



Wellmark Blue Cross and Blue Shield is an Independent Licensee of the Blue Cross and Blue Shield Association.

DRUG POLICY

Palforzia (peanut [Arachis hypogaea] allergen powder-dnfp)

NOTICE

This policy contains information which is clinical in nature. The policy is not medical advice. The information in this policy is used by Wellmark to make determinations whether medical treatment is covered under the terms of a Wellmark member's health benefit plan. Physicians and other health care providers are responsible for medical advice and treatment. If you have specific health care needs, you should consult an appropriate health care professional. If you would like to request an accessible version of this document, please contact customer service at 800-524-9242.

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 medical policy may not apply to FEP. Benefits are determined by the Federal Employee Program.

DESCRIPTION

The intent of the criteria is to provide coverage consistent with product labeling, FDA guidance, standards of medical practice, evidence-based drug information, and/or published guidelines. The indications below including FDA-approved indications and compendial uses are considered covered benefits provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indications

Palforzia is an oral immunotherapy indicated for the mitigation of allergic reactions, including anaphylaxis, that may occur with accidental exposure to peanut. Palforzia is approved for use in patients with a confirmed diagnosis of peanut allergy. Initial Dose Escalation may be administered to patients aged 4 through 17 years. Up-Dosing and Maintenance may be continued in patients 4 years of age and older.

Palforzia is to be used in conjunction with a peanut-avoidant diet.

Limitation of Use: Not indicated for the emergency treatment of allergic reactions, including anaphylaxis.

POLICY

Criteria for Approval

- A. Palforzia (peanut [Arachis hypogaea] allergen powder-dnfp) may be considered **medically necessary** when ALL the following criteria are met:
 - The requested drug is being prescribed for the mitigation of allergic reactions, including anaphylaxis, in a patient with a confirmed diagnosis of peanut allergy

- The diagnosis of peanut allergy has been confirmed with an IgE or skin-prick test
- The requested drug is being used in conjunction with a peanut-avoidant diet
- The requested drug is being prescribed by, or in consultation with, an allergist or immunologist [Note: The Initial Dose Escalation and first dose of each Up-Dosing level must only be administered in a healthcare setting equipped to monitor patients, and to identify and manage anaphylaxis.]
- The patient does not have uncontrolled asthma OR a history of eosinophilic esophagitis or other eosinophilic gastrointestinal disease
- The patient is 4 to 17 years of age
OR
The request is for Up-dosing or Maintenance phase of treatment in a patient 4 years of age or older

Approval will be for 12 months

Palforzia is considered **not medically necessary** for members who do not meet the criteria set forth above

Dosage and Administration

Approvals may be subject to dosing limits in accordance with FDA-approved labeling, accepted compendia, and/or evidence-based practice guidelines.

Initial Dose Escalation may be administered to patients aged 4 through 17 years, while Up-Dosing and Maintenance may be continued in patients 4 years of age and older.

Palforzia is available in 0.5 mg, 1 mg, 10 mg, 20 mg, 100 mg Capsules, and 300 mg Sachets. Treatment with Palforzia is administered in 3 sequential phases:

- Initial Dose Escalation - administered in sequential order on a single day, beginning at dose level A (total of 5 levels A-E), and each dose should be separated by an observation period of 20-30 minutes; this is administered under supervision to manage potentially severe allergic reactions, including anaphylaxis
- Up-Dosing – consists of 11 dose levels, administered in sequential order at 2-week intervals; no dose level should be omitted; the first dose is administered under supervision to manage potentially severe allergic reactions, including anaphylaxis
- Maintenance – all levels of Up-dosing should be completed before starting Maintenance at 300 mg daily; daily maintenance is required to maintain the effect of Palforzia and the patient should be assessed for adverse reactions at regular intervals

Quantity Limit

Palforzia Initial Dose Escalation Kit: 1 kit per fill; one-time fill

Palforzia Up-Dosing Kits (Levels 1-11): 1 kit per fill

Palforzia 300 mg sachets: 1 sachet per day

CLINICAL RATIONALE

Palforzia (peanut allergen powder-dnfp) is an oral immunotherapy (OIT) indicated to help reduce the severity of allergic reactions, including anaphylaxis, that may occur with accidental exposure to peanut. Treatment with Palforzia is approved for therapy initiation in individuals ages 4 through 17 years with a confirmed diagnosis of peanut allergy and may be continued in individuals ages 18 years of age and older. Palforzia is to be used in conjunction with a peanut-avoidant diet. Palforzia is not indicated for the emergency treatment of allergic reactions, including anaphylaxis.

Efficacy

The efficacy of Palforzia for the mitigation of allergic reactions, including anaphylaxis, in patients with peanut allergy was investigated in a phase 3, randomized, double-blind, placebo-controlled study of the efficacy and safety of Palforzia in patients with peanut allergy aged 4 through 55 years. Patients were considered to be eligible for participation in the trial if they had a serum peanut-specific IgE level, a skin-prick testing for peanut, or both. Majority of the participants were 4-17 years of age (496 out of 551 participants total). At the end of the Maintenance period, subjects completed an exit Double-Blind, Placebo-Controlled Food Challenge (DBPCFC) to approximate an accidental exposure to peanut and to assess their ability to tolerate increasing amounts of peanut protein with no more than mild allergic symptoms. The completer population consisted of all subjects aged 4 through 17 years; the proportion of subjects who tolerated single highest doses of 300 mg, 600 mg, and 1000 mg with no more than mild symptoms at the exit DBPCFC were 96.3%, 84.5%, and 63.2%, respectively for Palforzia-treated subjects compared with 8.6%, 4.3%, and 2.6% for placebo-treated subjects. Alternatively, only 55 of the participants were older than 17 years of age. The analysis compared the percentages of participants 18 to 55 years of age who could tolerate a dose of 600 mg during the exit food challenge. The difference between the rate in the active-drug group and the rate in the placebo group did not reach statistical significance; therefore, efficacy was not shown in the participants 18 years of age or older.

In the same study, the Up-Dosing period varied for each subject depending on how the dose was tolerated. Subjects then underwent 24-28 weeks of Maintenance immunotherapy with 300 mg Palforzia until the end of the study.

Safety

Anaphylaxis has been reported during all phases of Palforzia dosing, including Maintenance and in subjects who have undergone recommended Up-Dosing and dose modification procedures. In two combined, placebo-controlled clinical studies of 709 Palforzia-treated subjects and 292 placebo-treated subjects, anaphylaxis was reported in 9.4% of Palforzia-treated subjects compared with 3.8% of placebo-treated subjects during Initial Dose Escalation and Up-Dosing combined. Anaphylaxis was reported in 8.7% of Palforzia-treated subjects compared with 1.7% of placebo-treated subjects during Maintenance in the PALISADE study. Seventy percent of reactions occurred within 2 hours after dosing.

The most common adverse events reported in subjects treated with Palforzia (incidence $\geq 5\%$ and $\geq 5\%$ than placebo) are abdominal pain, vomiting, nausea, oral pruritus, oral paresthesia, throat irritation, cough, rhinorrhea, sneezing, throat tightness, wheezing, dyspnea, pruritus, urticaria, anaphylactic reaction, and ear pruritus.

Palforzia is contraindicated in patients with uncontrolled asthma and a history of eosinophilic esophagitis and other eosinophilic gastrointestinal disease.

Palforzia is only available through a Risk Evaluation and Mitigation Strategy (REMS) program called the PALFORZIA REMS. Requirements include the following:

- Health care providers who prescribe Palforzia must be certified with the program by enrolling.
- Health care settings must be certified in the program, have on-site access to equipment and personnel trained to manage anaphylaxis, and establish policies and procedures to verify that patients are monitored during and after the Initial Dose Escalation and first dose of each Up-Dosing level.
- Patients must be enrolled in the program prior to initiation of Palforzia treatment and must be informed of the need to have injectable epinephrine available for immediate use at all times, the need for monitoring with the Initial Dose Escalation and first dose of each Up-Dosing level, the need for continued dietary peanut avoidance, and how to recognize the signs and symptoms of anaphylaxis.
- Pharmacies must be certified with the program and must only dispense Palforzia to health care settings that are certified or to patients who are enrolled depending on the treatment phase.

Because of the level of supervision and patient monitoring required with Palforzia administration, coverage will be considered if prescribed by, or in consultation with, an allergist or immunologist. As noted above, the REMS program states that the Initial Dose Escalation and first dose of each Up-Dosing level must only be administered to patients in a healthcare setting equipped to monitor patients, and to identify and manage anaphylaxis.

PROCEDURES AND BILLING CODES

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

- N/A

REFERENCES

- Palforzia [package insert]. Brisbane, CA: Aimmune Therapeutics, Inc.; January 2020.
- Palisade Group of Clinical Investigators. AR101 Oral Immunotherapy for Peanut Allergy. *N Engl J Med* 2018; 379:1991-2001.

POLICY HISTORY

Policy #: 05.03.95

Original Effective Date:

Reviewed:

Revised:

Current Effective Date: June 18, 2020