



# Proposal

<b>Drug/Drug Class:</b>	Vyvgart Clinical Edit
<b>First Implementation Date:</b>	October 20, 2022
<b>Revised Date:</b>	N/A
<b>Prepared for:</b>	MO HealthNet
<b>Prepared by:</b>	MO HealthNet/Conduent
<b>Criteria Status:</b>	<input type="checkbox"/> Existing Criteria <input type="checkbox"/> Revision of Existing Criteria <input checked="" type="checkbox"/> New Criteria

## Executive Summary

**Purpose:** Ensure appropriate utilization and control of Vyvgart™ (efgartigimod alfa-fcab).

**Why Issue Selected:** Vyvgart™ (efgartigimod alfa-fcab) was FDA-approved on December 17, 2021, for the treatment of generalized myasthenia gravis (gMG) in adults who are anti-acetylcholine receptor (AChR) antibody positive. Myasthenia gravis is a chronic autoimmune neuromuscular condition that causes muscle weakness, most commonly affecting the eyes, face, neck, and limb muscles. gMG is a more severe form of myasthenia gravis that involves muscle groups besides just the eyes. About 80% of all cases are caused by autoantibodies targeting AChRs involved in nerve-muscle communication. Myasthenia gravis is considered a rare neurological disease, in North America the incidence is estimated at 3 to 9.1 cases per million. Treatment has traditionally consisted of acetylcholinesterase inhibitors, immunosuppressants, and rapid immunomodulatory therapies such as IVIG and plasma exchange.

Vyvgart is a human Immunoglobulin G1 (IgG1) antibody fragment that binds to the neonatal Fc receptor, which is responsible for protecting IgG from breakdown and keeping it in circulation longer. By blocking this receptor, Vyvgart results in decreased levels of IgG in circulation leading to less breakdown of acetylcholine within the neuromuscular junction. It is available as an IV infusion and dosed based on weight. One treatment cycle of Vyvgart consists of weekly infusions for 4 weeks, and the time between treatment cycles should be at least 50 days.

Due to the high cost and specific approved indications, MO HealthNet will impose clinical criteria to ensure appropriate utilization of Vyvgart.

Program-Specific Information:	Drug	Cost per cycle* (MAC)	Cost per year* (MAC)
	VYVGART 400 MG/20 ML VIAL	\$47,600.00	\$285,600.00

\*cost estimate based on 75kg participant being treated with 6 cycles per year

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

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

*SmartPA Clinical Proposal Form*  
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## Setting & Population

- Drug class for review: Vyvgart™ (efgartigimod alfa-fcab)
- Age range: All appropriate MO HealthNet participants aged 18 years and older

## Approval Criteria

### Initial Therapy

- Prescribed by or in consultation with neurologist, rheumatologist, or other specialist in the treated disease state **AND**
- Participant aged  $\geq 18$  years **AND**
- Participant has documented diagnosis of generalized myasthenia gravis **AND**
- Documented disease classification as Myasthenia Gravis Foundation of America (MGFA) Class II, III, or IV **AND**
- Documented positive anti-acetylcholine receptor (AChR) antibody test **AND**
- Documented baseline Myasthenia Gravis Activities of Daily Living (MG-ADL) score of greater than or equal to 6 **OR**
- Documented baseline Quantitative Myasthenia Gravis (QMG) score of greater than or equal to 12 **AND**
- Adequate therapeutic trial of 2 immunosuppressants (e.g., glucocorticoids, azathioprine, mycophenolate, tacrolimus, cyclosporine, methotrexate) (90/120 days)
- Initial approval period: 3 months

### Continuation of Therapy

- Subsequent cycles to be administered if:
  - MG-ADL score is greater than or equal to 6 **OR**
  - QMG score is greater than or equal to 12 **OR**
  - Participant was a MG-ADL/QMG responder initially, but no longer has a clinically meaningful improvement (defined as  $< 2$ -point improvement in total MG-ADL score or  $< 3$ -point improvement in total QMG score) **AND**
- Treatment has a sustained effect for at least 4 weeks after the end of the previous treatment cycle **AND**
- Minimum time between treatment cycles should be no less than 50 days from the start of previous treatment cycle and the start of the next treatment cycle
- Continuation approval period: 6 months

## Denial Criteria

- Therapy will be denied if all approval criteria are not met
- Participant is currently pregnant
- Dose exceeds 1,200 mg (60 mL) per infusion
- Therapy exceeds 24 infusions per year

## Required Documentation

Laboratory Results:  
MedWatch Form:

  

Progress Notes:  
Other:

  

## Disposition of Edit

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

## Default Approval Period

3 months

## References

- Vyvgart (efgartigimod alfa-fcab) [package insert]. Argenx: FDA package insert; 2021
- Vyvgart Drug Monograph. Clinical Pharmacology. <https://www.clinicalkey.com/pharmacology/monograph/5373?n=VYVGART>. Date accessed 01/03/2022.
- National Institute of Neurological Disorders and Stroke. (2020). *Myasthenia Gravis Fact Sheet*. Nih.gov. Published March 2020. <https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Fact-Sheets/Myasthenia-Gravis-Fact-Sheet>. Date accessed 01/05/2022.
- IPD Analytics: New Drug Review: Vyvgart (efgartigimod alfa-fcab). Date accessed 01/06/2022.
- Dresser L, Wlodarski R, Reznia K, Soliven B. Myasthenia Gravis: Epidemiology, Pathophysiology and Clinical Manifestations. *JClinMed*, 2021; 10(11), 2235. <https://doi.org/10.3390/jcm10112235>
- Farmakidis C, Pasnoor M, Dimachkie M, Barohn R.J. Treatment of Myasthenia Gravis. *NeuroClin*, 2018;36(2);311–337. <https://doi.org/10.1016/j.ncl.2018.01.011>
- Lascano AM, Lalive PH. Update in immunosuppressive therapy of myasthenia gravis. *AutoimmunRev*, 2021;20(1);102712. <https://doi.org/10.1016/j.autrev.2020.102712>