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Retired
Effective Date: 02/02/2023

Fetroja[®] (cefiderocol)

HCPCS: J0693

Policy:

Requests must be supported by submission of chart notes and patient specific documentation.

- A. Coverage of the requested drug is provided when all the following are met:
 - a. FDA approved indications
 - b. FDA approved age
 - c. Organism must be susceptible to Fetroja

- B. Quantity Limitations, Authorization Period and Renewal Criteria
 - a. Quantity Limit: FDA approved dosing
 - b. Initial Authorization Period: 14 days

***Note: Coverage may differ for Medicare Part B members based on any applicable criteria outlined in Local Coverage Determinations (LCD) or National Coverage Determinations (NCD) as determined by Center for Medicare and Medicaid Services (CMS). See the CMS website at <http://www.cms.hhs.gov/>. Determination of coverage of Part B drugs is based on medically accepted indications which have supported citations included or approved for inclusion determined by CMS approved compendia.

Background Information:

- There are no treatment guidelines for complicated urinary tract infections currently

- Selection of empiric therapy should be based on susceptibility of prior urine isolates, patient characteristics, and local community resistance patterns

- Empiric therapy should include broad-spectrum coverage with either imipenem, meropenem, or doripenem in cases of suspected multi-drug resistant gram-negative infection or standard spectrum therapy including ceftriaxone, piperacillin-tazobactam, ciprofloxacin, or levofloxacin

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- Urine culture and susceptibility testing should be performed and used to confirm the chosen empiric therapy is appropriate or to tailor the regimen based on the results

References:

1. Fetroja [prescribing information]. Florham Park, NJ: Shionogi, Inc.; November 2019.
2. Singh KP, Li G, Mitrani-Gold FS, et al. Systematic review and meta-analysis of antimicrobial treatment effect estimation in complicated urinary tract infection. *Antimicrob Agents Chemother.* 2013 Aug 12; 57 (11): 5284.
3. Golan Y. Empiric therapy for hospital-acquired, gram-negative, complicated intra-abdominal infection and complicated urinary tract infections: a systematic literature review of current and emerging treatment options. *BMC Infect Dis.* 2015; 15: 313.
4. Portsmouth S, van Veenhuyzen D, Echols R, et al. Cefiderocol versus imipenem-cilastatin for the treatment of complicated urinary tract infections caused by gram-negative uropathogens: a phase 2, randomized, double-blind, non-inferiority trial. *Inf Disease.* Dec 2018; 18 (12): 1319 – 28.

Policy History		
#	Date	Change Description
1.1	Effective Date: 02/02/2023	Retiring policy as drug is not part of our prior authorization program
1.0	Effective Date: 12/05/2019	New full drug review

* *The prescribing information for a drug is subject to change. To ensure you are reading the most current information it is advised that you reference the most updated prescribing information by visiting the drug or manufacturer website or <http://dailymed.nlm.nih.gov/dailymed/index.cfm>.*