Clinical Policy: Bezlotoxumab (Zinplava)

Reference Number: PA.CP.PHAR.300
Effective Date: 01/18
Last Review Date: 07/18

Coding Implications
Revision Log

Description
The intent of the criteria is to ensure that patients follow selection elements established by Pennsylvania Health and Wellness ® clinical policy for bezlotoxumab (Zinplava™).

FDA Approved Indication(s)
Zinplava is indicated to reduce the recurrence of Clostridium difficile infection (CDI) in patients 18 years of age or older who are receiving antibacterial drug treatment of CDI and are at a high risk for CDI recurrence.

Limitation of use: Zinplava is not indicated for the treatment of CDI. Zinplava is not an antibacterial drug. Zinplava should only be used in conjunction with antibacterial drug treatment of CDI.

Policy/Criteria
It is the policy of Pennsylvania Health and Wellness ® that Zinplava is **medically necessary** when the following criteria are met:

I. Initial Approval Criteria

A. *Clostridium difficile* Infection (must meet all):

1. Diagnosis of CDI confirmed by documentation of positive Clostridium difficile test;
2. Age ≥ 18 years;
3. Member will receive or is currently receiving concomitant antibacterial drug treatment for CDI (e.g. metronidazole, vancomycin, fidaxomicin);
4. Patient is at high risk for recurrence: age greater than or equal to 65, clinically severe CDI (as defined by ZAR score greater than or equal to 2), at least one previous episode of CDI within the past 6 months, immunosuppression, or the presence of a hypervirulent strain of CDI bacteria;
5. Dose does not exceed 10 mg/kg.

Approval duration: 1 dose only (3 months)

Re-authorization will not be approved.
Initial approval criteria must be met for new episodes of CDI.

B. Other diagnoses/indications: Refer to PA.CP.PMN.53

Background
Description/Mechanism of Action:
Bezlotoxumab is a human monoclonal antibody that binds *C. difficile* toxin B with an equilibrium dissociation constant (Kd) of $<1\times10^{-9}$M. Bezlotoxumab inhibits the binding of toxin B and prevents its effects on mammalian cells. Bezlotoxumab does not bind to *C. difficile* toxin A.

Formulations:
Zinplava: Intravenous injectable formulation
- Single-use vial containing 1,000 mg/40 mL (25 mg/mL) solution

Appendices
Appendix A: Abbreviation Key
CDI: *Clostridium difficile* infection

Appendix B: Treatment for CDI recurrent episodes
Recurrent episodes of CDI are treated with metronidazole, vancomycin, or fidaxomicin. The first recurrence should be treated with the same treatment as the initial episode. The second recurrence should be treated with vancomycin in a pulsed regimen and the third recurrence with a pulsed regimen and consideration for fecal microbiota transplant.
- Metronidazole: 500 mg orally 3 times per day for 10 - 14 days
- Vancomycin: 125 mg orally 4 times per day for 10 days
- Fidaxomicin: 200 mg orally twice daily for 10 days
- Pulsed Vancomycin: 10 days course of vancomycin at 125 mg four times per day, followed by 125 mg daily pulsed every 3 days for 10 doses

Coding Implications
Codes referenced in this clinical policy are for informational purposes only. Inclusion or exclusion of any codes does not guarantee coverage. Providers should reference the most up-to-date sources of professional coding guidance prior to the submission of claims for reimbursement of covered services.

HCPCS Codes	Description
N/A	

Reviews, Revisions, and Approvals	Date	Approval Date
Age added per safety guidance endorsed by Centene Medical Affairs. References reviewed and updated.	02/18	

References
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5. Surawicz CM, Brandt LJ, Binion DG et al. Guidelines for diagnosis, treatment, and prevention of Clostridium difficile infections. Am J Gastroenterol. 2013 Apr;108(4):478-98; quiz 499. doi: 10.1038/ajg.2013.4. Epub 2013 Feb 26.
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