BlueCross BlueShield Arizona

An Independent Licensee of the Blue Cross Blue Shield Association

EVIDENCE-BASED CRITERIA	**ORIGINAL EFFECTIVE DATE: 11/16/23**
SECTION: SPECIALTY MEDICAL DRUGS	**LAST REVIEW DATE: 11/21/24**
	CURRENT EFFECTIVE DATE: 11/21/24
	LAST CRITERIA REVISION DATE:
NEXT ANNUAL REVIEW DATE: 4TH QTR 2025	**ARCHIVE DATE:**

ISLET TRANPLANTATION FOR TYPE 1 DIABETES:

- **LANTIDRA (donislecel-jujn)**

Non-Discrimination Statement is located at the end of this document.

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Evidence-Based Criteria must be read in its entirety to determine coverage eligibility, if any.

This Evidence-Based Criteria provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide BCBSAZ complete medical rationale when requesting any exceptions to these guidelines.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Evidence-Based Criteria are subject to change as new information becomes available.

For purposes of this Evidence-Based Criteria, the terms "experimental" and "investigational" are considered to be interchangeable.

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Criteria:

Refer to FDA website for current indications and dosage.

- Lantidra (donislecel-jujn) for all indications is ***experimental or investigational*** and will not be covered when any one or more of the following criteria are met:

  1. Lack of final approval from the appropriate governmental regulatory bodies (e.g., Food and Drug Administration); or
  2. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes; or
  3. Insufficient evidence to support improvement of the net health outcome; or
  4. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives; or
  5. Insufficient evidence to support improvement outside the investigational setting.

  These indications include, *but are not limited to:*

  - Treatment with dosing, frequency, or duration outside the FDA-approved dosing, frequency, or duration.

Description:

Lantidra (donislecel-jujn) is an allogeneic pancreatic islet cellular therapy indicated for the treatment of adults with Type 1 diabetes who are unable to approach target hemoglobin A1c (HbA1c) because of current repeated episodes of severe hypoglycemia despite intensive diabetes management and education. Use is in conjunction with concomitant immunosuppression.

Limitations of Use
When considering the risks associated with the infusion procedure and long-term immunosuppression, there is no evidence to show a benefit of administration of Lantidra in patients whose diabetes is well-controlled with insulin therapy or patients with hypoglycemic unawareness who are able to prevent current repeated severe hypoglycemic events (neuroglycopenia requiring active intervention from a third party) using intensive diabetes management (including insulin, devices, and education). Repeated intraportal islet infusions are not recommended in patients who have experienced prior portal thrombosis unless the thrombosis was limited to second- or third-order portal vein branches. There is no evidence to support the safe and effective use of LANTIDRA in patients with liver disease, renal failure, or who have received a renal transplant.

Lantidra is an islet cell therapy, where the islet cells come from the pancreas of a deceased organ donor. Pancreatic islet cells include beta cells, that make insulin and these infused beta cells can allow an individual to make enough insulin to control blood glucose without insulin. Lantidra was studied in 2 prospective open-label, single-arm studies involving 30 subjects who received up to a maximum of 3 infusions. Five subjects had no days of insulin independence. For the 25 subjects who achieved insulin

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independence, 4 subjects (13.3%) were insulin independent for less than one year, 12 subjects (36.7%) for 1 to 5 years, and 9 subjects (33.3%) for greater than 5 years.

Despite FDA approval, well-designed studies are needed to determine the effects of allogeneic islet transplantation in patients with type 1 diabetes. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

History:	**Date**:	**Activity**:
Pharmacy and Therapeutics Committee	11/21/24	Review without revisions
Pharmacy and Therapeutics Committee	11/16/23	Approved guideline
Clinical Pharmacist	10/26/23	Development

Coding:

CPT: 0584T-0586T
HCPCS: C9399, J3590

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Resources:

Literature reviewed 11/21/24. We do not include marketing materials, poster boards and non-published literature in our review.

1. Barton FB, Rickels MR, Alejandro R, et al. Improvement in outcomes of clinical islet transplantation: 1999-2010. *Diabetes Care*. 2012; 35:1436-45.

2. Gangemi A, Salehi P, Hatipoglu B, et al. Islet transplantation for brittle type 1 diabetes: the UIC protocol. *Am J Transplant.* 2008; 8(6): 1250-61.

3. Hering BJ, Clarke WR, Bridges ND, Eggerman TL, Alejandro R, Bellin MD, Clinical Islet Transplantation Consortium, et al. Phase 3 Trial of Transplantation of Human Islets in Type 1 Diabetes Complicated by Severe Hypoglycemia. *Diabetes Care*. 2016; Jul;39(7):1230-40.

4. Lantidra (donislecel-jujn) prescribing information, revised by CellTrans Inc., 06-2023. Available at DailyMed http://dailymed.nlm.nih.gov. Accessed September 3, 2024.

5. Qi M, Kinzer K, Danielson KK, et al. Five-year follow-up of patients with type 1 diabetes transplanted with allogeneic islets: the UIC experience. *Acta Diabetol*. 2014; 51(5): 833-43.

6. Robertson RP, Rickels MR. Pancreas and islet transplantation in diabetes mellitus In: UpToDate, Hirsch IB, Rubinow K (Eds), UpToDate, Waltham MA.: UpToDate Inc. Available at http://uptodate.com. Topic last updated April 3, 2024. Accessed September 4, 2024.

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Non-Discrimination Statement:

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If you believe that BCBSAZ has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: BCBSAZ's Civil Rights Coordinator, Attn: Civil Rights Coordinator, Blue Cross Blue Shield of Arizona, P.O. Box 13466, Phoenix, AZ 85002-3466, (602) 864-2288, TTY/TDD (602) 864-4823, crc@azblue.com. You can file a grievance in person or by mail or email. If you need help filing a grievance BCBSAZ's Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1–800–368–1019, 800–537–7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html