

**HARVARD PILGRIM HEALTH CARE
RECOMMENDED MEDICATION REQUEST GUIDELINES**

ALPHA-1 PROTEINASE INHIBITORS

Generic	Brand	HICL	GCN	Exception/Other
ALPHA-1- PROTEINASE INHIBITOR	ARALAST NP, PROLASTIN C, ZEMAIRA		47570, 47571, 44288	

GUIDELINES FOR USE

1. Is the request for a patient diagnosed with emphysema due to alpha-1 antitrypsin (AAT) deficiency?

If yes, continue to #2.

If no, do not approve. Please use status code #238 and the denial text provided.

DENIAL TEXT: Per your health plan's Alpha-1 Proteinase Inhibitors guideline, this medication is only covered for emphysema due to alpha-1 antitrypsin (AAT) deficiency. Your provider did not indicate that you have this condition and therefore your request was not approved.

2. Does the patient meet **ALL** of the following criteria?

- Patient displays clinically evident emphysema
- Pretreatment serum alpha-1 antitrypsin (ATT) level is less than 80 mg/dL (11 µMI/L)
- CT scan confirmation of panacinar emphysema
- Patient has one of the high-risk phenotypes (PI*ZZ, PI*Z[null], or PI*[null][null])
- Patient is currently a non-smoker
- Airflow obstruction evidenced by **ONE** of the following:
 - Forced expiratory volume (FEV1) of 30-65% of predicted value; **OR**
 - Rapid decline in lung function as measured by a change in FEV1 greater than 120 ml/year

If yes, **approve open ended by HICL**. Please use status code #057 and the following approval language:

APPROVAL TEXT: Your request for _____ has been approved.

If no, do not approve. Please use status code #238 and the denial text provided.

DENIAL TEXT: Per your health plan's Alpha-1 Proteinase Inhibitors guideline, this medication is only covered for emphysema due to alpha-1 antitrypsin (AAT) deficiency if you met all of the following criteria:

- You have clinically evident emphysema
- Pretreatment serum alpha-1 antitrypsin (ATT) level is less than 80 mg/dL (11 µMI/L)
- CT scan confirmation of panacinar emphysema
- You have one of the high-risk phenotypes (PI*ZZ, PI*Z[null], or PI*[null][null])
- You are currently a non-smoker
- Airflow obstruction evidenced by **ONE** of the following:
 - Forced expiratory volume (FEV1) of 30-65% of predicted value; **OR**
 - Rapid decline in lung function as measured by a change in FEV1 greater than 120 ml/year

Your provider did not indicate that **[criteria not met leading to denial]** and therefore your request was not approved.

CONTINUED ON NEXT PAGE

**HARVARD PILGRIM HEALTH CARE
RECOMMENDED MEDICATION REQUEST GUIDELINES**

ALPHA-1 PROTEINASE INHIBITORS

RATIONALE

Ensure appropriate utilization of Aralast NP, Prolastin-C, or Zemaira for the treatment of panacinar emphysema due to alpha-1 antitrypsin deficiency when such use (including dosage, frequency, site of administration, and duration of therapy) is reasonable, medically necessary, clinically appropriate, and supported by evidence-based literature.

FDA APPROVED INDICATIONS

- Aralast NP [alpha₁-protease inhibitor, human (alpha₁-antitrypsin)]:
 - **Alpha-protease inhibitor deficiency:** Long-term augmentation and maintenance therapy in adults with congenital deficiency of alpha-protease inhibitor with clinically evident emphysema.
 - **Limitations of use:** Clinical data demonstrating the long-term effects of chronic augmentation or maintenance therapy of individuals with alpha₁-protease inhibitor are not available. The effect of augmentation therapy with alpha₁-protease inhibitor on pulmonary exacerbations and on the progression of emphysema in alpha₁-protease inhibitor deficiency has not been demonstrated in randomized, controlled clinical trials. Alpha₁-protease inhibitor is not indicated as therapy for patients with lung disease in whom congenital alpha₁-protease inhibitor deficiency has not been established.

- Prolastin-C [alpha₁-protease inhibitor, human (alpha₁-antitrypsin)]:
 - **Alpha-protease inhibitor deficiency:** Long-term augmentation and maintenance therapy in adults with congenital deficiency of alpha-protease inhibitor with clinically evident emphysema.
 - **Limitations of use:** Clinical data demonstrating the long-term effects of chronic augmentation or maintenance therapy of individuals with alpha₁-protease inhibitor are not available. The effect of augmentation therapy with alpha₁-protease inhibitor on pulmonary exacerbations and on the progression of emphysema in alpha₁-protease inhibitor deficiency has not been demonstrated in randomized, controlled clinical trials. Alpha₁-protease inhibitor is not indicated as therapy for patients with lung disease in whom congenital alpha₁-protease inhibitor deficiency has not been established.

- Zemaira [alpha₁-protease inhibitor, human (alpha₁-antitrypsin)]:
 - **Alpha-protease inhibitor deficiency:** Long-term augmentation and maintenance therapy in adults with congenital deficiency of alpha-protease inhibitor with clinically evident emphysema.
 - **Limitations of use:** Clinical data demonstrating the long-term effects of chronic augmentation or maintenance therapy of individuals with alpha₁-protease inhibitor are not available. The effect of augmentation therapy with alpha₁-protease inhibitor on pulmonary exacerbations and on the progression of emphysema in alpha₁-protease inhibitor deficiency has not been demonstrated in randomized, controlled clinical trials. Alpha₁-protease inhibitor is not indicated as therapy for patients with lung disease in whom congenital alpha₁-protease inhibitor deficiency has not been established.

CONTINUED ON NEXT PAGE

**HARVARD PILGRIM HEALTH CARE
RECOMMENDED MEDICATION REQUEST GUIDELINES**

ALPHA-1 PROTEINASE INHIBITORS

REFERENCES

- Aralast NP [package insert]. Westlake Village, CA: Baxter Healthcare Corporation; March 2014.
- Glassia [package insert]. Westlake Village, CA: Baxter Healthcare Corporation; March 2014.
- Prolastin-C [package insert]. Research Triangle Park, NC: Grifols Therapeutics, Inc.; November 2013.
- Zemaira [package insert]. Kankakee, IL: CSL Behring LLC; September 2015.
- American Thoracic Society/European Respiratory Society statement: standards for the diagnosis and management of individuals with alpha-1 antitrypsin deficiency. *Am J Respir Crit Care Med.* 2003;168(7):818-900.
- Marciniuk D, Hernandez P, Balter M, et al; Canadian Thoracic Society COPD Clinical Assembly Alpha-1 Antitrypsin Deficiency Expert Working Group. Alpha-1 antitrypsin deficiency targeted testing and augmentation therapy: a Canadian Thoracic Society clinical practice guideline. *Can Respir J.* 2012;19(2):109-116.

Created: 04/16

Effective: 10/01/18

Client Approval: 07/18/18

P&T Approval: 09/17/18