Vascular Endothelial Growth Factor (VEGF) Inhibitors for Ophthalmic Use

BENEFIT APPLICATION

Benefit determinations are based on the applicable contract language in effect at the time the services were rendered. Exclusions, limitations or exceptions may apply. Benefits may vary based on contract, and individual member benefits must be verified. Wellmark determines medical necessity only if the benefit exists and no contract exclusions are applicable. This policy may not apply to FEP. Benefits are determined by the Federal Employee Program.

DESCRIPTION

The intent of the vascular endothelial growth factor (VEGF) inhibitor drug policy is to ensure appropriate selection of patients for therapy based on product labeling, clinical guidelines and clinical studies. VEGF, through its promotion of angiogenesis and vascular permeability is a central component of the pathologic process driving wet age-related macular degeneration (AMD), as well as other choroidal and retinal vascular disorders. The VEGF inhibitors referenced within this policy are administered via intravitreal injection.

Eylea® (aflibercept) is approved by the Food and Drug Administration (FDA) for the following indications:

- Neovascular (wet) age-related macular degeneration (AMD)
- Macular edema following retinal vein occlusion (RVO)
- Diabetic macular edema (DME)
- Diabetic retinopathy (DR)

Compendial use:

- Macular choroidal neovascularization (mCNV)

Lucentis® (ranibizumab) is approved by the FDA for the following indications:

- Neovascular (wet) age-related macular degeneration (AMD)
- Diabetic macular edema (DME)
- Diabetic retinopathy (DR)
- Macular edema following retinal vein occlusion (RVO)
- Myopic choroidal neovascularization (mCNV)

Byooviz™ (ranibizumab-nuna), a biosimilar to Lucentis®, is approved by the FDA for the following indications:

- Neovascular (wet) age-related macular degeneration (AMD)
- Macular edema following retinal vein occlusion (RVO)
- Myopic choroidal neovascularization (mCNV)

Macugen® (pegaptanib) is approved by the FDA for the treatment of neovascular (wet) age-related macular degeneration (AMD).

Beovu® (brolucizumab-dbll) is approved by the FDA for the following indications:

- Neovascular (wet) age-related macular degeneration (AMD)
- Diabetic macular edema (DME)

Vabysmo® (faricimab-svoa) is approved by the FDA for the following indications:

- Neovascular (wet) age-related macular degeneration (AMD)
- Diabetic macular edema (DME)

While not FDA approved for ophthalmic use, **bevacizumab** has the support of peer reviewed literature and is considered **medically necessary** for the treatment of choroidal and retinal vascular disorders addressed within this policy.

POLICY

***Bevacizumab** is the best value VEGF inhibitor for the treatment of choroidal and retinal vascular disorders addressed within this policy, has the support of peer reviewed literature, and DOES NOT require review.

I. A series of intravitreal injections with **Eylea (aflibercept)** may be considered **medically necessary** for the treatment of the following:
   - Neovascular (wet) AMD
   - Macular edema following RVO (both BRVO and CRVO)
   - Diabetic macular edema
   - Diabetic retinopathy
   - Choroidal neovascularization secondary to:
     - Angioid streaks
     - Central serous chorioretinopathy
     - Choroidal rupture or trauma
     - Multifocal choroiditis
     - Pathologic myopia
     - Presumed ocular histoplasmosis syndrome
     - Uveitis
     - Idiopathic choroidal neovascularization

II. A series of intravitreal injections with **Lucentis (ranibizumab)** and **Byooviz (ranibizumab-nuna)** may be considered **medically necessary** for the treatment of the following:
   - Neovascular (wet) AMD
   - Macular edema following RVO (both BRVO and CRVO)
   - Diabetic macular edema
   - Proliferative diabetic retinopathy as an adjunct to photocoagulation or vitrectomy
   - Diabetic retinopathy
   - Choroidal neovascularization secondary to:
     - Angioid streaks
     - Central serous chorioretinopathy
     - Choroidal rupture or trauma
     - Multifocal choroiditis
     - Pathologic myopia
     - Presumed ocular histoplasmosis syndrome
     - Uveitis
     - Idiopathic choroidal neovascularization

III. A series of intravitreal injections with **Macugen (pegaptanib)** may be considered **medically necessary** for the treatment of neovascular (wet) AMD.

IV. A series of intravitreal injections with **Beovu (brolucizumab-dbll)** may be considered **medically necessary** for the treatment of neovascular (wet) AMD and diabetic macular edema.

V. A series of intravitreal injections with **Vabysmo® (faricimab-svoa)** may be considered **medically necessary** for the treatment of neovascular (wet) AMD and diabetic macular edema.

Prior approval: Not applicable

PROCEDURES AND BILLING CODES

To report provider services, use appropriate CPT* codes, Alpha Numeric (HCPCS level 2) codes, Revenue codes, and/or ICD-CM diagnostic codes.

- Code(s), if applicable.
  - J0178 injection, aflibercept, 1 mg
  - J2778 injection, ranibizumab, 0.1 mg
  - J2503 injection, pegaptanib sodium, 0.3 mg
  - J0179 injection, brolucizumab, 1 mg
  - Q5124 Injection, ranibizumab-nuna, biosimilar, (byooviz), 0.1 mg
  - C9097 Injection, faricimab-svoa, 0.1 mg (deleted 10-1-2022)
  - J2777 Injection, faricimab-svoa, 0.1mg (effective 10-1-2022)
  - J3590 - unclassified biologics
  - J3490 – unclassified drugs
  - C9399 – unclassified drugs or biologicals

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POLICY HISTORY

Policy #:09.03.12
Policy Creation: November 2014
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