group health Cooperative of eau claire **KMTSJ, Inc.**	DEPARTMENT:	Utilization Management
	SUBJECT:	Iron Infusions
	PRODUCT LINE:	All
	POLICY NUMBER:	UM122
	ORIGINAL POLICY EFFECTIVE DATE:	08/01/2020
	LAST REVISED DATE:	08/07/2021
	LAST REVIEWED DATE:	03/07/2024

SCOPE:
To ensure Group Health Cooperative of Eau Claire (the Cooperative) consistently and correctly administers benefits to all members according to their policy benefits.

POLICY:
It is the policy of the Cooperative to review requests for intravenous iron treatments according to member policy and evidence-based medical criteria through the prior authorization process.

PROCEDURE: Prior Authorization Required: YES

Coverage Criteria for Intravenous Iron Therapy

1. Documentation of a trial and failure of oral iron. (12 weeks) AND
2. Iron deficiency defined as a ferritin level <30 ng/mL or TSAT <15% (obtained within previous 30 days)

If criteria for coverage is met, the following considerations will be taken into account:

First line Treatments
Venofer® (iron sucrose)
- Only will be approved for members with documented **chronic kidney disease** (CKD) or **pregnancy**.

Ferrlecit® (ferric gluconate) Only will be approved for members with documented chronic kidney disease (CKD) who are **hemodialysis dependent**.

Second Line Treatments
Injectafer® (ferric carboxymaltose) **OR** Feraheme® (ferumoxytol)
Both approved for use in pregnancy.

Dosing IV Iron Agents

Medication	Dosing
Injectafer® (ferric carboxymaltose)	▪ Weight ≥50 kg: Two doses of 750 mg, given seven or more days apart ▪ Weight <50 kg: Two doses of 15 mg/kg, given seven or more days apart
Feraheme® (ferumoxytol)	▪ Two doses of 510 mg, given three to eight days apart

Venofer® (iron sucrose)	• *Hemodialysis-dependent chronic kidney disease:* 100 mg administered during consecutive dialysis sessions; the usual cumulative total dose is 1,000 mg (10 doses); may repeat treatment if clinically indicated. • *Peritoneal dialysis-dependent chronic kidney disease:* Two infusions of 300 mg administered 14 days apart, followed by a single 400 mg infusion 14 days later (total cumulative dose of 1,000 mg in 3 divided doses); may repeat treatment if clinically indicated. • *Non-dialysis-dependent chronic kidney disease:* 200 mg administered on 5 different occasions within a 14-day period (total cumulative dose: 1,000 mg in 14-day period); may repeat treatment if clinically indicated. **Note:** Dosage has also been administered as 2 infusions of 500 mg on day 1 and day 14 (limited experience).
Ferrlecit® (ferric gluconate)	• 125 mg (elemental iron) per dialysis session. For repletion treatment, most patients may require a cumulative dose of 1,000 mg (elemental iron) over ~8 dialysis sessions.

APPROVED: Dakota Mh DATE: 03/07/2024

REVISION HISTORY:

Rev. Date	Revised By/Title	Summary of Revision
08/07/2021	Michele Bauer, MD, CMO	Updated the criteria.
08/25/2022	Michele Bauer, MD, CMO	Reviewed. No changes.

08/20/2023	Michele Bauer, MD, CMO	Reviewed. No changes.
03/07/2024	Dakota Rau, PharmD	Reviewed. No changes.