



STANDARD COMMERCIAL DRUG FORMULARY
PRIOR AUTHORIZATION GUIDELINES

CANNABIDIOL

Generic	Brand	HICL	GCN	Medi-Span	Exception/Other
CANNABIDIOL	EPIDIOLEX	45006		GPI-10 (7260001700)	

GUIDELINES FOR USE

INITIAL CRITERIA (NOTE: FOR RENEWAL CRITERIA SEE BELOW)

1. Does the patient have a diagnosis of seizures associated with Dravet syndrome and meet **ALL** of the following criteria?
 - The patient is 1 year of age or older
 - Therapy is prescribed by or given in consultation with a neurologist
 - The patient had a trial of or contraindication to clobazam **AND** valproic acid derivative

If yes, **approve for 12 months by HICL or GPI-10.**
If no, continue to #2.

2. Does the patient have a diagnosis of seizures associated with Lennox-Gastaut syndrome and meet **ALL** of the following criteria?
 - The patient is 1 year of age or older
 - Therapy is prescribed by or given in consultation with a neurologist
 - The patient had a trial of or contraindication to **TWO** of the following: clobazam, valproic acid derivative, topiramate, lamotrigine

If yes, **approve for 12 months by HICL or GPI-10.**
If no, continue to #3.

3. Does the patient have a diagnosis of seizures associated with tuberous sclerosis complex and meet **ALL** of the following criteria?
 - The patient is 1 year of age or older
 - Therapy is prescribed by or given in consultation with a neurologist
 - The patient had a trial of or contraindication to **TWO** antiepileptic medications (e.g. valproic acid derivatives, clobazam, topiramate, lamotrigine)

If yes, **approve for 12 months by HICL or GPI-10.**
If no, do not approve.
DENIAL TEXT: See the initial denial text at the end of the guideline.

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CANNABIDIOL

INITIAL CRITERIA (CONTINUED)

INITIAL DENIAL TEXT: *Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.

Our guideline named **CANNABIDIOL (Epidiolex)** requires the following rule(s) be met for approval:

- A. You have ONE of the following diagnoses:
1. Seizures associated with Dravet syndrome (type of seizures that are hard to control starting in infants)
 2. Seizures associated Lennox-Gastaut syndrome (condition where you keep getting seizures starting in childhood)
 3. Seizures associated tuberous sclerosis complex (a genetic disorder which causes the growth of numerous noncancerous (benign) tumors in many parts of the body)
- B. **If you have seizures associated with Dravet syndrome, approval also requires:**
1. You are 1 year of age or older
 2. Therapy is prescribed by or given in consultation with a neurologist (nerve doctor)
 3. You have previously tried clobazam AND valproic acid derivative, unless there is a medical reason why you cannot (contraindication)
- C. **If you have seizures associated with Lennox-Gastaut syndrome, approval also requires:**
1. You are 1 year of age or older
 2. Therapy is prescribed by or given in consultation with a neurologist (nerve doctor)
 3. You have previously tried TWO of the following, unless there is a medical reason why you cannot (contraindication): clobazam, valproic acid derivative, topiramate, lamotrigine
- D. **If you have seizures associated with tuberous sclerosis complex, approval also requires:**
1. You are 1 year of age or older
 2. Therapy is prescribed by or given in consultation with a neurologist (nerve doctor)
 3. You have previously tried TWO anti-epileptic medications (drugs to treat seizures) such as clobazam, valproic acid derivative, topiramate, lamotrigine, unless there is a medical reason why you cannot (contraindication)

Your doctor told us [INSERT PT SPECIFIC INFO PROVIDED]. We do not have information showing you [INSERT UNMET CRITERIA]. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

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CANNABIDIOL

GUIDELINES FOR USE (CONTINUED)

RENEWAL CRITERIA

- 1. Does the patient have a diagnosis of seizures associated with Dravet syndrome, Lennox-Gastaut syndrome, OR tuberous sclerosis complex?

If yes, **approve for 12 months by HICL or GPI-10.**

If no, do not approve.

RENEWAL DENIAL TEXT: *Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.

Our guideline named **CANNABIDIOL (Epidiolex)** requires the following rule to be met for renewal:

A. You have ONE of the following diagnoses:

- 1. Seizures associated with Dravet syndrome (type of seizures that are hard to control starting in infants)
- 2. Seizures associated Lennox-Gastaut syndrome (condition where you keep getting seizures starting in childhood)
- 3. Seizures associated tuberous sclerosis complex (a genetic disorder which causes the growth of numerous noncancerous (benign) tumors in many parts of the body)

Your doctor told us [INSERT PT SPECIFIC INFO PROVIDED]. We do not have information showing you [INSERT UNMET CRITERIA]. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

RATIONALE

For further information please refer to the Prescribing Information and/or Drug Monograph for Epidiolex.

REFERENCES

- Epidiolex [Prescribing Information]. Carlsbad, CA: Greenwich Biosciences, Inc.; July 2020.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A

Commercial Effective: 01/01/21

Created: 10/18

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P&T Approval: 10/20