SmartPA Criteria Proposal

Drug/Drug Class:	Galafold® (migalastat) Clinical Edit
First Implementation Date:	May 23, 2019
Proposed Date:	March 19, 2020
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 Galafold® (migalastat)

Why Issue Selected: Galafold® is an alpha-galactosidase A pharmacological chaperone indicated for the treatment of adults with a confirmed diagnosis of Fabry disease and an amenable galactosidase alpha gene (*GLA*) variant, based on in vitro assay data. Fabry disease is a rare, progressive genetic disorder characterized by a defective gene, GLA, that causes a deficiency of the enzyme, alpha-galactosidase A (alpha-Gal A). This enzyme is responsible for breaking down specific lipids in lysosomes, including globotriaosylceramide (GL-3). The accumulation of GL-3 in blood vessels, kidneys, heart, nerves and other organs leads to cell damage with consequences from mild-to-severe symptoms including kidney failure, myocardial infarctions, and strokes that can be fatal. Galafold binds to and stabilizes specific mutant forms of alpha-Gal A, thereby facilitating proper trafficking of the enzyme to lysosomes and increasing enzyme activity. Fabry disease affects approximately 3,000 people in the United States and has only one other current treatment option, Fabrazyme®. Galafold is unlike Fabrazyme, an enzyme replacement therapy, in that it increases the activity of the deficient enzyme rather than replacing it and it's an oral option. Due to the highly specific patient population that would benefit from treatment with Galafold and high cost, MO HealthNet recommends adding a clinical edit to ensure appropriate patient selection.

Program-Specific Information:

Date Range FFS 1-1-2019 to 12-31-2019				
Drug	**Claims**	**Spend**	**Cost per unit**	**Cost per month**
GALAFOLD 123MG CAP	0	-	$1,784.45 MAC	$24,982.35 MAC

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

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

Setting & Population

- Drug class for review: Galafold® (migalastat)
- Age range: All appropriate MO HealthNet participants aged 18 years or older

Approval Criteria

- Participant is aged 18 years or older **AND**
- Documented diagnosis of Fabry disease **AND**
- Documented genetic testing confirming participant has an amenable GLA variant

Denial Criteria

- Therapy will be denied if no approval crieria are met
- Claim exceeds 14 capsules for 28 days of therapy

Required Documentation

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

Disposition of Edit

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

Default Approval Period

6 months

References

- GALAFOLD (migalastat) capsules, [package insert]. Cranbury, NJ: Amicus Therapeutics U.S., Inc.; June 2019.
- IPD Analytics. New Drug Approval: Galafold (migalastat). September 2018.
- Germain DP, Hughes DA, Nicholls K, et al. Treatment of Fabry's disease with the pharmacologic chaperone migalastat. N Engl J Med. 2016;375(6):545-555