



**VANTAS® (HISTRELIN ACETATE) IMPLANT FOR THE  
TREATMENT OF ADVANCED PROSTATE CANCER  
HS-101**



*Harmony Behavioral Health, Inc.*

*Harmony Behavioral Health of Florida, Inc.*

*Harmony Health Plan of Illinois, Inc.*

*HealthEase of Florida, Inc.*

*'Ohana Health Plan, a plan offered by  
WellCare Health Insurance of Arizona, Inc.*

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*WellCare of Ohio, Inc.*

*WellCare of Texas, Inc.*

*WellCare Prescription Insurance, Inc.*

**Vantas® (histrelin acetate)  
Implant for the Treatment of  
Advanced Prostate Cancer**

**Policy Number: HS-101**

**Original Effective Date: 5/7/2009**

**Revised Date(s): 5/28/2010; 7/18/2011;  
5/3/2012**

**DISCLAIMER**

The Clinical Coverage Guideline is intended to supplement certain standard WellCare benefit plans. The terms of a member's particular Benefit Plan, Evidence of Coverage, Certificate of Coverage, etc., may differ significantly from this Coverage Position. For example, a member's benefit plan may contain specific exclusions related to the topic addressed in this Clinical Coverage Guideline. When a conflict exists between the two documents, the Member's Benefit Plan always supersedes the information contained in the Clinical Coverage Guideline. Additionally, Clinical Coverage Guidelines relate exclusively to the administration of health benefit plans and are NOT recommendations for treatment, nor should they be used as treatment guidelines. The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

**APPLICATION STATEMENT**

The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

## **BACKGROUND**

VANTAS® (histrelin implant) is a sterile, non-biodegradable, diffusion-controlled HYDRON® polymer reservoir containing histrelin acetate, a synthetic nonapeptide analog of the naturally occurring gonadotropin releasing hormone (GnRH), also known as luteinizing hormone releasing hormone (LH-RH), possessing a greater potency than the natural sequence hormone. VANTAS is designed to deliver approximately 50 µg histrelin per day over 12 months. The recommended dose of histrelin is one 50 mg implant inserted subcutaneously for 12 months. The implant must be removed 12 months after insertion. At the time the implant is removed, another implant may be inserted to continue therapy.

Histrelin acetate, an LH-RH agonist, acts as a potent inhibitor of gonadotropin secretion when given continuously in therapeutic doses. Both animal and human studies indicate that following an initial stimulatory phase, chronic, subcutaneous administration of histrelin acetate desensitizes responsiveness of the pituitary gonadotropin which, in turn, causes a reduction in testicular steroidogenesis.

In humans, administration of histrelin acetate results in an initial increase in circulating levels of luteinizing hormone (LH) and follicle-stimulating hormone (FSH), leading to a transient increase in concentration of gonadal steroids (testosterone and dihydrotestosterone in males). However, continuous administration of histrelin acetate results in decreased levels of LH and FSH. In males, testosterone is reduced to castrate levels. These decreases occur within 2 to 4 weeks after initiation of treatment. Histrelin acetate is not active when given orally. The VANTAS® implant looks like a small thin flexible tube and consists of a 50-mg histrelin acetate drug core inside a 3.5 cm by 3 mm, cylindrical HYDRON® polymer reservoir.

In an open-label, multicenter, single-arm study in 138 men with prostate cancer who received one 50 mg histrelin implant, medical castration (defined as serum total testosterone concentrations of 50 ng/dL or less) was achieved in 100% of 134 evaluable patients on day 28, and in 100% of 115 evaluable patients at week 52. Serum prostate specific antigen (PSA) concentrations, a secondary end-point in this study, decreased to within normal limits by week 24 in 103 of 111 evaluable patients (93%). Breakthrough, an increase in serum testosterone concentrations to 50 ng/dL or more following achievement of medical castration, was reported in four of 134 patients (approximately 3%); in two of these patients, the implant may have been expelled without the patient's knowledge (since it could neither be palpated nor visualized with ultrasound) and in one patient, lab error may have caused the aberrant value. After 52 weeks of therapy, a total of 113 patients underwent removal of the first implant and insertion of a second implant for another year of therapy. In 68 of these patients, serum testosterone concentrations were measured on day two or three and on day seven after insertion of the second implant to assess the "acute-on-chronic" phenomenon; no acute increase in serum testosterone was observed in any of the patients following insertion of the new implant. Medical castration was maintained in all patients throughout the second year of treatment.

Common side effects reported in adults are those typical of hypogonadism. Hot flashes were the most common adverse event reported, occurring in approximately 65% of patients. The agent can cause erectile dysfunction, testicular atrophy, gynecomastia, and decreased libido. Other side-effects have included implant site reactions (e.g., bruising, pain/soreness/tenderness, and erythema), fatigue, and renal impairment. Long-term therapy (greater than six months) with GnRH agonists has a detrimental effect on bone mass, causing a reduction in bone mineral density. Although this effect is partially reversible, bone mineral density may remain below pretreatment values for more than one year after discontinuation. The signs and symptoms of prostate cancer may worsen during the first weeks of treatment because histrelin may initially cause a transient increase in serum testosterone levels.



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### POSITION STATEMENT

Vantas® (histrelin acetate) **is considered medically necessary** for the palliative treatment of advanced prostate cancer when ALL of the following criteria are met:

- There is a medical need for the implant (e.g. mobility or compliance issues, inability to receive daily injections); **AND**,
- There is a documented diagnosis of cancer of the prostate; **AND**,
- There is a demonstrated response to luteinizing hormone-releasing hormone (LHRH) agonists confirmed by periodic measurement of testosterone and PSA levels; **AND**,
- The member has a life expectancy of more than one year; **AND**,
- The member has not had a bilateral orchiectomy

Vantas® is contraindicated in the following circumstances:

- Member has had a bilateral orchiectomy; **OR**,
- Member has a life expectancy less than one year; **OR**,
- Member is hypersensitive to GnRH, GnRH agonist analogs or any of the components of Vantas®

### CODING

#### Covered CPT®\* Codes

<b>11981</b>	Insertion, Non-Biodegradable Drug Delivery Implant
<b>11982</b>	Removal, Non-Biodegradable Drug Delivery Implant
<b>11983</b>	Removal with Reinsertion of Non-Biodegradable Drug Delivery Implant

#### Covered ICD-9-CM Procedure Codes

<b>99.24</b>	Injection of Other Hormone; Drug Delivery Implant
<b>86.05</b>	Incision with Removal of Drug Delivery Implant from skin and subcutaneous tissue
<b>86.99</b>	Removal and Replacement of Drug Delivery Implant

#### Covered HCPCS Code

<b>J9225</b>	Histrelin Implant (Vantas®), 50 MG
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#### Covered ICD-9-CM Diagnosis Code

<b>185</b>	Malignant Neoplasm of Prostate
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#### Non- Covered ICD-9-CM Diagnosis Code

<b>995.27</b>	Drug hypersensitivity, specifically to GnRH or GnRH agonist analogs or any components of Vantas®
<b>V45.77</b>	Acquired Absence of Testes; status post bilateral orchiectomy

\*Current Procedural Terminology (CPT®) 2012 American Medical Association: Chicago, IL.



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**REFERENCES**

Peer Reviewed - N/A

**Government Agencies, Professional and Medical Organizations**

1. Centers for Medicare and Medicaid Services. (2009, February 16). Local coverage determination for luteinizing hormone-releasing hormone (LHRH) analogs (L28901). First Coast Service Options, Inc. Retrieved from <http://www.cms.hhs.gov/mcd/search.asp>
2. National Comprehensive Cancer Network (NCCN) Drugs and Biologics Compendium. Vantas (histrelin acetate). Copyright 2009.

**Other**

1. VANTAS® (histrelin implant) Information. Indevus Pharmaceuticals, Inc. Lexington, MA. June, 2008.

**HISTORY AND REVISIONS**

<b>Date</b>	<b>Action</b>
5/3/2012	<ul style="list-style-type: none"><li>• Approved by MPC. No changes.</li></ul>
12/1/2011	<ul style="list-style-type: none"><li>• New template design approved by MPC.</li></ul>
7/18/2011	<ul style="list-style-type: none"><li>• Approved by MPC. No changes.</li></ul>