Non-formulary dichlorphenamamide (Keveyis) requires a clinical review before ordering. Appropriateness of therapy will be based on the following criteria:

**Initiation (new start) criteria:** Non-formulary dichlorphenamamide (Keveyis) will be covered for 2 months on the prescription drug benefit when the following criteria are met:

- Prescribed by neurologist with specialty in neuromuscular disorders AND
- Patient is diagnosed with Hyperkalemic or Hypokalemic Periodic Paralysis AND
- Patient is 18 years or older AND
- Patient experiences 1 or more attacks per week as documented by patient and/or neurologist AND
- Potential precipitating factors (including lifestyle and recent medication changes*) have been evaluated with documentation of continued attack rate or severity despite changes to therapy or lifestyle modifications AND
- Adequate trial (at least 2 month) and failure of acetazolamide 500 mg/day or more (unless intolerant) AND
- Patient did NOT experience disease worsening with acetazolamide AND
- Baseline serum potassium is greater than 3.5 mmol/L and bicarbonate is greater than 22 mmol/L

* Note: Medications which affect potassium levels include, but are not limited to, oral potassium, steroids, insulin, and diuretics.

**Continued use criteria (after 2 months of treatment):** Non-formulary dichlorphenamamide (Keveyis) will continue to be covered for 6 months on the prescription drug benefit when the following criteria are met:

- Prescribed by neurologist with specialty in neuromuscular disorders AND
- Patient is diagnosed with Hyperkalemic or Hypokalemic Periodic Paralysis AND
- Patient is 18 years old or older AND
- Patient experienced at least a 50% reduction in paralysis attacks per month OR a severity-weighted attack score of 1 of less, as documented via calendar (sum of attack severity ratings divided by total weeks followed)
Clinical Oversight Review Board (CORB)
Criteria for Prescribing/
Criteria-Based Consultation (CBC) Criteria for Coverage

Dichlorphenamide (Keveyis)

Continued use criteria for stable members: Non-formulary dichlorphenamide (Keveyis) will continue to be covered for 12 months on the prescription drug benefit when the following criteria are met:

- Prescribed by neurologist with specialty in neuromuscular disorders AND
- Patient is diagnosed with Hyperkalemic or Hypokalemic Periodic Paralysis AND
- Patient is 18 years or older AND
- Adequate trial (at least 2 month) and failure of acetazolamide 500 mg/day or more (unless intolerant)