SPECIALTY GUIDELINE MANAGEMENT

Cinacalcet

POLICY

1. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indication
Cinacalcet is indicated for secondary hyperparathyroidism (HPT) in adult patients with chronic kidney disease (CKD) on dialysis, hypercalcemia in adult patients with parathyroid carcinoma, and hypercalcemia in adult patients with primary HPT for whom parathyroidectomy would be indicated on the basis of serum calcium levels, but who are unable to undergo parathyroidectomy.

Compendial Use:
Tertiary hyperparathyroidism in post-kidney transplant patients not receiving dialysis

Limitations of use
Cinacalcet is not indicated for use in patients with CKD who are not on dialysis.

All other indications are considered experimental/investigational and are not a covered benefit.

2. EXCLUSIONS:
Coverage will not be provided for members with a pretreatment serum calcium level (corrected for albumin) less than 8.4 mg/dL.

3. CRITERIA FOR INITIAL APPROVAL

A. Secondary hyperparathyroidism with CKD on dialysis
Authorization of 12 months may be granted for members with secondary HPT with CKD on dialysis and a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL.

B. Tertiary hyperparathyroidism in post-kidney transplant patients not receiving dialysis
Authorization of 12 months may be granted for members with tertiary hyperparathyroidism not receiving dialysis who have had a kidney transplant and a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL.
C. **Parathyroid carcinoma**
   Authorization of 12 months may be granted for members with parathyroid carcinoma and a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL.

C. **Primary hyperparathyroidism**
   Authorization of 12 months may be granted for treatment of primary HPT when all of the following criteria are met:
   1. The patient has a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL;
   2. The patient is unable to undergo parathyroidectomy.

4. **CONTINUATION OF THERAPY**
   Authorization of 12 months may be granted for continuation of cinacalcet when either one of the two following criteria is met:
   1. The patient has a serum calcium level (corrected for albumin) greater than or equal to 7.5 mg/dL.
   2. The patient has a serum calcium level (corrected for albumin) less than 7.5 mg/dL, and cinacalcet will be withheld until this level reaches 8 mg/dL.

5. **DOSAGE**
   Cinacalcet has a quantity limit of 180 mg/day for dialysis patients with secondary HPT with CKD on dialysis & secondary HPT in post-kidney transplant patients not receiving dialysis, and 360 mg/day for parathyroid carcinoma or primary HPT.

6. **HCPCS codes**

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<tr>
<th>HCPCS Code</th>
<th>Description</th>
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<tr>
<td>J0604</td>
<td>Cinacalcet, oral, 1mg (for esrd on dialysis)</td>
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7. **REFERENCES**