



5.30.054

Section:	Prescription Drugs	Effective Date:	April 1, 2025
Subsection:	Endocrine and Metabolic Drugs	Original Policy Date:	June 1, 2018
Subject:	Samsca	Page:	1 of 5

Last Review Date: March 7, 2025

Samsca

Description

Samsca (tolvaptan)

Background

Samsca (tolvaptan) is a selective vasopressin (V2-receptor) antagonist, which increases urine water excretion. The extra excretion of water in the urine increases serum sodium concentrations in the blood. Samsca (tolvaptan) is used clinically to treat hyponatremia, which is low serum sodium concentrations. Hyponatremia can be caused by many disease states, including heart failure and SIADH syndrome of inappropriate antidiuretic hormone secretion (SIADH) (1-2).

Regulatory Status

FDA-approved indication: Samsca is a selective vasopressin V2-receptor antagonist indicated for the treatment of clinically significant hypervolemic and euvolemic hyponatremia (serum sodium <125 mEq/L or less marked hyponatremia that is symptomatic and has resisted correction with fluid restriction), including patients with heart failure and syndrome of inappropriate antidiuretic hormone (SIADH) (1).

Limitations of Use:

Patients requiring intervention to raise serum sodium urgently to prevent or to treat serious neurological symptoms should not be treated with Samsca. It has not been established that Samsca provides a symptomatic benefit to patients (1).

Samsca carries a boxed warning that patients should be initiated and re-initiated only in a hospital where serum sodium can be monitored closely. Also because of the risk of

Section:	Prescription Drugs	Effective Date:	April 1, 2025
Subsection:	Endocrine and Metabolic Drugs	Original Policy Date:	June 1, 2018
Subject:	Samsca	Page:	2 of 5

hepatotoxicity, tolvaptan should not be used for autosomal dominant polycystic kidney disease (ADPKD) outside of the FDA-Approved REMS (1).

There is an additional boxed warning in the package insert addressing the risk of osmotic demyelination due to too rapid correction of hyponatremia (e.g., 12 mEq/L/24 hours). Therefore, initiation and re-initiation of this medication should only be done in hospital where serum sodium can be monitored closely (1).

Samsca should not be used for longer than 30 days due to possible liver injury leading to organ transplant or death. Long-term tolvaptan treatment had no demonstrated effect, either favorable or unfavorable (1-2).

The safety and effectiveness of Samsca in pediatric patients have not been established (1).

Related policies

Jynarque

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Samsca may be considered **medically necessary** if the conditions indicated below are met.

Samsca may be considered **investigational** for all other indications.

Prior-Approval Requirements

Age 18 years of age and older

Diagnosis

Patient must have the following:

Euvolemic or hypervolemic hyponatremia

AND the following:

Section:	Prescription Drugs	Effective Date:	April 1, 2025
Subsection:	Endocrine and Metabolic Drugs	Original Policy Date:	June 1, 2018
Subject:	Samsca	Page:	3 of 5

1. Medication **HAS** or **WILL BE** initiated in the hospital where serum sodium can be monitored closely

AND NONE of the following:

1. Used for the treatment of autosomal dominant polycystic kidney disease (ADPKD)
2. Used for hypovolemic hyponatremia
3. Patients requiring intervention to raise serum sodium urgently to prevent or to treat serious neurological symptoms
4. Significant liver disease (including cirrhosis)
5. Anuria
6. Dual therapy with Jynarque (tolvaptan)

Prior-Approval *Renewal* Requirements

Age 18 years of age and older

Diagnosis

Patient must have the following:

Euvolemic or hypervolemic hyponatremia

AND ALL of the following:

1. Medication **HAS** or **WILL BE** initiated in the hospital where serum sodium can be monitored closely
2. There has been at least a 30 day lapse between the last course of therapy and this course of therapy

AND NONE of the following:

1. Used for the treatment of autosomal dominant polycystic kidney disease (ADPKD)
2. Used for hypovolemic hyponatremia
3. Patients requiring intervention to raise serum sodium urgently to prevent or to treat serious neurological symptoms
4. Significant liver disease (including cirrhosis)

Section:	Prescription Drugs	Effective Date:	April 1, 2025
Subsection:	Endocrine and Metabolic Drugs	Original Policy Date:	June 1, 2018
Subject:	Samsca	Page:	4 of 5

5. Anuria
6. Dual therapy with Jynarque (tolvaptan)

Policy Guidelines

Pre-PA Allowance

None

Prior-Approval Limits

Quantity

Strength	Quantity
15 mg	120 tablets per 30 days
30 mg	

Duration 1 month (30 days)

Prior-Approval *Renewal* Limits

Same as above

Rationale

Summary

Samsca (tolvaptan) is a selective vasopressin (V2-receptor) antagonist, which increases urine water excretion. The extra excretion of water in the urine increases serum sodium concentrations in the blood. Samsca is indicated for the treatment of clinically significant hypervolemic and euvolemic hyponatremia (serum sodium <125 mEq/L or less marked hyponatremia that is symptomatic and has resisted correction with fluid restriction), including patients with heart failure and syndrome of inappropriate antidiuretic hormone (SIADH). Per the FDA drug safety communication from April 30, 2013, Samsca should not be used for longer than 30 days due to possible liver injury leading to organ transplant or death (1-2).

Prior approval is required to ensure the safe, clinically appropriate, and cost-effective use of Samsca while maintaining optimal therapeutic outcomes.

5.30.054

Section:	Prescription Drugs	Effective Date:	April 1, 2025
Subsection:	Endocrine and Metabolic Drugs	Original Policy Date:	June 1, 2018
Subject:	Samsca	Page:	5 of 5

References

1. Samsca [package insert]. Rockville, MD. Otsuka America Pharmaceutical, Inc.; April 2021.
2. FDA Drug Safety Communication: FDA limits duration and usage of Samsca (tolvaptan) due to possible liver injury leading to organ transplant or death. Announcement date: April 30, 2013.

Policy History

Date	Action
June 2018	Addition to PA
September 2018	Annual review and reference update Addition of no dual therapy with Jynarque per SME
December 2019	Annual review
December 2020	Annual review and reference update
September 2021	Annual review and reference update
September 2022	Annual review
September 2023	Annual review
March 2024	Annual review. Per SME, removed specific statistics and study endpoints from regulatory status section
March 2025	Annual review

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on March 7, 2025 and is effective on April 1, 2025.