Executive Summary

Purpose: Ensure appropriate utilization and control of Xcopri® (cenobamate)

Why Issue Selected: Xcopri® (cenobamate) was FDA approved on November 21, 2019, for the treatment of adult patients with partial-onset (or focal) seizures. There are approximately 3 million adults in the United States living with epilepsy and approximately 60% have partial-onset seizures. Despite the availability of many antiepileptic therapies, approximately 20-40% of adults with partial-onset seizures have inadequate control of their seizures, even after treatment with two anti-epileptic drugs. Xcopri was studied only in patients with seizures refractory to between 1-3 anti-epileptic drugs, with 80% of patients on at least 2 concomitant anti-epileptic drugs. Xcopri has an extended titration schedule of up to 12 weeks to reach maintenance therapy due to a risk for Drug Reaction with Eosinophilia and Systemic Symptoms (DRESS) or Multiorgan Hypersensitivity and is also contraindicated in patients with Familial Short QT syndrome, a very rare genetic disease of the electrical system of the heart. Due to the risk of possible adverse events, MO HealthNet will impose clinical criteria to ensure appropriate utilization of Xcopri therapy.

Program-Specific Information:

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<th>Drug</th>
<th>Claims</th>
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<th>Avg Spend per Claim</th>
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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: Xcoperi® (cenobamate)
- Age range: All appropriate MO HealthNet participants aged 18 years or older

Approval Criteria

Initial Therapy:
- Participant is aged 18 years or older AND
- Documented diagnosis of partial-onset or focal seizures AND
- Documented therapeutic trial with at least 2 other antiepileptic agents (defined as 30 days) AND
- Documentation of current baseline seizure frequency and duration AND
- Documentation of current electrocardiogram (to rule out the presence of short QT syndrome) prior to initiation of therapy AND
- Prescriber attests that therapy will be initiated by following the recommended 12 week tapering protocol with monitoring for signs and symptoms of DRESS or Multiorgan Hypersensitivity
- Daily dosages above 200mg/day require Clinical Consultant Review

Continuation of Therapy:
- Initial approval is for 6 months, renewal of prior authorization may be given for up to 12 months following documentation of the following:
  o Documentation of therapy meeting the goals of therapy AND
  o Documentation of reduced seizure burden or improvement in quality of life using a validated scale for the disease state

Denial Criteria

- Therapy will be denied if all approval criteria are not met
- Documented diagnosis of end-stage renal disease with concurrent dialysis
- Documented diagnosis of severe hepatic impairment (Child-Pugh C)

Required Documentation

Laboratory Results: ☐  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


SmartPA Clinical Proposal Form
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