Washington State Health Care Authority

Pulmonary Fibrosis Agents

Medical policy no. 45.55.00-1 Effective: October 1, 2018

Background:

Idiopathic pulmonary fibrosis (IPF) is specific form of chronic, progressive, fibrosing interstitial pneumonia of unknown cause, occurring in adults and limited to the lungs. It is associated with the histopathologic and/or radiologic pattern of usual interstitial pneumonia (UIP).

Medical necessity

Drug	Medical Necessity
Nintedanib (**Ofev**) Pirfenidone (**Esbriet**)	Pulmonary fibrosis agents may be considered medically necessary when used for treatment of a confirmed diagnosis of idiopathic pulmonary fibrosis

Clinical policy:

Clinical Criteria	
Initial authorization criteria	1. Diagnosis of idiopathic pulmonary fibrosis confirmed by at least **ONE** of the following: a. The presence of usual interstitial pneumonia (UIP) on high-resolution computed tomography (HRCT) b. Surgical lung biopsy 2. Ofev and Esbriet will not be used in combination 3. Prescribed by or in consultation by a specialist in pulmonology **Approve for 12 months**
Reauthorization criteria	Documentation of positive clinical benefit **Approve for 12 months**

Dosage and quantity limits

Drug Name	Dose and Quantity Limits
Nintedanib (Ofev)	300mg per day; #60 capsules per 30-day supply
Pirfenidone (Esbriet)	2403mg per day; • 267mg capsule/tablet= #270 per 30-day supply • 801mg tablets = #90 per 30-day supply

References

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