

# **Pharmacy Drug Policy & Procedure**

Policy Name: Rebyota (fecal microbiota) Policy #: 3166P

## **Purpose of the Policy**

The purpose of this policy is to establish the criteria for coverage of Rebyota (fecal microbiota, live-jslm).

## **Statement of the Policy**

Health Alliance Medical Plans will approve the use of Rebyota (fecal microbiota, live-jslm) under the specialty medical benefit when the following criteria have been met.

### Criteria

#### 1. Clostridioides difficile Infection (CDI)

- 1.1 Diagnosis of at least two recurrent (repating) episodes of CDI refractory (unable to be treated) to standard antibiotic therapy
  - Must be confirmed by positive stool test for *C. difficile* within the past 30 days
- 1.2 Current episode of CDI must be controlled (<3 unformed/loose stools/day for 2 consecutive days)
- 1.3 Age 18 years or older
- 1.4 Prescribed by or in consultation with a gastroenterologist (digestive system doctor) or infectious disease specialist (infection doctor)
- 1.5 Administration will occur 24- 72 hours after completion of antibiotic course

#### 2. Approval Period

2.1 Maximum 1 treatment per lifetime

<b>CPT Codes</b>	
44705	Preparation of fecal microbiota for instillation, including assessment of donor specimen
G0455	Preparation with instillation of fecal microbiota by any method, including assessment of donor specimen

<b>HCPCS Codes</b>	
J1440	Fecal microbiota, live - jslm, 1 ml

#### References

- 1. Rebyota (fecal microbiota, live-jslm) [prescribing information]. Parsippany, NJ: Ferring Pharmaceuticals Inc; November 2022.
- 2. Orenstein R, Dubberke E, Hardi R, et al. Safety and Durability of RBX2660 (Microbiota Suspension) for Recurrent Clostridium difficile Infection: Results of the PUNCH CD Study. Clin Infect Dis 2016; 62:596.
- 3. Khanna S, Assi M, Lee C, et al. Efficacy and Safety of RBX2660 in PUNCH CD3, a Phase III, Randomized, Double-Blind, Placebo-Controlled Trial with a Bayesian Primary Analysis for the Prevention of Recurrent Clostridioides difficile Infection. Drugs. 2022 Oct;82(15):1527-1538.
- 4. Orenstein R, Dubberke E, Khanna S, et al. Final Results from a Phase 2b Randomized, Placebo-Controlled Clinical Trial of RBX2660: A Microbiota-Based Drug for the Prevention of Recurrent Clostridioides difficile Infection. Infect Dis Ther. 2022 Dec 21.
- 5. Colleen RK, Fischer M, Allegretti JR, et al. ACG Clinical Guidelines: Prevention, Diagnosis, and Treatment of Clostridioides difficile Infections. Am J Gastroenterol. 2021 Jun 1;116(6):1124-1147.
- 6. Johnson S, Lavergne, C, Skinner AM, et al. Clinical Practice Guideline by the Infectious Diseases Society of America (IDSA) and Society for Healthcare Epidemiology of America (SHEA): 2021 Focused Update Guidelines on Management of Clostridioides difficile Infection in Adults. Clin Infect Dis. 2021 Sep 7;73(5):e1029-e1044.

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#### **DISCLAIMER**

This Medical Policy has been developed as a guide for determining medical necessity. The process of medical necessity review also entails review of the most recent literature and physician review. Medical Policy is not intended to dictate to providers how to practice medicine. Providers are expected to exercise their medical judgment in providing the most appropriate care. Health Alliance encourages input from providers when developing and implementing medical policies. Benefit determinations are based on applicable contract language in the member's Policy/ Subscription Certificate/ Summary Plan Description. This Medical Policy does not guarantee coverage. There may be a delay between the revision of this policy and the posting on the web. Please contact the Health Alliance Customer Service Department at 1-800-851-3379 for verification of coverage.