

daxibotulinumtoxin a-lanm (Daxxify®)

Medical Benefit Drug Policy

<u>Place of Service</u> Office Administration

# **Drug Details**

USP Category: Miscellaneous Therapeutic Agent

**Mechanism of Action:** Acetylcholine release inhibitor and neuromuscular blocking agent **HCPCS**:

- Through 3/31/2024: C9160 per 1 unit
- Effective 4/1/2024 and after: J0589 Injection, daxibotulinumtoxina-lanm, 1 unit

## How Supplied:

50 Units or 100 Units sterile lyophilized powder in a single-dose vial

### Condition(s) listed in policy *(see coverage criteria for details)*

• Cervical dystonia / Spasmodic torticollis

The following condition(s) require Prior Authorization/Preservice:

## Cervical dystonia / Spasmodic torticollis

- 1. Clonic or tonic involuntary contractions of multiple neck muscles exists, AND
- 2. Sustained head torsion and/or tilt with limited range of motion in the neck is present.

# **Covered Doses:**

250 units given intramuscularly as a divided dose among affected muscles

### Coverage Period:

<u>Initial</u>: One treatment every 12 weeks for 4 treatments <u>Reauthorization</u>: Indefinite (if patient had clinical benefit)

#### References

- 1. AHFS. Available by subscription at <u>http://www.lexi.com</u>
- 2. DrugDex<sup>®</sup>. Available by subscription at http://www.micromedexsolutions.com/home/dispatch
- 3. Daxxify (daxibotulinumtoxinA-lanm) [Prescribing information]. Newark, CA: Revance Therapeutics, Inc.; 8/2023.

#### **Review History**

Date of Last Annual Review: 11/29/2023 Date of last revision: 4/3/2024 Changes from previous policy version:



• Added Effective 4/1/2024 and after: J0589 Injection, daxibotulinumtoxina-lanm, 1 unit

Blue Shield of California Medication Policy to Determine Medical Necessity Reviewed by P&T Committee