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Section:	Prescription Drugs	**Effective Date:**	April 1, 2026
Subsection:	Respiratory Agents	**Original Policy Date:**	September 19, 2025
Subject:	Brinsupri	**Page:**	1 of 4

Last Review Date: March 6, 2026

Brinsupri

Description

Brinsupri (brensocatib)

Background
Brinsupri (brensocatib) is a competitive, reversible inhibitor of dipeptidyl peptidase 1 (DPP1). DPP1 activates pro-inflammatory neutrophil serine proteases (NSPs) during neutrophil maturation in the bone marrow. Activated NSPs are implicated in the pathogenesis of neutrophil-mediated non-cystic fibrosis bronchiectasis (NCFB) inflammation. In cell-based assays, DPP1 inhibition by Brinsupri reduces the activity of NSPs including neutrophil elastase, cathepsin G, and proteinase 3 (1).

Regulatory Status
FDA-approved indication: Brinsupri is a dipeptidyl peptidase 1 (DPP1) inhibitor indicated for the treatment of non-cystic fibrosis bronchiectasis in adult and pediatric patients 12 years of age and older (1).

Brinsupri carries warnings for dermatologic adverse reactions, gingival and periodontal adverse reactions, and avoiding use of live attenuated vaccines. Monitor the patient for the development of new rash or skin conditions and refer to a dermatologist for evaluation. Refer patients to dental care services for regular dental checkups while taking Brinsupri and advise patients to perform routine dental hygiene. Concomitant use of Brinsupri and live attenuated vaccines has not been evaluated. The use of live attenuated vaccines should be avoided in patients receiving Brinsupri (1).

Effective airway clearance, coupled with maintaining good hydration, is an integral component of managing bronchiectasis, both in the long term and in the context of an acute exacerbation. Mucolytics can be used as an adjunct to chest clearance (2).

The safety and effectiveness of Brinsupri in pediatric patients less than 12 years of age have not been established (1).

Related policies

Policy

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

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

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

Prior-Approval Requirements

Age 12 years of age or older

Diagnosis

Patient must have the following:

Non-cystic fibrosis bronchiectasis (NCFB)

AND ALL of the following:

1. Diagnosis confirmed by chest computed tomography
2. Patient has had at least 2 documented pulmonary exacerbations in the past 12 months that required the use of antibiotics
3. Patient will be advised to perform routine dental hygiene and schedule regular dental checkups
4. **NOT** given concurrently with live attenuated vaccines

Prior – Approval *Renewal* Requirements

Age 12 years of age or older

Diagnosis

Patient must have the following:

Non-cystic fibrosis bronchiectasis (NCFB)

AND ALL of the following:

1. Patient has had clinical benefit from Brinsupri therapy (e.g., decrease in exacerbations, increase in FEV1)
2. Patient will be advised to perform routine dental hygiene and schedule regular dental checkups
3. **NOT** given concurrently with live attenuated vaccines

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Quantity 25 mg per day

Duration 12 months

Prior – Approval *Renewal* Limits

Same as above

Rationale

Summary

Brinsupri is a DPP1 inhibitor indicated for the treatment of non-cystic fibrosis bronchiectasis. Brinsupri carries warnings for dermatologic adverse reactions, gingival and periodontal adverse reactions, and avoiding use of live attenuated vaccines. The safety and effectiveness of Brinsupri in pediatric patients less than 12 years of age have not been established (1).

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

References

1. Brinsupri [package insert]. Bridgewater, NJ: Insmed Incorporated; August 2025.
2. Macfarlane L, Kumar K, et al. Diagnosis and management of non-cystic fibrosis bronchiectasis. Clin Med (Lond). 2021 Nov;21(6):e571-e577. doi: 10.7861/clinmed.2021-0651.

Policy History

Date	Action
September 2025	Addition to PA
December 2025	Annual review. Per SME, added paragraph to regulatory status about the importance of maintaining airway clearance in patients
March 2026	Annual review

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on March 6, 2026 and is effective on April 1, 2026.