

# Criteria-Based Consultation Prescribing Program

## CRITERIA FOR DRUG COVERAGE

### Perampanel (Fycompa)

#### Notes:

- ^ Adequate trial is defined as 1-month treatment duration
- \* Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation
- + Formulary antiepileptic medications include: carbamazepine, gabapentin, lamotrigine, levetiracetam, oxcarbazepine, phenytoin, phenobarbital, topiramate, valproate, zonisamide

**Initiation (new start) criteria:** Non-formulary **perampanel (Fycompa)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Prescribed by a neurologist
- Diagnosis of refractory epilepsy on problem list
- Patient has failed an adequate<sup>^</sup> trial of, or patient has an allergy or intolerance\* to five formulary alternative antiepileptic medications<sup>+</sup>
- Patient is currently treated with 1 or more antiepileptic medications

**Criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously:** Non-formulary **perampanel (Fycompa)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- See below continued use criteria for patients stable on medication

**Criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously:** Non-formulary **perampanel (Fycompa)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Diagnosis of epilepsy or seizures
- Patient has failed a trial of, or patient has an allergy or intolerance\* to five formulary alternative antiepileptic medications<sup>+</sup>
- Patient is currently treated with 1 or more antiepileptic medications

**Continued use criteria for patients stable on the medication:** Non-formulary **perampanel (Fycompa)** will continue to be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Prescribed by a Neurologist
- Office visit or telephone visit with neurologist within the past 12 months

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