Effective Date **1/15/2024**
Next Review Date… **1/15/2025**
Coverage Policy Number **IP0325**

Hydroxyurea Tablet

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Related Coverage Resources

INSTRUCTIONS FOR USE
The following Coverage Policy applies to health benefit plans administered by Cigna Companies. Certain Cigna Companies and/or lines of business only provide utilization review services to clients and do not make coverage determinations. References to standard benefit plan language and coverage determinations do not apply to those clients. Coverage Policies are intended to provide guidance in interpreting certain standard benefit plans administered by Cigna Companies. Please note, the terms of a customer's particular benefit plan document [Group Service Agreement, Evidence of Coverage, Certificate of Coverage, Summary Plan Description (SPD) or similar plan document] may differ significantly from the standard benefit plans upon which these Coverage Policies are based. For example, a customer's benefit plan document may contain a specific exclusion related to a topic addressed in a Coverage Policy. In the event of a conflict, a customer's benefit plan document always supersedes the information in the Coverage Policies. In the absence of a controlling federal or state coverage mandate, benefits are ultimately determined by the terms of the applicable benefit plan document. Coverage determinations in each specific instance require consideration of 1) the terms of the applicable benefit plan document in effect on the date of service; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Coverage Policies and; 4) the specific facts of the particular situation. Coverage Policies relate exclusively to the administration of health benefit plans. Coverage Policies are not recommendations for treatment and should never be used as treatment guidelines. In certain markets, delegated vendor guidelines may be used to support medical necessity and other coverage determinations.

Overview

This policy supports medical necessity review for hydroxyurea tablet (Siklos®).

Receipt of sample product does not satisfy any criteria requirements for coverage.

Medical Necessity Criteria

Hydroxyurea tablet (Siklos) is considered medically necessary when the following are met:

Sickle Cell Disease. Individual meets **ALL** of the following criteria:
- A. Documented diagnosis of sickle cell anemia with recurrent moderate to severe painful crises
- B. Documentation of **ONE** of the following:
  - i. Individual requires Siklos tablets to achieve a dosage that cannot be achieved with other hydroxyurea products (for example, hydroxyurea capsule or Droxia®)
  - ii. Individual has an inability to swallow hydroxyurea capsules

When coverage is available and medically necessary, the dosage, frequency, duration of therapy, and site of care should be reasonable, clinically appropriate, and supported by evidence-based literature and adjusted based upon severity, alternative available treatments, and previous response to therapy.

Reauthorization Criteria

Continuation of hydroxyurea tablet (Siklos) is considered medically necessary for sickle cell disease when the above medical necessity criteria are met AND there is documentation of beneficial response (for example, reduction in the frequency of painful crises and/or a reduction in the need for blood transfusions).

Authorization Duration

Initial approval duration: up to 12 months
Reauthorization approval duration: up to 12 months

Conditions Not Covered

Any other use is considered experimental, investigational or unproven.

Background

OVERVIEW
Both Droxia and Siklos are indicated **in patients with sickle cell anemia** with recurrent moderate to severe painful crises for the following uses:[1,2]

- **Reduce** the **frequency of painful crises**.
- **Reduce the need for blood transfusions.**

Siklos is indicated for use in adults and pediatric patients ≥ 2 years of age. The safety and effectiveness of Droxia in pediatric patients have not been established, but the National Institutes of Health – National Heart, Lung, and Blood Institute Evidence-Based Management of Sickle Cell Disease, Expert Panel Report (2014) recommends hydroxyurea for use in pediatric patients and adults.[3]

Droxia capsules should be swallowed whole; patients should not open, break, or chew the capsules.[1] Droxia is available as 200 mg, 300 mg, and 400 mg capsules. Siklos tablets can be swallowed whole or dispersed (immediately before use) in a small quantity of water in a teaspoon.[2] Siklos is available as 100 mg and 1,000 mg functionally scored tablets. The 100 mg tablets can be split into two parts (each part is 50 mg). The 1,000 mg tablets have three score lines and can be split into four parts (each part is 250 mg). The two tablet strengths can be used to deliver doses of 50 mg, 100 mg, 250 mg, 500 mg, 750 mg, and 1,000 mg and combinations thereof. Both Droxia and Siklos are cytotoxic medications and caregivers/patients should follow applicable special handling and disposal procedures. Avoid exposure to crushed tablets/capsules.

Guidelines
The National Institutes of Health – National Heart, Lung, and Blood Institute issued the Evidence-Based Management of Sickle Cell Disease, Expert Panel Report in 2014.[3] The report notes that there are only two currently proven disease-modifying treatments for patients with sickle cell disease: hydroxyurea and chronic blood transfusions. Hydroxyurea therapy is recommended in adults and children with sickle cell disease to reduce sickle cell disease-related complications. Clinical response to hydroxyurea therapy may take 3 to 6 months; a 6-month trial on the maximum tolerated dose is required prior to considering discontinuation due to treatment failure. Long-term hydroxyurea therapy is indicated in patients with clinical response.

References

1. Droxia® capsules [prescribing information]. Princeton, NJ: Bristol-Myers Squibb; September 2021.

2. Siklos® tablets [prescribing information]. Bryn Mawr, PA: Medunik; December 2021.
3. The National Institutes of Health – National Heart, Lung, and Blood Institute Evidence-Based Management of Sickle Cell Disease, Expert Panel Report 2014. Available at: https://www.nhlbi.nih.gov/sites/default/files/media/docs/sickle-cell-disease-report%20020816_0.pdf. Accessed on September 1, 2023.