



SmartPA Criteria Proposal

Drug/Drug Class:	Fabry Disease Clinical Edit (<i>formerly Galafold Clinical Edit</i>)
First Implementation Date:	May 23, 2019
Revised Date:	July 30, 2020
Prepared for:	MO HealthNet
Prepared by:	MO HealthNet/Conduent
Criteria Status:	<input type="checkbox"/> Existing Criteria <input checked="" type="checkbox"/> Revision of Existing Criteria <input type="checkbox"/> New Criteria

Executive Summary

Purpose: Ensure appropriate utilization and control of agents for Fabry Disease

Why Issue Selected: Fabry disease is a rare, progressive genetic disorder characterized by a defective gene, galactosidase alpha 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® 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. 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 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 (MAC)	Cost per year (WAC)
GALAFOLD 123MG CAP	0	-	\$1,784.45	\$323,211.00
FABRAZYME 5 MG VIAL	51	\$229,244.26	\$6,314.62	\$371,492.00
FABRAZYME 35 MG VIAL	71	\$1,330,084.78	\$901.94	

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: **agents for Fabry Disease**
- Age range: All appropriate MO HealthNet participants aged **8 years or older**

Approval Criteria

- Documented diagnosis of Fabry disease **AND**
- **For Fabrazyme: participant is aged 8 years or older**
- For Galafold:
 - Participant is aged 18 years or older **AND**
 - Documented genetic testing confirming participant has an amenable GLA variant **AND**
 - Claim does not exceed 14 capsules for 28 days of therapy

Denial Criteria

- Therapy will be denied if no approval criteria are met

Required Documentation

Laboratory Results:

X

MedWatch Form:

Progress Notes:

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.
- FABRAZYME® (agalsidase beta) [package insert]. Cambridge, MA: Genzyme Corporation; December 2018.
- IPD Analytics. New Drug Approval: Galafold (migalastat). September 2018.
- IPD Analytics. Endocrine and Metabolic Agents: Fabry Disease. Accessed July 6, 2020.
- 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