

Federal Employee Program.

Blue Cross Blue Shield Association 750 9th St NW, Suite 900 Washington, D.C. 20001 1-800-624-5060 Fax 1-877-378-4727

# 5.30.018

Section: Prescription Drugs Effective Date: October 1, 2024
Subsection: Endocrine and Metabolic Drugs Original Policy Date: March 13, 2015

Subject: Xgeva Page: 1 of 6

Last Review Date: September 6, 2024

## Xgeva

#### **Description**

## Xgeva (denosumab)

#### Background

Xgeva is indicated for the prevention of skeletal-related events in patients with multiple myeloma and in patients with bone metastases from solid tumors and for treatment of giant cell tumor of bone. Xgeva binds to the protein essential for the formation, function, and survival of osteoclasts, the cells responsible for bone resorption. Increased osteoclast activity is a mediator of solid tumor bone metastases. Similarly, giant cell tumors of bone and osteoclast-like giant cells contribute to osteolysis and [bone] tumor growth. Xgeva prevents activation of osteoclasts, their precursors, and osteoclast-like giant cells (1).

#### **Regulatory Status**

FDA-approved indications: Xgeva is a RANK ligand (RANKL) inhibitor indicated for: (1)

- Prevention of skeletal-related events in patients with multiple myeloma and in patients with bone metastases from solid tumors
- Treatment of adults and skeletally mature adolescents with giant cell tumor of bone that is unresectable or where surgical resection is likely to result in severe morbidity
- Hypercalcemia of malignancy refractory to bisphosphonate therapy

Xgeva is contraindicated in patients with hypocalcemia. Pre-existing hypocalcemia must be corrected prior to initiating therapy with Xgeva (1).

Section: Prescription Drugs Effective Date: October 1, 2024

Subsection: Endocrine and Metabolic Drugs Original Policy Date: March 13, 2015

Subject: Xgeva Page: 2 of 6

Xgeva may increase risks for osteonecrosis of the jaw, hypocalcemia, and atypical femoral fracture (1).

#### Related policies

Evenity, Parathyroid Hormone Analogs, Prolia

#### **Policy**

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Xgeva may be considered **medically necessary** if the conditions indicated below are met.

Xgeva may be considered **investigational** for all other indications.

### **Prior-Approval Requirements**

**Age** 13 years of age or older

#### **Diagnosis**

Patient must have the following:

- 1. Giant cell tumor of bone
  - a. Tumor is unresectable or surgical resection is not recommended
  - b. Pre-existing hypocalcemia must be corrected prior to initiating therapy
  - c. **NO** concurrent use with another RANKL-inhibitor (see Appendix 1)

Age 18 years of age or older

#### **Diagnoses**

Patient must have **ONE** of the following:

- 1. Bone metastases from solid tumors
- 2. Multiple myeloma

**AND ALL** of the following for **BOTH** indications above:

a. At high risk for skeletal-related events

Section: Prescription Drugs Effective Date: October 1, 2024

Subsection: Endocrine and Metabolic Drugs Original Policy Date: March 13, 2015

Subject: Xgeva Page: 3 of 6

b. Pre-existing hypocalcemia must be corrected prior to initiating therapy

c. Inadequate treatment response, intolerance, or contraindication to **ONE** of the following:

- i. IV Bisphosphonate
- ii. Pamidronate
- iii. Zoledronic acid
- 3. Hypercalcemia of malignancy
  - a. Disease must have relapsed or progressed after bisphosphonate therapy

**AND** the following for **ALL** indications:

a. **NO** concurrent use with another RANKL-inhibitor (see Appendix 1)

## Prior - Approval Renewal Requirements

Age 13 years of age or older

#### **Diagnosis**

Patient must have the following:

- 1. Giant cell tumor of bone
  - a. **NO** concurrent use with another RANKL-inhibitor (see Appendix 1)

Age 18 years of age or older

#### Diagnoses

Patient must have **ONE** of the following:

- 1. Bone metastases from solid tumors
- 2. Multiple myeloma
- 3. Hypercalcemia of malignancy

**AND** the following for **ALL** indications:

a. **NO** concurrent use with another RANKL-inhibitor (see Appendix 1)

Section: Prescription Drugs Effective Date: October 1, 2024

Subsection: Endocrine and Metabolic Drugs Original Policy Date: March 13, 2015

Subject: Xgeva Page: 4 of 6

#### **Policy Guidelines**

#### **Pre - PA Allowance**

None

#### **Prior – Approval Limits**

**Quantity** 5 vials per 84 days

**Duration** 3 months

## Prior - Approval Renewal Limits

**Quantity** 3 vials per 84 days

**Duration** 12 months

#### Rationale

#### **Summary**

Xgeva an osteoclast inhibitor is used to treat complications of bone metastases in patients with multiple myeloma and in patients with solid tumor cancers, for treatment of giant cell tumor of bone and for hypercalcemia of malignancy refractory to bisphosphonate therapy. Xgeva may increase risks for osteonecrosis of the jaw, hypocalcemia, and atypical femoral fracture. The safety and efficacy of Xgeva have not been established in pediatric patients except in skeletally mature adolescents with giant cell tumor of bone (1).

Prior authorization is required to ensure the safe, clinically appropriate, and cost-effective use of Xgeva while maintaining optimal therapeutic outcomes.

#### References

1. Xgeva [package insert]. Thousand Oaks, CA: Amgen Inc.; June 2020.

<b>Policy History</b>	Po	licy	Hi	stc	ry
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Date Action

March 2015 Addition to PA

Annual editorial review and reference update Added new indication hypercalcemia of malignancy

# 5.30.018

Section: Prescription Drugs Effective Date: October 1, 2024

Subsection: Endocrine and Metabolic Drugs Original Policy Date: March 13, 2015

Subject: Xgeva Page: 5 of 6

June 2015 Annual editorial review and reference update
December 2015 Annual editorial review and reference update

Addition to the bone metastases of inadequate treatment response, intolerance, or contraindication to one of the following: IV bisphosphonate, pamidronate, or zoledronic acid and addition of quantity limits and change

to initial PA duration to 3 months per PMPC

March 2016 Annual review

Policy number changed from 5.07.18 to 5.30.18

September 2016 Annual review

December 2017 Annual editorial review and reference update

Addition of age requirement to renewal section

January 2018 Addition of multiple myeloma indication

Removal of the requirement of no concurrent diagnosis of multiple

myeloma

March 2018 Annual review

September 2019 Annual review and reference update
December 2020 Annual review and reference update

December 2021 Annual review

December 2022 Annual review. Changed policy number to 5.30.018

December 2023 Annual review September 2024 Annual review

**Keywords** 

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on September 6, 2024 and is effective on October 1, 2024.

# 5.30.018

Section:Prescription DrugsEffective Date:October 1, 2024Subsection:Endocrine and Metabolic DrugsOriginal Policy Date:March 13, 2015

Subject: Xgeva Page: 6 of 6

## Appendix 1 - List of RANKL Inhibitors

Generic Name	Brand Name
denosumab	Prolia
denosumab	Xgeva