Drug Therapy Guidelines	Applicable	Epidiolex® (cannabidiol)
Medical Benefit		**Effective:** 12/1/18
Pharmacy- Formulary 1	x	**Next Review:** 9/19
Pharmacy- Formulary 2	x	**Date of Origin**: 12/18
Pharmacy- Formulary 3/Exclusive	x	**Review Dates:** 9/18
Pharmacy- Formulary 4/AON	x	

I. Medication Description

Epiodiolex (cannabidiol) is an oral cannabinoid, a marijuana derivative, which lacks the psychoactive properties that are commonly associated with delta-9-tetrahydrocannabinol (THC). Cannabidiol significantly reduced seizure frequency in patients with Dravet syndrome and Lennox-Gastaut syndrome when added to other antiepileptic therapies during clinical trials.
The precise mechanisms by which Epidiolex exerts its anticonvulsant effect in humans are unknown. Cannabidiol does not appear to exert its anticonvulsant effects through interaction with cannabinoid receptors. It may be effective in epilepsy by modulation of the endocannabinoid system. Cannabidiol prevents the degradation of anandamide, an endocannabinoid which may have a role in seizure inhibition. Cannabidiol may be involved with the regulation of T-type calcium channels and nuclear peroxisome proliferator-activated receptor-gamma, both of which may be involved in seizure activity.

II. Position Statement

Coverage is determined through a prior authorization process with supporting clinical documentation for every request.

III. Policy

Coverage of Epidiolex is provided in accordance with the following criteria:

- Medication is prescribed by a neurologist **AND**
- Member is 2 years of age or older **AND**
- Medication is prescribed for the treatment of seizures associated with confirmed diagnosis of one of the following conditions:
    - Lennox-Gastaut syndrome:
        - Member has tried at least TWO antiepileptic medications indicated for this condition (e.g. valproic acid, lamotrigine, rufinamide, topiramate, felbamate, clobazam, ethosuximide, phenobarbital, levetiracetam, zonisamide, perampanel) with treatment failure, unless use is contraindicated.
    - Dravet syndrome:
        - Member has tried at least TWO antiepileptic medications indicated for this condition (e.g. clobazam, valproic acid, topiramate, stiripentol, levetiracetam, zonisamide, clonazepam, ethosuximide, phenobarbital) with treatment failure, unless use is contraindicated.

IV. Quantity Limitations

- Epidiolex coverage will be provided for quantities sufficient to allow a 30-day supply based on FDA-approved dosing:
  - Starting dosage (first week): 5 mg/kg/day administered in 2 divided doses.
  - Maintenance dosage after first week: 10 mg/kg/day administered in two divided doses, up to a maximum of 20 mg/kg/day.

V. Coverage Duration

Initial coverage is available for up to 4 months and may be renewed.

VI. Coverage Renewal Criteria

Coverage may be renewed in 12-month increments based upon the following criteria:

- Member has experienced a significant decrease in the frequency of seizures **AND**
- Stabilization of disease or absence of disease progression has been documented **AND**
- No unacceptable toxicity from the drug has been observed.

VII. Billing/Coding Information

Epidiolex is available as follows:

- 100mg/mL oral solution packaged in a carton with two 5 mL calibrated oral dosing syringes and a bottle adapter.
- Solution should be used within 12 weeks of first opening the bottle.

VIII. Summary of Policy Changes

12/1/18: new policy

IX. References

1. Product Information: Epidiolex® (cannabidiol). Carlsbad, CA 92008: Greenwich Biosciences, Inc.; June 2018.
2. UpToDate Online, accessed September 2018
3. Clinical Pharmacology Online, accessed September 2018
4. Facts and Comparisons Online, accessed September 2018
5. Cross, J. Helen et al: Expert Opinion on the Management of Lennox-Gastaut Syndrome: Treatment Algorithms and Practical Considerations. Front Neurol.2017;8:505.
6. NORD's Rare Disease Database: Dravet Syndrome. Accessed September 2018
7. Wirrell, E, Laux L, Donner E, et all. Optimizing the Diagnosis and Management of Dravet Syndrome: Recommendations From a North American Consensus Panel. Pediatr Neurol 2017; 68: 18-34

8. National Institute for Health and Care Excellence (NICE). Epilepsies: diagnosis and management. Clinical guideline [CG137]. Updated: April 2018. nice.org.uk/guidance/cg137

The Plan fully expects that only appropriate and medically necessary services will be rendered. The Plan reserves the right to conduct pre-payment and post-payment reviews to assess the medical appropriateness of the above-referenced therapies.

The preceding policy is a guideline to allow for coverage of the pertinent medication/product, and is not meant to serve as a clinical practice guideline.