

Reference number(s)

1624-A

# Specialty Guideline Management cinacalcet-Sensipar

## **Products Referenced by this Document**

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Sensipar	cinacalcet

## **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 Indications<sup>1-4,9</sup>

- Secondary hyperparathyroidism (HPT) in adult patients with chronic kidney disease (CKD) on dialysis
- Hypercalcemia in adult patients with parathyroid carcinoma
- 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 Uses<sup>2,5-6,10</sup>

Hypercalcemia in post-kidney transplant patients with persistent hyperparathyroidism All other indications are considered experimental/investigational and not medically necessary.

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## **Coverage Criteria**

## Secondary Hyperparathyroidism with CKD on Dialysis<sup>1</sup>

Authorization of 12 months may be granted for treatment of secondary hyperparathyroidism in a member with chronic kidney disease on dialysis who has a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL (see Appendix).

#### Primary Hyperparathyroidism<sup>1</sup>

Authorization of 12 months may be granted for treatment of primary hyperparathyroidism in a member who is not able to undergo parathyroidectomy and has a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL (see Appendix).

## Persistent Hyperparathyroidism in Post-Kidney Transplant Patients<sup>2,5-7,10</sup>

Authorization of 12 months may be granted for treatment of persistent hyperparathyroidism in a member who has had a kidney transplant and has a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL (see Appendix).

#### Parathyroid Carcinoma<sup>1</sup>

Authorization of 12 months may be granted for the treatment of parathyroid carcinoma in a member who has a serum calcium level (corrected for albumin) greater than or equal to 8.4 mg/dL (see Appendix).

## **Continuation of Therapy**

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in the coverage criteria section when the following criteria are met:

## Secondary Hyperparathyroidism with CKD on Dialysis<sup>1</sup>

Member is experiencing benefit from therapy as evidenced by a decrease in intact parathyroid hormone (iPTH) levels from pretreatment baseline.

## All Other Indications<sup>1,5</sup>

Member is experiencing benefit from therapy (e.g., decreased or normalized corrected serum calcium levels since starting therapy).

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# Appendix<sup>9</sup>

Corrected calcium = measured total calcium + 0.8(4.0 - serum albumin)

#### References

- 1. Cinacalcet [package insert]. Cranbury, NJ: Sun Pharmaceuticals Industries, Inc.; January 2024.
- 2. Sensipar [package insert]. Thousand Oaks, CA: Amgen, Inc.; December 2019.
- 3. Micromedex Solutions [database online]. Truven Health Analytics, Inc. Ann Arbor, MI. Available at: www.micromedexsolutions.com. Accessed October 7, 2024.
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- 5. Clinical Pharmacology [Internet]. Elsevier. Tampa (FL). Available at: http://www.clinicalpharmacology.com. Accessed October 7, 2024.
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- 7. Kruse AE, Ensenberger U, Frey FJ, et al. The calcimimetic cinacalcet normalizes serum calcium in renal transplant patients with persistent hyperparathyroidism. Nephrol Dial Transplant. 2005;20:1311-1314.
- 8. Srinivas TR, Schold JD, Womer KL, et al. Improvement in hypercalcemia with cinacalcet after kidney transplantation. Clin J Am Soc Nephrol. 2006;1:323–326.
- 9. Shoback D. Hypoparathyroidism. NEJM. 2008;359: 391-403.
- 10. Palumbo VD, Damiano G, Messina M, et al. Tertiary hyperparathyroidism: a review. Clin Ter. 2021;172(3):241-246.