

DRUG DETERMINATION POLICY

Title: DDP-25 Weight Loss Medications

Effective Date: 08/14/2019



Physicians Health Plan
PHP Insurance Company
PHP Service Company

Important Information - Please Read Before Using This Policy

The following policy applies to health benefit plans administered by PHP and may not be covered by all PHP plans. Please refer to the member's benefit document for specific coverage information. If there is a difference between this general information and the member's benefit document, the member's benefit document will be used to determine coverage. For example, a member's benefit document may contain a specific exclusion related to a topic addressed in a coverage policy.

Benefit determinations for individual requests require consideration of:

1. The terms of the applicable benefit document in effect on the date of service.
2. Any applicable laws and regulations.
3. Any relevant collateral source materials including coverage policies.
4. The specific facts of the particular situation.

Contact PHP Customer Service to discuss plan benefits more specifically.

1.0 Policy:

This policy describes the determination process for coverage of specific drugs.

This policy does not guarantee or approve benefits. Coverage depends on the specific benefit plan. Drug Determination Policies are not recommendations for treatment and should not be used as treatment guidelines.

2.0 Background or Purpose:

Weight loss medications are drugs indicated for weight loss if the patient meets specific criteria. These criteria were developed and implemented to ensure appropriate use and re-approval if the weight loss drug has shown to be effective.

3.0 Clinical Determination Guidelines:

Document the following with chart notes:

A. Treatment of obesity.

1. Age: at least_18 years old.
2. Body mass index (BMI): at least_30.
3. Other therapies:
 - a. Non-pharmacological: participation in two supervised non-pharmacological weight loss treatment programs.
 - b. Pharmacological:
 - i. Failed or had significant adverse events with other therapies (three months): benzphetamine, diethylpropion, phendimetrazine or phentermine.
 - ii. Must be used with diet and exercise plan.

4. Dosage.
 - a. Belviq (lorcaserin): IR -10mg twice daily, XR - 20mg once daily.
5. Excluded products:
 - a. Contrave oral (naltrexone 8mg/bupropion 90mg).
 - b. Qsymia oral (topiramate/phentermine).
 - c. Saxenda SubQ (liraglutide).
 - d. Xenical oral (orlistat).
6. Approval.
 - a. Initial approval: three months.
 - b. Re-approval:
 - i. Continued weight loss of at least 5%.
 - ii. Renewals can be continued for up to one year total coverage.

4.0 Coding:

None.

5.0 References, Citations & Resources:

1. NIH The Practical Guideline: Identification, Evaluation and Treatment of Overweight and Obesity in Adults October 2000.
2. Lexicomp Online® , Lexi-Drugs® , Hudson, Ohio: Lexi-Comp, Inc.; phentermine, accessed August, 2019.
3. Lexicomp Online® , Lexi-Drugs® , Hudson, Ohio: Lexi-Comp, Inc.; Belviq, accessed November, 2019.
4. Pharmacological Management of Obesity: An Endocrine Society Clinical Practice Guideline. J Clin Endocrinol Metab, Feb 2015;100(2);342-262.

6.0 Appendices:

Appendix I: Advantages and Disadvantages Associated with Weight Loss Medications

Drug	Advantages	Disadvantages
Belviq (lorcaserin)	Side effect profile; Long-term data ^b	Pregnancy category X
Xenical (orlistat Rx)	Non-systemic; Long term data ^b	Less weight loss ^a ;SE profile
Alli (orlistat, OTC)	Inexpensive (\$)	Less weight loss ^a ;SE profile

^a Less weight loss = 2–3%; greater weight loss = 3–5%; robust weight loss = 5%.; ^b Long term is 1–2 years.

Appendix II: Monitoring & Patient Safety

Drug	Adverse Reactions	Monitoring	REMS
Adipex, Suprenza phentermine	<ul style="list-style-type: none"> CV: HTN, ischemia, palpitation, pul HTN, ↑ HR CNS: dizzy, dysphoria, euphoria, HA, insomnia, overstim, psychosis, restlessness, nausea Derm: urticaria GI: constip., diarrhea, bad taste, xerostomia GI: impotence, Δ libido Neuro/MSK: tremor Pregnancy category C 	<ul style="list-style-type: none"> CV: blood pressure, pulse Endo/Metab.: wgt, waist circum. 	None needed
Qsymia topiramate + phentermine	<ul style="list-style-type: none"> CV: ↑ HR (14-78%), CNS: paresthesia (4-20%), HA (10-11%), insomnia (6-11%) Endo/Metab: ↓ bicarb (6-13%) GI: xerostomia (7-19%), constipation (8-16%) Resp.: URI (14-16%), nasopharyngitis (9-13%) 	<ul style="list-style-type: none"> Lab: bicarb, K², glucose, Cr. (pre & during) CV: HR CNS: S/Sx of depression, suicidal thought, Endo/Metab.: wgt., waist circum., S/Sx of acidosis 	None Needed
Belviq locaserin	<ul style="list-style-type: none"> CNS: HA (15-17%) Endo/Metab.: hypoglycemia (DM-29%) Hematologic: ↓ lymphocytes Neuro/SKM: back pain (6-12%) Resp.: URI (14%), nasopharyngitis (11-13%) Pregnancy category X 	<ul style="list-style-type: none"> Lab: CBC (during), blood glucose (DM), prolactin CNS: S/Sx of depression, suicidal thought, SS/NMS-like Rx, CV: S/Sx valvular hrt dx 	None Needed
Alli/Xenical orlistat	<ul style="list-style-type: none"> CNS: HA (≤31%) GI: oily spot (4-27%), abd pain/discom (≤26%), flatus w disc. (2-24%), fecal urg (3-22%), fatty oily stool/evac. (2-20%), ↑ defecation (3-11%) Neuro/NMSK: back pain (≤14%) Resp.: URI (26-38%) Misc.: influenza (≤40%) Pregnancy category: X 	<ul style="list-style-type: none"> Lab: serum glucose (DM), thyroid (thy dx), LFT (hep dys) Endo/Metab: BMI 	
Saxenda liraglutide	<ul style="list-style-type: none"> CV: ↑HR (5-34%) CNS: HA (14%) Endo/Metab: hypoglycemia (DM: 16-44%) GI: N/V (16-39%), diarrhea (21%), constip (19%) Pregnancy category X 	<ul style="list-style-type: none"> Lab: serum glucose, HbA1c, Renal Fx CV: HR CNS: S/Sx of depression, suicidal thought, GU: S/Sx pancreatitis 	

7.0 Revision History:

Original Effective Date: 04/22/2010

Next Review Date: 08/14/2020

Revision Date	Reason for Revision
7/19	Moved to new format; replaced abbreviations, added stimulant trial duration