



PHARMACY POLICY STATEMENT

North Carolina Marketplace

DRUG NAME	Firazyr or Sajazir (icatibant)
BILLING CODE	J1744 or NDC
BENEFIT TYPE	Medical or Pharmacy



CareSource considers icatibant not medically necessary for the treatment of conditions that are not listed in this document. For any other indication, please refer to the Off- Label policy.

DATE	ACTION/DESCRIPTION
08/25/2017	New policy for Firazyr created. Criteria for each type of HAE specified. Criteria of documentation of attacks, discontinuation of meds that can cause HAE, and restriction on combinations with other meds for acute attacks added.
01/20/2021	Updated references. Removed hematology as a specialist. Simplified the diagnostic criteria. Removed log book requirement. Removed statement about causative meds. Added ACE inhibitor interaction. Reworded renewal criteria. Extended initial auth duration to 6 mo and renewal to 12 mo. Amended the quantity limit to say 6 syringes instead of 6 mL.
07/05/2022	Transferred to new template. Updated references. Added Sajazir. Added pharmacy benefit as option. Added statement about using generic icatibant.

References:

1. Firazyr (prescribing information). Takeda Pharmaceuticals America, Inc; 2021.
2. Sajazir (prescribing information). Cycle Pharmaceuticals Ltd; 2021.
3. Frank MM, Zuraw B, Banerji A, et al. Management of children with hereditary angioedema due to C1 inhibitor deficiency. *Pediatrics*. 2016 Nov;138(5). pii: e20160575.
4. Busse PJ, Christiansen SC, Riedl MA, et al. US HAEA Medical Advisory Board 2020 Guidelines for the Management of Hereditary Angioedema [published online ahead of print, 2020 Sep 6]. *J Allergy Clin Immunol*. 2020;S2213-2198(20)30878-3. doi:10.1016/j.jaip.2020.08.046
5. Lumry WR, Farkas H, Moldovan D, et al. Icatibant for Multiple Hereditary Angioedema Attacks across the Controlled and Open-Label Extension Phases of FAST-3. *Am J Respir Crit Care Med*. 2015;168(1):44-55. doi:10.1159/000441060
6. Betschel S, Badiou J, Binkley K, et al. The International/Canadian Hereditary Angioedema Guideline [published correction appears in *Allergy Asthma Clin Immunol*. 2020 May 6;16:33]. *Allergy Asthma Clin Immunol*. 2019;15:72. Published 2019 Nov 25. doi:10.1186/s13223-019-0376-8
7. Bork K, Bernstein JA, Machnig T, Craig TJ. Efficacy of Different Medical Therapies for the Treatment of Acute Laryngeal Attacks of Hereditary Angioedema: A Systematic Review. *JAMA*. 2019;321(12):1140-1149. doi:10.1001/jama.2018.18140