#### Clinical Oversight Review Board (CORB) Criteria for Prescribing

### Belimumab intravenous (Benlysta)

#### Notes:

- Quantity Limits: No
- \* Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

Non-Formulary **belimumab intravenous (Benlysta)** requires a clinical review. Appropriateness of therapy will be based on the following criteria:

# <u>Initiation (new start) criteria and for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously:</u>

- 1. Prescriber is a rheumatologist and patient has a diagnosis of active systemic lupus erythematous (SLE)
  - Patient is 5 years of age or older
  - Patient has positive antinuclear antibody (ANA), anti-double-stranded deoxyribonucleic acid (anti-dsDNA), and/or Sjogren's antibody (SSA or SSB)
  - Patient is dependent on corticosteroid therapy OR documented contraindication or intolerance to corticosteroid therapy
  - Patient has a documented treatment failure (at least a 60-day course) or contraindication/intolerance to all of the following:
    - At least one nonsteroidal anti-inflammatory (NSAID) medication (e.g. aspirin, ibuprofen, naproxen, etodolac, meloxicam)
    - o At least one antimalarial (e.g. hydroxychloroquine, chloroquine)
    - At least one immunomodulator (e.g. cyclophosphamide, azathioprine, methotrexate, mycophenolate)
- 2. Prescriber is a rheumatologist and patient has a diagnosis of active lupus nephritis (LN)
  - Patient is 5 years of age or older
  - Patient has positive antinuclear antibody (ANA), anti-double-stranded deoxyribonucleic acid (anti-dsDNA), and/or Sjogren's antibody (SSA or SSB)
  - Patient is dependent on corticosteroid therapy OR documented contraindication or intolerance to corticosteroid therapy
  - Patient has a documented treatment failure (at least a 60-day course) or contraindication/intolerance to all of the following:

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- At least one nonsteroidal anti-inflammatory (NSAID) medication (e.g. aspirin, ibuprofen, naproxen, etodolac, meloxicam)
- o At least one antimalarial (e.g. hydroxychloroquine, chloroquine)
- At least one immunomodulator (e.g. cyclophosphamide, azathioprine, methotrexate, mycophenolate)
- Tacrolimus

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