BlueCross BlueShield of Kansas City

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Influenza Therapies

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Origination: 10/2002
Last Review: 10/2014
Next Review: 10/2015

Policy

BCBSKC will provide coverage for influenza therapies when it is determined to be medically necessary because the criteria below are met.

When Policy Topic is covered

- Relenza® (zanamivir) and Tamiflu® (oseltamivir) are limited to one course of treatment per flu season.
- Tamiflu® is indicated for prevention of influenza for patients 13 years of age or older.
  Prophylactic treatment will be covered when at least one of the following criteria are met:
  - Elderly (>65 years of age)
  - Living in a nursing care facility
  - Unvaccinated for influenza
  - Documentation of COAD (chronic obstructive airway disease)
  - Between the months of November and March
  - Length of prophylactic therapy is not to exceed 42 days.

  Note - patients with a creatinine clearance between 10 – 30 ml/min should be dosed at 75 mg of Tamiflu® every other day.

When Policy Topic is not covered

- Coverage of Relenza® will be denied in patients with a claim history of any medication for treatment of reactive airway disease. These medications may include, but are not limited to, medications such as beta 2-adrenergic agonists, theophyllines, leukotriene modifiers, etc.

Considerations

Prescription influenza therapies require prior authorization through pharmacy services.

This Blue Cross and Blue Shield of Kansas City policy statement was developed using available resources such as, but not limited to: Hayes Medical Technology Directory, Food and Drug Administration (FDA) approvals, Facts and Comparisons, National specialty guidelines, Local medical policies of other health plans, Medicare (CMS), Local providers.

Description of Procedure or Service

Tamiflu® (oseltamivir) and Relenza® (zanamavir), also known as neuraminidase inhibitors, are indicated for the treatment of the influenza virus within 48 hours of the appearance of flu symptoms. Relenza® is a powder-based oral inhaler that is used twice daily for 5 days. Tamiflu® is an oral medication that is taken twice daily for 5 days.

Relenza® is not recommended for use in patients with reactive airway disease (i.e., asthma, COPD, chronic bronchitis, etc.) due to the risk of bronchospasm caused by inhalation of the powder. The FDA has strengthened this warning after multiple occurrences during the 1999-2000 flu season.

Rationale

Oseltamivir is FDA approved for the treatment of influenza in children one year and older and adults who have been symptomatic for no more than 2 days. Oseltamivir is also FDA approved for the post-exposure prophylaxis of influenza and during a community outbreak of influenza in adults and adolescents 13 years of age. For post-exposure, therapy should begin within two days of exposure following close contact with an infected individual and continue for at least seven days according to product labeling.

Zanamivir is FDA approved for the treatment of uncomplicated acute illness due to influenza virus in adults and adolescents 12 years and older who have been symptomatic for no more than 2 days. The FDA has not approved zanamivir for the post-exposure prophylaxis of influenza. However, randomized clinical trials have shown zanamivir was effective in reducing the spread of influenza among household members of the infected patients.

Treatment of influenza with oseltamivir or zanamivir has only been shown to be effective if started within first 2 days of symptom onset. The demonstrated benefit is limited to a modest increase in the rate of symptom improvement. When used within 48 hours of onset of symptoms, both drugs decrease shedding and reduce the duration of influenza symptoms by approximately 1 day compared with placebo. Summary results from randomized, placebo-controlled double-blinded studies of oseltamivir showed a significant reduction in influenza related lower respiratory tract complications (pneumonia and bronchitis) associated with antibiotic use and a significant reduction in hospitalizations. These impacts occurred in both healthy and high-risk adolescents and adults. No studies have assessed the impact of antiviral drug therapy on mortality. For both drugs, the recommended duration of treatment is 5 days. One study of healthy and high-risk adolescents and adults treated with oseltamivir compared with placebo showed a reduction in influenza-related lower respiratory tract complications associate with antibiotic therapy.

Neither oseltamivir nor zanamivir have activity against bacterial infections. Reports have been documented with the FDA of patients with serious bacterial infections who initially had influenza-like symptoms and who had progressions of bacterial infections during treatment with anti-influenza drugs alone.

Zanamivir can be administered with inactivated trivalent influenza vaccine without affecting the vaccine induced immune protection.

According to the CDC, influenza vaccination is the primary method of preventing and controlling influenza. Therefore, prevention of influenza during community outbreaks with oseltamivir should be reserved for patients at high risk for the complications of influenza.

Individuals at High Risk for Complications from Influenza:

1. Greater than 65 years.
2. Residents of nursing homes and other chronic-care facilities with residents, who have chronic medical conditions.
3. Greater than or equal to 13 years and having at least one of the following conditions
    a. Chronic pulmonary diseases (for example, asthma, or chronic airway obstructive disorder)
    b. Cardiovascular disease
    c. Chronic metabolic disease (for example, diabetes)
    d. Kidney dysfunction
    e. Blood disorders (for example, hemoglobinopathies)
    f. Immune system problems (for example, HIV infections; immunosuppressed by medication, chemotherapy, or radiation therapy)
4. Pediatric patients, ages 13 – 18, receiving long-term aspirin therapy. These patients may be at risk for developing Reye Syndrome after influenza infection.

5. Women in the second or third trimester of pregnancy during the influenza season.

References

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Billing Coding/Physician Documentation Information

N/A Tamiflu® and Relenza® are paid through the pharmacy benefit.

Additional Policy Key Words

N/A

Related Topics

N/A

Policy Implementation/Update Information

10/2002	New Policy titled Influenza Therapies
10/2003	No policy statement changes.
10/2004	No policy statement changes.
10/2005	Rationale and references added.
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