SPECIALTY GUIDELINE MANAGEMENT

FEIBA (anti-inhibitor coagulant complex [human])

POLICY

I. 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.

A. FDA-Approved Indication

Hemophilia A and hemophilia B with inhibitors

B. Compendial Use

Acquired hemophilia A

All other indications are considered experimental/investigational and not medically necessary.

II. PRESCRIBER SPECIALTIES

Must be prescribed by or in consultation with a hematologist.

III. CRITERIA FOR INITIAL APPROVAL

A. Hemophilia A with Inhibitors

Authorization of 12 months may be granted for treatment of hemophilia A with inhibitors (see Appendix) when the inhibitor titer is \geq 5 Bethesda units per milliliter (BU/mL) or if the member has a history of an inhibitor titer \geq 5 BU.

B. Hemophilia B with Inhibitors

Authorization of 12 months may be granted for treatment of hemophilia B with inhibitors (see Appendix) when the inhibitor titer is ≥ 5 Bethesda units per milliliter (BU/mL) or if the member has a history of an inhibitor titer ≥ 5 BU.

C. Acquired Hemophilia A

Authorization of 12 months may be granted for treatment of acquired hemophilia A.

IV. CONTINUATION OF THERAPY

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in Section III when the member is experiencing benefit from therapy (e.g., reduced frequency or severity of bleeds).

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V. APPENDIX

Appendix: Inhibitors - Bethesda Units (BU)

The presence of inhibitors is confirmed by a specific blood test called the Bethesda inhibitor assay.

- High-titer inhibitors:
 - o > 5 BU/mL
 - Inhibitors act strongly and quickly neutralize factor
- Low-titer inhibitors:
 - o < 5 BU/mL
 - o Inhibitors act weakly and slowly neutralize factor

VI. REFERENCES

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