SmartPA Criteria Proposal

Drug/Drug Class:	Aduhelm Clinical Edit
First Implementation Date:	TBD
Proposed Date:	September 16, 2021
Prepared for:	MO HealthNet
Prepared by:	MO HealthNet/Conduent
Criteria Status:	☐Existing Criteria ☐Revision of Existing Criteria ☒New Criteria

Executive Summary

Purpose: Ensure appropriate utilization and control of Aduhelm™ (aducanumab-avwa)

Why Issue Selected: Aduhelm™ (aducanumab-avwa) is an amyloid beta-directed antibody indicated for the treatment of Alzheimer's disease (AD), an irreversible, progressive neurodegenerative disorder that leads to a continuous decline in cognition and physical functioning. AD is the most common cause of dementia in the United States, accounting for up to 80% of all dementia diagnoses, and is the sixth leading cause of death. Approved on June 7, 2021 under the FDA's Accelerated Approval Program, Aduhelm has demonstrated a reduction of amyloid beta plaque in treated patients, a biomarker the FDA believes is reasonably likely to predict clinical benefit in AD. The accelerated approval pathway requires completion of a new randomized controlled trial to verify Aduhelm's efficacy by August 2029; if the trial fails to confirm a clinical benefit, the FDA could withdraw approval. Treatment with Aduhelm should be initiated only in patients with mild cognitive impairment or mild dementia, the population in which therapy was initiated in the clinical trials, as there are no safety or effectiveness data on initiating therapy at earlier or later stages of disease. All patients in the clinical trials received a PET (positron emissions tomography) scan to confirm elevated brain amyloid levels. Given as a monthly IV infusion, Aduhelm requires frequent brain MRIs (magnetic resonance imaging) to assess for ARIA-E (amyloid-related imaging abnormalities – edema), which can be observed on imaging studies as brain/cerebral edema or sulcal effusions, and ARIA-H (amyloid-related imaging abnormalities - hemosiderin deposition), which includes microhemorrhage and superficial hemosiderosis in the brain. Due to the high cost, possible adverse events, and specific approved indication, MO HealthNet will impose clinical criteria to ensure appropriate utilization of Aduhelm.

Program-Specific Information:

Drug	Cost per vial (MAC)	Cost of therapy based on a 70 kg participant (MAC)
ADUHELM 170 MG/1.7 ML VIAL	$948.19	First year of therapy = $36,254.38
ADUHELM 300 MG/3 ML VIAL	$1,673.28	Ensuing years of therapy = $51,537.00

Type of Criteria:
☒ **Increased risk of ADE**
☒ **Appropriate Indications**
☐ **Preferred Drug List**
☒ **Clinical Edit**

Data Sources:
☐ **Only Administrative Databases**
☒ **Databases + Prescriber-Supplied**

Setting & Population

- Drug class for review: Aduhelm™ (aducanumab-avwa)
- Age range: All appropriate MO HealthNet participants aged 50 years or older

Approval Criteria

Initial Therapy:

- Participant is aged 50 years or older **AND**
- Prescribed by or in consultation with a neurologist, geriatrician, or other specialist in the treated disease state **AND**
- Documented diagnosis of early Alzheimer's disease **AND**
- Documentation that patient evaluation demonstrates other causes of dementia (e.g., Parkinson's disease, vascular dementia, etc.) have been ruled out **AND**
- Documentation that patient evaluation demonstrates specific alternative neurodegenerative disease or causative factors (e.g., cerebrovascular disease, cobalamin [Vitamin B12] deficiency, syphilis, thyroid disease) have been ruled out **AND**
- Documentation of mild cognitive impairment due to Alzheimer's disease as demonstrated by 3 validated scales, one of which must be the MMSE (Mini Mental State Exam) **AND**
- Documentation of baseline MRI to rule out other causes of dementia (e.g., stroke, small vessel disease, tumor) **AND**
- Documentation of confirmed amyloid pathology from a positive PET scan or detection of amyloid from cerebrospinal fluid (CSF) **AND**
- Dosing must match the FDA approved label:
  - Infusion 1 and 2: 1 mg/kg per 4 weeks
  - Infusion 3 and 4: 3 mg/kg per 4 weeks
  - Infusion 5 and 6: 6 mg/kg per 4 weeks
  - Infusion 7 and beyond: 10 mg/kg per 4 weeks

Continuation of Therapy:

- Initial approval is for 6 months, subsequent approval will be for 6 months, further renewal of prior authorization may be given for up to 12 months
- Documentation of follow-up MRIs to evaluate for ARIA-E, ARIA-H, and other structural changes prior to the 7th and 12th infusions, then at least once annually **AND**
- Documentation of current disease severity as demonstrated by current (at least every 6 months) MMSE score
  - Aduhelm is to be discontinued when Alzheimer's disease progresses rapidly into moderate to severe Alzheimer's disease
  - Rapid decline is defined as a 4-point reduction in a 6-month period on the MMSE, with an additional 1-point reduction in the following 6 months

Denial Criteria

- Therapy will be denied if all approval criteria are not met
- Diagnosis of moderate to severe Alzheimer's Disease
- Documented diagnosis of stroke or TIA (transient ischemic attack) in the past year
- Documented diagnosis of relevant brain hemmorrhage, bleeding disorder, or cerebrovascular abnormalities in the past 6 months
- Concurrent therapy with any blood thinner, excluding aspirin at a prophylactic dose or less

Required Documentation

Laboratory Results:	X	Progress Notes:	X
MedWatch Form:		Other:	X

Disposition of Edit

Denial: Exception code “0682” (Clinical Edit)
Rule Type: CE

Default Approval Period

6 months

References

- Aduhelm (aducanumab-avwa) [package insert]. Cambridge, MA: Biogen Inc.; July 2021.
- IPD Analytics. New Drug Review: Aduhelm (aducanumab). July 2021.
- Cummings, J., et al. Aducanumab: Appropriate Use Recommendations. J Prev Alzheimers Dis (2021). https://doi.org/10.14283/jpad.2021.41
- Institute for Clinical and Economic Review (ICER). Aducanumab for Alzheimer’s Disease: Effectiveness and Value, Final Evidence Report and Meeting Summary; August 5, 2021. ICER_ALZ_Final_Report_080521.pdf