# Medical Drug Clinical Criteria

**Subject:** Akynzeo (fosnetupitant and palonosetron) for injection

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## **Overview**

This document addresses the use of Akynzeo (fosnetupitant and palonosetron) for injection. Akynzeo is a combination of palonosetron, a serotonin 3 (5-HT<sub>3</sub>) receptor antagonist, and fosnetupitant, a substance P/neurokinin-1 (NK-1) receptor antagonist. Palonosetron prevents nausea and vomiting during the acute phase, and fosnetupitant prevents nausea and vomiting during both the acute and delayed phase after cancer chemotherapy.

Akynzeo for injection has not been studied for the prevention of nausea and vomiting associated with anthracycline plus cyclophosphamide chemotherapy.

#### **Clinical Criteria**

When a drug is being reviewed for coverage under a member's medical benefit plan or is otherwise subject to clinical review (including prior authorization), the following criteria will be used to determine whether the drug meets any applicable medical necessity requirements for the intended/prescribed purpose.

#### Akynzeo (fosnetupitant and palonosetron) for injection

Requests for Akynzeo (fosnetupitant and palonosetron) for injection may be approved if the following criteria are met:

- I. Individual is 18 years of age or older; AND
- II. Individual is using for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of highly or moderately emetogenic cancer chemotherapy (NCCN 1, Label); **AND**
- III. Individual is using in combination with dexamethasone.

Akynzeo (fosnetupitant and palonosetron) for injection may not be approved when the above criteria are not met and for all other indications.

## Coding

The following codes for treatments and procedures applicable to this document are included below for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

## **HCPCS**

J1454 Injection, fosnetupitant 235 mg and palonosetron 0.25 mg [Akynzeo]

#### **ICD-10 Diagnosis**

R11.0-R11.2 Nausea and vomiting C00.0-C96.9 Malignant neoplasms D00.00-D09.9 In situ neoplasms

Z51.11 Encounter for antineoplastic chemotherapy
Z85.00-Z85.9 Personal history of malignant neoplasm

## **Document History**

Reviewed: 11/15/2024 Document History:

- 11/15/2024 Annual Review: No change. Coding Reviewed: No changes.
- 11/17/2023 Annual Review: add moderate emetogenicity. Coding Reviewed: No changes.
- 11/18/2022 Annual Review: No changes. Coding Reviewed: No changes.
- 11/19/2021 Annual Review: No change. Coding reviewed: No changes.
- 11/20/2020 Annual Review: No changes. Coding Reviewed: No changes.
- 11/15/2019 Annual Review: Minor wording and formatting changes. Coding Review: Added ICD-10 dx codes C00-C96.9, D00.00-D09.9, Z51.11, Z85.00-Z85.9.
- 11/26/2018 Deleted HCPCS codes C9033.
- 11/16/2018 Annual Review: Annual review. No changes.
- 11/09/2018 Added ICD-10 dx R11.0-R11.2.
- 11/02/2018 Added HCPCS codes: C9033, J1454. C9033 newly effective 10/01/2018.
- 08/17/2018 Select Review: Add new PA and QL for Akynzeo (fosnetupitant and palonosetron) for injection.

#### References

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Federal and state laws or requirements, contract language, and Plan utilization management programs or polices may take precedence over the application of this clinical criteria.

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