Icosapent ethyl (Vascepa)

Notes:

· Quantity limits: Yes

<u>Initiation (new start) criteria</u>: Non-formulary **icosapent ethyl (Vascepa)** will be covered on the prescription drug benefit for when the following criteria are met:

Reduction of Risk of Cardiovascular Disease (subcategorized into established cardiovascular disease and diabetes)

Established cardiovascular disease

- Documented established cardiovascular disease* AND-
- Age 45 years or older AND-
- Receiving maximally tolerated statin therapy or rationale as to why member cannot take a statin is provided - AND-
- Fasting triglycerides (TG) 150-499 mg/dL within the last 3 months AND-
- Low-density lipoproteins (LDL) 41-100 mg/dL within the last 3 months
- * Established cardiovascular disease:
 - 1) Documented coronary artery disease (CAD)
 - a. Documented multi-vessel CAD (> 50% stenosis)
 - b. Documented prior MI
 - c. Hospitalization for high-risk non-ST elevation ACS (NSTE-ACS)
 - 2) Documented cerebrovascular or carotid disease
 - a. Documented prior ischemic stroke
 - b. Symptomatic carotid artery disease with ≥ 50% carotid arterial stenosis
 - c. Asymptomatic carotid artery disease with ≥ 70% stenosis per angiography
 - d. History of carotid revascularization
 - 3) Documented peripheral arterial disease (PAD)
 - a. Ankle-brachial index (ABI) < 0.9 with symptoms of intermittent claudication
 - b. History of aorto-iliac or peripheral arterial intervention

Diabetes

- Diagnosis of diabetes mellitus and one additional cardiovascular risk factor** AND-
- Age 50 years or older AND-
- Receiving maximally tolerated statin therapy or rationale as to why member cannot take a statin is provided - AND-
- Fasting triglycerides (TG) 150-499 mg/dL within the last 3 months AND-
- Low-density lipoproteins (LDL) 41-100 mg/dL within the last 3 months

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Revised: 12/10/20 Effective: 02/18/21



Icosapent ethyl (Vascepa)

**Cardiovascular risk factors:

- 1) Men > 55 years of age and women > 65 years of age
- 2) Cigarette smoker
 3) Hypertension (BP > 140/90) or on antihypertensive medications
- 4) HDL \leq 40 mg/dL for men or \leq 50 mg/dL for women
- 5) Hs-CRP > 0.3 mg/dL
- 6) Renal dysfunction (CrCl 30-59 mL/min)
- 7) Retinopathy
- 8) Micro- or macroalbuminuria
- 9) ABI < 0.9 without symptoms of intermittent claudication

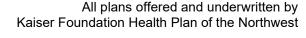
Severe Hypertriglyceridemia

- Diagnosis of hypertriglyceridemia (TG > 500 mg/dL), lipid panel drawn within the last 3 months
- Has failure, contraindication, or intolerance to statin therapy AND-
- Has failure, contraindication, or intolerance to generic fenofibrate or gemfibrozil AND-
- Has failure, contraindication, or intolerance to OTC omega-3 fatty acid and omega-3acid ethyl esters (generic Lovaza)

Failure = TG is not within normal limits or has not dropped at least 50% from baseline

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Revised: 12/10/20 Effective: 02/18/21





Icosapent ethyl (Vascepa)

<u>Criteria for current Kaiser Permanente members already taking the medication who</u>
<u>have not been reviewed previously</u>: Non-formulary icosapent ethyl (Vascepa) will be
covered on the prescription drug benefit for when the following criteria are met:

Reduction of Risk of Cardiovascular Disease (subcategorized into established cardiovascular disease and diabetes)

Established cardiovascular disease

- Documented established cardiovascular disease* AND-
- Age 45 years or older AND-
- Receiving maximally tolerated statin therapy or rationale as to why member cannot take a statin is provided - AND-
- Fasting triglycerides (TG) 150-499 mg/dL within the last 3 months AND-
- Low-density lipoproteins (LDL) 41-100 mg/dL within the last 3 months
- * Established cardiovascular disease:
 - 4) Documented coronary artery disease (CAD)
 - a. Documented multi-vessel CAD (> 50% stenosis)
 - b. Documented prior MI
 - c. Hospitalization for high-risk non-ST elevation ACS (NSTE-ACS)
 - 5) Documented cerebrovascular or carotid disease
 - a. Documented prior ischemic stroke
 - b. Symptomatic carotid artery disease with \geq 50% carotid arterial stenosis
 - c. Asymptomatic carotid artery disease with ≥ 70% stenosis per angiography
 - d. History of carotid revascularization
 - 6) Documented peripheral arterial disease (PAD)
 - a. Ankle-brachial index (ABI) < 0.9 with symptoms of intermittent claudication
 - b. History of aorto-iliac or peripheral arterial intervention

Diabetes

- Diagnosis of diabetes mellitus and one additional cardiovascular risk factor** AND-
- Age 50 years or older AND-
- Receiving maximally tolerated statin therapy or rationale as to why member cannot take a statin is provided - AND-
- Fasting triglycerides (TG) 150-499 mg/dL within the last 3 months AND-
- Low-density lipoproteins (LDL) 41-100 mg/dL within the last 3 months

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Revised: 12/10/20 Effective: 02/18/21



Icosapent ethyl (Vascepa)

**Cardiovascular risk factors:

- 10) Men > 55 years of age and women > 65 years of age
- 11) Cigarette smoker
- 12) Hypertension (BP ≥ 140/90) or on antihypertensive medications
- 13) HDL < 40 mg/dL for men or < 50 mg/dL for women
- 14) Hs-CRP > 0.3 mg/dL
- 15) Renal dysfunction (CrCl 30-59 mL/min)
- 16) Retinopathy
- 17) Micro- or macroalbuminuria
- 18) ABI < 0.9 without symptoms of intermittent claudication

Severe Hypertriglyceridemia

- Diagnosis of hypertriglyceridemia (TG > 500 mg/dL), lipid panel drawn within the last 3 months
- Has failure, contraindication, or intolerance to statin therapy AND-
- Has failure, contraindication, or intolerance to generic fenofibrate or gemfibrozil AND-
- Has failure, contraindication, or intolerance to OTC omega-3 fatty acid and omega-3acid ethyl esters (generic Lovaza)

Failure = TG is not within normal limits or has not dropped at least 50% from baseline

<u>Criteria for new members entering Kaiser Permanente already taking the</u>
<u>medication who have not been reviewed previously</u>: Non-formulary icosapent ethyl
(Vascepa) will be covered on the prescription drug benefit for when the following criteria are met:

Reduction of Risk of Cardiovascular Disease (subcategorized into established cardiovascular disease and diabetes)

Established cardiovascular disease

- Documented established cardiovascular disease* AND-
- Age 45 years or older AND-
- Receiving maximally tolerated statin therapy or rationale as to why member cannot take a statin is provided - AND-

- 7) Documented coronary artery disease (CAD)
 - a. Documented multi-vessel CAD (> 50% stenosis)
 - b. Documented prior MI
 - c. Hospitalization for high-risk non-ST elevation ACS (NSTE-ACS)

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^{*} Established cardiovascular disease:

Icosapent ethyl (Vascepa)

- 8) Documented cerebrovascular or carotid disease
 - a. Documented prior ischemic stroke
 - b. Symptomatic carotid artery disease with ≥ 50% carotid arterial stenosis
 - c. Asymptomatic carotid artery disease with ≥ 70% stenosis per angiography
 - d. History of carotid revascularization
- 9) Documented peripheral arterial disease (PAD)
 - a. Ankle-brachial index (ABI) < 0.9 with symptoms of intermittent claudication
 - b. History of aorto-iliac or peripheral arterial intervention

Diabetes

- Diagnosis of diabetes mellitus and one additional cardiovascular risk factor** AND-
- Age 50 years or older AND-
- Receiving maximally tolerated statin therapy or rationale as to why member cannot take a statin is provided - AND-

**Cardiovascular risk factors:

- 19) Men > 55 years of age and women > 65 years of age
- 20) Cigarette smoker
- 21) Hypertension (BP > 140/90) or on antihypertensive medications
- 22) HDL < 40 mg/dL for men or < 50 mg/dL for women
- 23) Hs-CRP > 0.3 mg/dL
- 24) Renal dysfunction (CrCl 30-59 mL/min)
- 25) Retinopathy
- 26) Micro- or macroalbuminuria
- 27) ABI < 0.9 without symptoms of intermittent claudication

Severe Hypertriglyceridemia

- Diagnosis of hypertriglyceridemia (TG > 500 mg/dL)
- Has failure, contraindication, or intolerance to statin therapy AND-
- Has failure, contraindication, or intolerance to generic fenofibrate or gemfibrozil AND-
- Has failure, contraindication, or intolerance to OTC omega-3 fatty acid and omega-3acid ethyl esters (generic Lovaza)

Failure = TG is not within normal limits or has not dropped at least 50% from baseline

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