

Medical Policy:
Intravenous Iron



Last review date: 6/18/2024

Applicable Products:	
Feraheme (ferumoxytol)	Injectafer (ferric carboxymaltose)
Ferrlecit (sodium ferric gluconate complex)	Monoferric (ferric derisomaltose)
Ferumoxytol	Venofer (iron sucrose)
INFeD (iron dextran)	

Initial Approval Criteria:

Coverage may be approved if all of the following are met:

- Patient is at least 18 years of age; **AND**
- Laboratory values must be obtained within 28 days prior to the anticipated date of administration; **AND**
- Other causes of anemia (e.g., vitamin B-12 deficiency, thalassemia, sideroblastic anemia, etc.) have been ruled out; **AND**
- If applicable: Trial and failure, intolerance, or a contraindication to the preferred products as listed in the medical drug list; **AND**

Iron deficiency anemia in non-dialysis-dependent chronic kidney disease (NDD-CKD)

- Patient must not be receiving hemodialysis; **AND**
- Patient has chronic renal impairment with eGFR between 15-59 mL/min; **AND**
- Patient has iron-deficiency anemia with a Hemoglobin (Hb) ≤ 11 g/dL; **AND**
 - Ferritin ≤ 100 ng/mL; **OR**
 - Ferritin ≤ 300 ng/mL when transferrin saturation (TSAT) $\leq 30\%$; **OR**

Iron deficiency anemia in patients intolerant to or who have had unsatisfactory response to oral iron

- Patient had an intolerance or inadequate response to a minimum of 14 days of oral iron; **AND**
- Patient has iron-deficiency anemia with a Hemoglobin (Hb) ≤ 11 g/dL; **AND**
 - Ferritin < 100 ng/mL; **AND**
 - Transferrin saturation (TSAT) $< 20\%$

Renewal Criteria:

Coverage may be renewed if all of the following are met:

- Patient continues to meet Initial Approval Criteria; **AND**
- Absence of unacceptable toxicity

Length of Authorization:

35 days

This policy is designed to address medical guidelines that are appropriate for the majority of individuals with a particular disease, illness, or condition. Each person's unique clinical or other circumstances may warrant individual consideration, based on review of applicable medical records, as well as other regulatory, contractual and/or legal requirements.

Medical policies do not constitute medical advice, nor are they intended to govern the practice of medicine. They are intended to reflect reimbursement and coverage guidelines. Coverage for services may vary for individual members, based on the terms of the benefit contract.