribed by, or in consultation with, a specialist in rheumatology; AND
- C. Documented moderate to severe active disease; AND
- D. Patient has had at least a 1-month trial and failure (unless contraindicated or intolerant) of previous therapy with either oral non-steroidal anti-inflammatory drugs (NSAIDs) **OR** an oral disease-modifying anti-rheumatic agent (DMARD) (e.g., methotrexate, leflunomide, sulfasalazine, etc.)

#### II. RENEWAL CRITERIA

Coverage can be renewed based upon the following criteria:

- A. Patient continues to meet criteria identified above; AND
- B. Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include the following: serious infections, cardiotoxicity/heart failure, malignancy, demyelinating disorders, lupus-like syndrome, severe hypersensitivity reactions, severe hematologic cytopenias (e.g., pancytopenia, leukopenia, neutropenia, thrombocytopenia, etc.), etc.; AND
- C. Patient is receiving ongoing monitoring for presence of TB or other active infections; AND

#### 1. Rheumatoid Arthritis

A. Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C-reactive protein, improvement of patient global assessment, and/or an improvement on a disease activity scoring tool [e.g. an improvement on a composite scoring index such as Disease Activity Score-28 (DAS28) of 1.2 points or more or a ≥20% improvement on the American College of Rheumatology-20 (ACR20) criteria].

### 2. Psoriatic Arthritis

A. Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts and/or an improvement on a disease activity scoring tool [e.g. defined as an improvement in at least 2 of the 4 Psoriatic Arthritis Response Criteria (PsARC), 1 of which must be joint tenderness or swelling score, with no worsening in any of the 4 criteria.]

### 3. **Ankylosing Spondylitis**

A. Disease response as indicated by improvement in signs and symptoms compared to baseline such as total back pain, physical function, morning stiffness, and/or an improvement on a disease activity scoring tool (e.g. ≥ 1.1 improvement on the Ankylosing Spondylitis Disease Activity Score (ASDAS) or an improvement of ≥ 2 on the Bath Ankylosing Spondylitis Disease Activity Index (BASDAI)).

#### 4. Polyarticular Juvenile Idiopathic Arthritis (pJIA)

A. Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C-reactive protein, improvement of patient global assessment, and/or an improvement on a disease activity scoring tool [e.g., an improvement on a composite scoring index such as Juvenile Arthritis Disease Activity Score (JADAS) or the American College of Rheumatology (ACR) Pediatric (ACR-Pedi 30) of at least 30% improvement from baseline in three of six variables].

## **Dosing/Administration**

| Indication   | Dose   |
|--|--|
| Pediatric patients with polyarticular Juvenile Idiopathic<br>Arthritis and Psoriatic Arthritis | 80 mg/m² intravenous infusion at weeks 0 and 4, and every 8 weeks thereafter   |
| Adult patients with Rheumatoid Arthritis, Psoriatic Arthritis, and Ankylosing Spondylitis      | 2 mg/kg intravenous infusion at weeks 0, and 4, then every 8 weeks thereafter. |

# **Applicable Procedure Codes**

| Code  | Description  |
|-------|--|
| J1602 | Injection, golimumab, 1 mg, for intravenous use; 1mg = 1 billable unit |

# **Applicable NDCs**

| Code          | Description  |
|---------------|--|
| 57894-0350-xx | Simponi Aria 50 mg/4 mL injection, single-use vial |

# **ICD-10 Diagnoses**

| Code    | Description   |
|---------|---|
| L40.50  | Arthropathic psoriasis, unspecified   |
| L40.51  | Distal interphalangeal psoriatic arthropathy                                    |
| L40.52  | Psoriatic arthritis mutilans  |
| L40.53  | Psoriatic spondylitis   |
| L40.59  | Other psoriatic arthropathy   |
| M05.10  | Rheumatoid lung disease with rheumatoid arthritis of unspecified site           |
| M05.111 | Rheumatoid lung disease with rheumatoid arthritis of right shoulder             |
| M05.112 | Rheumatoid lung disease with rheumatoid arthritis of left shoulder              |
| M05.119 | Rheumatoid lung disease with rheumatoid arthritis of unspecified shoulder       |
| M05.121 | Rheumatoid lung disease with rheumatoid arthritis of right elbow                |
| M05.122 | Rheumatoid lung disease with rheumatoid arthritis of left elbow                 |
| M05.129 | Rheumatoid lung disease with rheumatoid arthritis of unspecified elbow          |
| M05.131 | Rheumatoid lung disease with rheumatoid arthritis of right wrist                |
| M05.132 | Rheumatoid lung disease with rheumatoid arthritis of left wrist                 |
| M05.139 | Rheumatoid lung disease with rheumatoid arthritis of unspecified wrist          |
| M05.141 | Rheumatoid lung disease with rheumatoid arthritis of right hand                 |
| M05.142 | Rheumatoid lung disease with rheumatoid arthritis of left hand                  |
| M05.149 | Rheumatoid lung disease with rheumatoid arthritis of unspecified hand           |
| M05.151 | Rheumatoid lung disease with rheumatoid arthritis of right hip                  |
| M05.152 | Rheumatoid lung disease with rheumatoid arthritis of left hip                   |
| M05.159 | Rheumatoid lung disease with rheumatoid arthritis of unspecified hip            |
| M05.161 | Rheumatoid lung disease with rheumatoid arthritis of right knee                 |
| M05.162 | Rheumatoid lung disease with rheumatoid arthritis of left knee                  |
| M05.169 | Rheumatoid lung disease with rheumatoid arthritis of unspecified knee           |
| M05.171 | Rheumatoid lung disease with rheumatoid arthritis of right ankle and foot       |
| M05.172 | Rheumatoid lung disease with rheumatoid arthritis of left ankle and foot        |
| M05.179 | Rheumatoid lung disease with rheumatoid arthritis of unspecified ankle and foot |
| M05.19  | Rheumatoid lung disease with rheumatoid arthritis of multiple sites             |
| M05.20  | Rheumatoid vasculitis with rheumatoid arthritis of unspecified site             |
| M05.211 | Rheumatoid vasculitis with rheumatoid arthritis of right shoulder               |
| M05.212 | Rheumatoid vasculitis with rheumatoid arthritis of left shoulder                |
| M05.219 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder         |

| M05.221 | Dhaumataid vacculitic with rhaumataid arthritic of right albayy   |
|---------|---|
| M05.221 | Rheumatoid vasculitis with rheumatoid arthritis of right elbow  |
|         | Rheumatoid vasculitis with rheumatoid arthritis of left elbow   |
| M05.229 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow  |
| M05.231 | Rheumatoid vasculitis with rheumatoid arthritis of right wrist  Rheumatoid vasculitis with rheumatoid arthritis of left wrist |
| M05.232 |   |
| M05.239 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist  |
| M05.241 | Rheumatoid vasculitis with rheumatoid arthritis of right hand   |
| M05.242 | Rheumatoid vasculitis with rheumatoid arthritis of left hand  |
| M05.249 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand   |
| M05.251 | Rheumatoid vasculitis with rheumatoid arthritis of right hip  |
| M05.252 | Rheumatoid vasculitis with rheumatoid arthritis of left hip   |
| M05.259 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip  |
| M05.261 | Rheumatoid vasculitis with rheumatoid arthritis of right knee   |
| M05.262 | Rheumatoid vasculitis with rheumatoid arthritis of left knee  |
| M05.269 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee   |
| M05.271 | Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot   |
| M05.272 | Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot  |
| M05.279 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot   |
| M05.29  | Rheumatoid vasculitis with rheumatoid arthritis of multiple sites   |
| M05.30  | Rheumatoid heart disease with rheumatoid arthritis of unspecified site  |
| M05.311 | Rheumatoid heart disease with rheumatoid arthritis of right shoulder  |
| M05.312 | Rheumatoid heart disease with rheumatoid arthritis of left shoulder   |
| M05.319 | Rheumatoid heart disease with rheumatoid arthritis of unspecified shoulder  |
| M05.321 | Rheumatoid heart disease with rheumatoid arthritis of right elbow   |
| M05.322 | Rheumatoid heart disease with rheumatoid arthritis of left elbow  |
| M05.329 | Rheumatoid heart disease with rheumatoid arthritis of unspecified elbow   |
| M05.331 | Rheumatoid heart disease with rheumatoid arthritis of right wrist   |
| M05.332 | Rheumatoid heart disease with rheumatoid arthritis of left wrist  |
| M05.339 | Rheumatoid heart disease with rheumatoid arthritis of unspecified wrist   |
| M05.341 | Rheumatoid heart disease with rheumatoid arthritis of right hand  |
| M05.342 | Rheumatoid heart disease with rheumatoid arthritis of left hand   |
| M05.349 | Rheumatoid heart disease with rheumatoid arthritis of unspecified hand  |
| M05.351 | Rheumatoid heart disease with rheumatoid arthritis of right hip   |
| M05.352 | Rheumatoid heart disease with rheumatoid arthritis of left hip  |
| M05.359 | Rheumatoid heart disease with rheumatoid arthritis of unspecified hip   |
| M05.361 | Rheumatoid heart disease with rheumatoid arthritis of right knee  |
| M05.362 | Rheumatoid heart disease with rheumatoid arthritis of left knee   |
| M05.369 | Rheumatoid heart disease with rheumatoid arthritis of unspecified knee  |
| M05.371 | Rheumatoid heart disease with rheumatoid arthritis of right ankle and foot  |
| M05.372 | Rheumatoid heart disease with rheumatoid arthritis of left ankle and foot   |
| M05.379 | Rheumatoid heart disease with rheumatoid arthritis of unspecified ankle and foot  |
| M05.39  | Rheumatoid heart disease with rheumatoid arthritis of multiple sites  |
| M05.40  | Rheumatoid myopathy with rheumatoid arthritis of unspecified site   |
| M05.411 | Rheumatoid myopathy with rheumatoid arthritis of right shoulder   |
| M05.412 | Rheumatoid myopathy with rheumatoid arthritis of left shoulder  |
| M05.419 | Rheumatoid myopathy with rheumatoid arthritis of unspecified shoulder   |

| M05.421 | Rheumatoid myopathy with rheumatoid arthritis of right elbow                              |
|---------|---|
| M05.422 | Rheumatoid myopathy with rheumatoid arthritis of left elbow                               |
| M05.429 | Rheumatoid myopathy with rheumatoid arthritis of unspecified elbow                        |
| M05.431 | Rheumatoid myopathy with rheumatoid arthritis of right wrist                              |
| M05.432 | Rheumatoid myopathy with rheumatoid arthritis of left wrist                               |
| M05.439 | Rheumatoid myopathy with rheumatoid arthritis of unspecified wrist                        |
| M05.441 | Rheumatoid myopathy with rheumatoid arthritis of right hand                               |
| M05.442 | Rheumatoid myopathy with rheumatoid arthritis of left hand                                |
| M05.449 | Rheumatoid myopathy with rheumatoid arthritis of unspecified hand                         |
| M05.451 | Rheumatoid myopathy with rheumatoid arthritis of right hip                                |
| M05.452 | Rheumatoid myopathy with rheumatoid arthritis of left hip                                 |
| M05.459 | Rheumatoid myopathy with rheumatoid arthritis of unspecified hip                          |
| M05.461 | Rheumatoid myopathy with rheumatoid arthritis of right knee                               |
| M05.462 | Rheumatoid myopathy with rheumatoid arthritis of left knee                                |
| M05.469 | Rheumatoid myopathy with rheumatoid arthritis of unspecified knee                         |
| M05.471 | Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot                     |
| M05.472 | Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot                      |
| M05.479 | Rheumatoid myopathy with rheumatoid arthritis of unspecified ankle and foot               |
| M05.49  | Rheumatoid myopathy with rheumatoid arthritis of multiple sites                           |
| M05.50  | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified site                   |
| M05.511 | Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder                     |
| M05.512 | Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder                      |
| M05.519 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified shoulder               |
| M05.521 | Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow                        |
| M05.522 | Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow                         |
| M05.529 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified elbow                  |
| M05.531 | Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist                        |
| M05.532 | Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist                         |
| M05.539 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified wrist                  |
| M05.541 | Rheumatoid polyneuropathy with rheumatoid arthritis of right hand                         |
| M05.542 | Rheumatoid polyneuropathy with rheumatoid arthritis of left hand                          |
| M05.549 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hand                   |
| M05.551 | Rheumatoid polyneuropathy with rheumatoid arthritis of right hip                          |
| M05.552 | Rheumatoid polyneuropathy with rheumatoid arthritis of left hip                           |
| M05.559 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hip                    |
| M05.561 | Rheumatoid polyneuropathy with rheumatoid arthritis of right knee                         |
| M05.562 | Rheumatoid polyneuropathy with rheumatoid arthritis of left knee                          |
| M05.569 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified knee                   |
| M05.571 | Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot               |
| M05.572 | Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot                |
| M05.579 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified ankle and foot         |
| M05.59  | Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites                     |
| M05.60  | Rheumatoid arthritis of unspecified site with involvement of other organs and systems     |
| M05.611 | Rheumatoid arthritis of right shoulder with involvement of other organs and systems       |
| M05.612 | Rheumatoid arthritis of left shoulder with involvement of other organs and systems        |
| M05.619 | Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems |

| M05.621 | Rheumatoid arthritis of right elbow with involvement of other organs and systems                               |
|---------|--|
| M05.622 |  |
| M05.629 | Rheumatoid arthritis of left elbow with involvement of other organs and systems                                |
|         | Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems                         |
| M05.631 | Rheumatoid arthritis of right wrist with involvement of other organs and systems                               |
| M05.632 | Rheumatoid arthritis of left wrist with involvement of other organs and systems                                |
| M05.639 | Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems                         |
| M05.641 | Rheumatoid arthritis of right hand with involvement of other organs and systems                                |
| M05.642 | Rheumatoid arthritis of left hand with involvement of other organs and systems                                 |
| M05.649 | Rheumatoid arthritis of unspecified hand with involvement of other organs and systems                          |
| M05.651 | Rheumatoid arthritis of right hip with involvement of other organs and systems                                 |
| M05.652 | Rheumatoid arthritis of left hip with involvement of other organs and systems                                  |
| M05.659 | Rheumatoid arthritis of unspecified hip with involvement of other organs and systems                           |
| M05.661 | Rheumatoid arthritis of right knee with involvement of other organs and systems                                |
| M05.662 | Rheumatoid arthritis of left knee with involvement of other organs and systems                                 |
| M05.669 | Rheumatoid arthritis of unspecified knee with involvement of other organs and systems                          |
| M05.671 | Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems                      |
| M05.672 | Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems                       |
| M05.679 | Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems                |
| M05.69  | Rheumatoid arthritis of multiple sites with involvement of other organs and systems                            |
| M05.70  | Rheumatoid arthritis with rheumatoid factor of unspecified site without organ or systems involvement           |
| M05.711 | Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement             |
| M05.712 | Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement              |
|         | Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems                   |
| M05.719 | involvement  |
| M05.721 | Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement                |
| M05.722 | Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement                 |
| M05.729 | Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement          |
| M05.731 | Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement                |
| M05.732 | Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement                 |
| M05.739 | Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement          |
| M05.741 | Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement                 |
| M05.742 | Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement                  |
| M05.749 | Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement           |
| M05.751 | Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement                  |
| M05.752 | Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement                   |
| M05.759 | Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement            |
| M05.761 | Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement                 |
| M05.762 | Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement                  |
| M05.769 | Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement           |
|         | Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems                   |
| M05.771 | involvement  |
| M05.772 | Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement        |
| M05.779 | Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement |
| M05.79  | Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement             |
| M05.80  | Other rheumatoid arthritis with rheumatoid factor of unspecified site  |
| M05.811 | Other rheumatoid arthritis with rheumatoid factor of right shoulder  |

| M05.812 | Other rheumatoid arthritis with rheumatoid factor of left shoulder              |
|---------|---|
| M05.819 | Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder       |
| M05.819 | Other rheumatoid arthritis with rheumatoid factor of right elbow                |
| M05.821 | Other rheumatoid arthritis with rheumatoid factor of left elbow                 |
| M05.829 | Other rheumatoid arthritis with rheumatoid factor of unspecified elbow          |
| M05.831 | Other rheumatoid arthritis with rheumatoid factor of right wrist                |
| M05.832 | Other rheumatoid artifitis with rheumatoid factor of left wrist                 |
| M05.839 | Other rheumatoid artifitis with rheumatoid factor of unspecified wrist          |
| M05.841 | Other rheumatoid arthritis with rheumatoid factor of right hand                 |
| M05.842 | Other rheumatoid arthritis with rheumatoid factor of left hand                  |
|         |   |
| M05.849 | Other rheumatoid arthritis with rheumatoid factor of unspecified hand           |
| M05.851 | Other rheumatoid arthritis with rheumatoid factor of right hip                  |
| M05.852 | Other rheumatoid arthritis with rheumatoid factor of left hip                   |
| M05.859 | Other rheumatoid arthritis with rheumatoid factor of unspecified hip            |
| M05.861 | Other rheumatoid arthritis with rheumatoid factor of right knee                 |
| M05.862 | Other rheumatoid arthritis with rheumatoid factor of left knee                  |
| M05.869 | Other rheumatoid arthritis with rheumatoid factor of unspecified knee           |
| M05.871 | Other rheumatoid arthritis with rheumatoid factor of right ankle and foot       |
| M05.872 | Other rheumatoid arthritis with rheumatoid factor of left ankle and foot        |
| M05.879 | Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot |
| M05.89  | Other rheumatoid arthritis with rheumatoid factor of multiple sites             |
| M05.9   | Rheumatoid arthritis with rheumatoid factor, unspecified                        |
| M06.00  | Rheumatoid arthritis without rheumatoid factor, unspecified site                |
| M06.011 | Rheumatoid arthritis without rheumatoid factor, right shoulder                  |
| M06.012 | Rheumatoid arthritis without rheumatoid factor, left shoulder                   |
| M06.019 | Rheumatoid arthritis without rheumatoid factor, unspecified shoulder            |
| M06.021 | Rheumatoid arthritis without rheumatoid factor, right elbow                     |
| M06.022 | Rheumatoid arthritis without rheumatoid factor, left elbow                      |
| M06.029 | Rheumatoid arthritis without rheumatoid factor, unspecified elbow               |
| M06.031 | Rheumatoid arthritis without rheumatoid factor, right wrist                     |
| M06.032 | Rheumatoid arthritis without rheumatoid factor, left wrist                      |
| M06.039 | Rheumatoid arthritis without rheumatoid factor, unspecified wrist               |
| M06.041 | Rheumatoid arthritis without rheumatoid factor, right hand                      |
| M06.042 | Rheumatoid arthritis without rheumatoid factor, left hand                       |
| M06.049 | Rheumatoid arthritis without rheumatoid factor, unspecified hand                |
| M06.051 | Rheumatoid arthritis without rheumatoid factor, right hip                       |
| M06.052 | Rheumatoid arthritis without rheumatoid factor, left hip                        |
| M06.059 | Rheumatoid arthritis without rheumatoid factor, unspecified hip                 |
| M06.061 | Rheumatoid arthritis without rheumatoid factor, right knee                      |
| M06.062 | Rheumatoid arthritis without rheumatoid factor, left knee                       |
| M06.069 | Rheumatoid arthritis without rheumatoid factor, unspecified knee                |
| M06.071 | Rheumatoid arthritis without rheumatoid factor, right ankle and foot            |
| M06.072 | Rheumatoid arthritis without rheumatoid factor, left ankle and foot             |
| M06.079 | Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot      |
| M06.08  | Rheumatoid arthritis without rheumatoid factor, vertebrae                       |
| M06.09  | Rheumatoid arthritis without rheumatoid factor, multiple sites                  |

| M06.80  | Other specified rheumatoid arthritis, unspecified site           |
|---------|--|
| M06.811 | Other specified rheumatoid arthritis, right shoulder             |
| M06.812 | Other specified rheumatoid arthritis, left shoulder              |
| M06.819 | Other specified rheumatoid arthritis, unspecified shoulder       |
| M06.821 | Other specified rheumatoid arthritis, right elbow                |
| M06.822 | Other specified rheumatoid arthritis, left elbow                 |
| M06.829 | Other specified rheumatoid arthritis, unspecified elbow          |
| M06.831 | Other specified rheumatoid arthritis, right wrist                |
| M06.832 | Other specified rheumatoid arthritis, left wrist                 |
| M06.839 | Other specified rheumatoid arthritis, unspecified wrist          |
| M06.841 | Other specified rheumatoid arthritis, right hand                 |
| M06.842 | Other specified rheumatoid arthritis, left hand                  |
| M06.849 | Other specified rheumatoid arthritis, unspecified hand           |
| M06.851 | Other specified rheumatoid arthritis, right hip                  |
| M06.852 | Other specified rheumatoid arthritis, left hip                   |
| M06.859 | Other specified rheumatoid arthritis, unspecified hip            |
| M06.861 | Other specified rheumatoid arthritis, right knee                 |
| M06.862 | Other specified rheumatoid arthritis, left knee                  |
| M06.869 | Other specified rheumatoid arthritis, unspecified knee           |
| M06.871 | Other specified rheumatoid arthritis, right ankle and foot       |
| M06.872 | Other specified rheumatoid arthritis, left ankle and foot        |
| M06.879 | Other specified rheumatoid arthritis, unspecified ankle and foot |
| M06.88  | Other specified rheumatoid arthritis, vertebrae                  |
| M06.89  | Other specified rheumatoid arthritis, multiple sites             |
| M08.09  | Unspecified juvenile rheumatoid arthritis, multiple sites        |
| M08.40  | Pauciarticular juvenile rheumatoid arthritis, unspecified site   |
| M06.9   | Rheumatoid arthritis, unspecified                                |
| M45.0   | Ankylosing spondylitis of multiple sites in spine                |
| M45.1   | Ankylosing spondylitis of occipito-atlanto-axial region          |
| M45.2   | Ankylosing spondylitis of cervical region                        |
| M45.3   | Ankylosing spondylitis of cervicothoracic region                 |
| M45.4   | Ankylosing spondylitis of thoracic region                        |
| M45.5   | Ankylosing spondylitis of thoracolumbar region                   |
| M45.6   | Ankylosing spondylitis lumbar region                             |
| M45.7   | Ankylosing spondylitis of lumbosacral region                     |
| M45.8   | Ankylosing spondylitis sacral and sacrococcygeal region          |
| M45.9   | Ankylosing spondylitis of unspecified sites in spine             |

# **Revision History**

| Company(ies)   | DATE      | REVISION  |
|----------------|-----------|---|
| EmblemHealth & | 2/18/2025 | Annual Review: Initial Criteria: Psoriatic Arthritis (PsA) † Removed: or active |
| ConnectiCare   |           | enthesitis" from the following statement: "For patients with predominantly      |
|                |           | axial disease OR active enthesitis, an adequate trial and failure of at least 4 |
|                |           | weeks of ONE non-steroidal anti-inflammatory agents (NSAIDs), unless use is     |

|                             |           | contraindicated; OR" Added: "Or active enthesitis" to the following statement: "For patients with peripheral arthritis, OR dactylitis OR active enthesitis a trial and failure of at least a 3 month trial of ONE oral disease-modifying anti-rheumatic agent (DMARD) such as methotrexate, azathioprine, sulfasalazine, or hydroxychloroquine"  |
|-----------------------------|-----------|--|
| EmblemHealth & ConnectiCare | 1/8/2024  | Annual Review: Initial Criteria: Ankylosing Spondylitis † Added" Over 4 weeks (in total): to the phrase "Patient had an adequate trial and failure of at least TWO (2) non-steroidal anti-inflammatory agents (NSAIDs), over 4 weeks (in total), unless use is contraindicated" Polyarticular Juvenile Idiopathic Arthritis (pJIA) † Added: "moderate to severe" in the phrase "Documented moderate to severe active disease; AND" Renewal Criteria: Polyarticular Juvenile Idiopathic Arthritis (pJIA) Removed to rephrase: "Patient achieves or maintains a positive clinical response with Simponi Aria as evidenced by low disease activity or improvement in signs and symptoms of the condition."  |
|                             |           | Added: "Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C-reactive protein, improvement of patient global assessment, and/or an improvement on a disease activity scoring tool [e.g., an improvement on a composite scoring index such as Juvenile Arthritis Disease Activity Score (JADAS) or the American College of Rheumatology (ACR) Pediatric (ACR-Pedi 30) of at least 30% improvement from baseline in three of six variables]."   |
| EmblemHealth & ConnectiCare | 5/03/2023 | Initial Criteria Psoriatic Arthritis: Removed: "For patients with predominantly axial disease OR active enthesitis and/or dactylitis, an adequate trial and failure of at least TWO (2) non-steroidal anti-inflammatory agents (NSAIDs), unless use is contraindicated; OR  For patients with peripheral arthritis, a trial and failure of at least a 3 month trial of ONE oral disease-modifying anti-rheumatic agent (DMARD) such as methotrexate, azathioprine, sulfasalazine, or hydroxychloroquine" Replaced with "Patient is 2 years or older; AND  Must be prescribed by, or in consultation with, a specialist in dermatology or rheumatology; AND  Documented moderate to severe active disease; AND  For patients with predominantly axial disease OR active enthesitis, an adequate trial and failure of at least 4 weeks of ONE non-steroidal anti-inflammatory agents (NSAIDs), unless use is contraindicated; OR  For patients with peripheral arthritis, or dactylitis a trial and failure of at least a 3 month trial of ONE oral disease-modifying anti-rheumatic agent (DMARD) such as methotrexate, azathioprine, sulfasalazine, or hydroxychloroquine" |

| EmblemHealth &              | 1/12/2023 | Polyarticular Juvenile Idiopathic Arthritis Initial Criteria:  Removed: "Patient has documented failure or intolerance to an adequate trial of ONE DMARD (e.g., methotrexate [oral or injectable], leflunomide, and sulfasalazine)." And replaced with "D. Patient has had at least a 1-month trial and failure (unless contraindicated or intolerant) of previous therapy with either oral non-steroidal anti-inflammatory drugs (NSAIDs) OR an oral disease-modifying anti-rheumatic agent (DMARD) (e.g., methotrexate, leflunomide, sulfasalazine, etc.)"  Transfer to New Template |
|-----------------------------|-----------|--|
| ConnectiCare                | 1/12/2023 | Transfer to New Template   |
| EmblemHealth & ConnectiCare |           | Addition of covered use for the treatment of pediatric patients aged 2 years and older with active polyarticular Juvenile Idiopathic Arthritis (pJIA); added the following ICD-10 codes: M08.09, M08.40.   |

## References

- 1. Simponi ARIA [package insert]. Horsham, PA; Janssen Biotech Inc; September 2020. Accessed October 2020.
- 2. Singh JA, Saag KG, Bridges SL Jr, et al. 2015 American College of Rheumatology Guideline for the Treatment of Rheumatoid Arthritis. Arthritis Care Res (Hoboken). 2015 Nov 6. doi: 10.1002/acr.22783.
- 3. Weinblatt ME, Bingham CO 3rd, Mendelsohn AM, et al. Intravenous golimumab is effective in patients with active rheumatoid arthritis despite methotrexate therapy with responses as early as week 2: results of the phase 3, randomized, multicentre, double-blind, placebo-controlled GO-FURTHER trial. Ann Rheum Dis. 2013 Mar;72(3):381-9. doi: 10.1136/annrheumdis-2012-201411. Epub 2012 Jun 1.
- 4. Smolen JS, Landewé R, Bijlsma J, et al. EULAR recommendations for the management of rheumatoid arthritis with synthetic and biological disease-modifying antirheumatic drugs: 2016 update. Ann Rheum Dis. 2017 Mar 6. pii: annrheumdis-2016-210715.
- 5. Gottlieb A, Korman NJ, Gordon KB, Feldman SR, Lebwohl M, Koo JY, Van Voorhees AS, Elmets CA, Leonardi CL, Beutner KR, Bhushan R, Menter A. Guidelines of care for the management of psoriasis and psoriatic arthritis: Section 2. Psoriatic arthritis: overview and guidelines of care for treatment with an emphasis on the biologics. J Am Acad Dermatol 2008 May; 58(5):851-64.
- 6. Ramiro S, Smolen JS, Landewé R, et al. Pharmacological treatment of psoriatic arthritis: a systematic literature review for the 2015 update of the EULAR recommendations for the management of psoriatic arthritis. Ann Rheum Dis 2016;75:490-498 doi:10.1136/annrheumdis-2015-208466
- 7. Van Der Heijde D, Ramiro S, Landewe R, et al. 2016 update of the ASAS-EULAR management recommendations for axial spondyloarthritis. Ann Rheum Dis doi:10.1136/annrheumdis-2016-210770
- 8. National Institute for Health and Care Excellence. NICE 2017. Certolizumab pegol and secukinumab for treating active psoriatic arthritis after inadequate response to DMARDs. Published 24 May 2017. Technology Appraisal Guidance [TA445]. https://www.nice.org.uk/guidance/TA445/chapter/1-Recommendations. Accessed August 2017.
- 9. National Institute for Health and Care Excellence. NICE 2009. Rheumatoid Arthritis in Adults: Management. Published 25 February 2009. Clinical Guideline [CG79].

- https://www.nice.org.uk/guidance/cg79/resources/rheumatoid-arthritis-in-adults-management-pdf-975636823525.
- 10. National Institute for Health and Care Excellence. NICE 2010. Adalimumab, etanercept, infliximab, rituximab and abatacept for the treatment of rheumatoid arthritis after failure of a TNF inhibitor. Published 10 October 2012. Clinical Guideline [TA195]. https://www.nice.org.uk/guidance/ta195/resources/adalimumabetanercept-infliximab-rituximab-and-abatacept-for-the-treatment-of-rheumatoid-arthritis-after-the-failure-of-a-tnf-inhibitor-pdf-82598558287813.
- 11. Ward MM, Guthri LC, Alba MI. Rheumatoid Arthritis Response Criteria and Patient-Reported Improvement in Arthritis Activity: Is an ACR20 Response Meaningful to Patients". Arthritis Rheumatol. 2014 Sep; 66(9): 2339–2343. doi: 10.1002/art.38705