

## RADICAVA ORS (edaravone)

### POLICY

#### I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met, and the member has no exclusions to the prescribed therapy.

##### FDA-Approved Indications

Radicava ORS is indicated for the treatment of amyotrophic lateral sclerosis (ALS).

All other indications are considered experimental/investigational and not medically necessary.

#### II. DOCUMENTATION

Submission of the following information is necessary to initiate the prior authorization review:

Chart notes or medical record documentation supporting use as applicable in section IV and V.

##### A. Initial requests:

1. Chart notes or medical record documentation supporting diagnosis of ALS, disease duration, and baseline documentation of ALS Functional Rating Scale – Revised (ALSFRS-R).

##### B. Continuation requests:

1. Chart notes or medical records documenting response to therapy (e.g., current ALSFRS-R).

#### III. PRESCRIBER SPECIALTIES

This medication must be prescribed by or in consultation with a neurologist, neuromuscular specialist or physician specializing in the treatment of amyotrophic lateral sclerosis (ALS).

#### IV. CRITERIA FOR INITIAL APPROVAL

##### **Amyotrophic lateral sclerosis (ALS)**

Authorization of 6 months may be granted for members when all the following criteria are met:

1. Member is 18 years of age or older
2. Member has a diagnosis of clinically definite or probable ALS
3. Member has a disease duration of 2 years or less
4. Member has a percent-predicted forced vital capacity (%FVC)  $\geq 80\%$
5. Baseline documentation of retained functionality for most activities of daily living [i.e., score of 2 or better on each\* individual item of the ALS Functional Rating Scale – Revised (ALSFRS-R)]
6. Radicava ORS will not be used in combination with other formulations of edaravone (i.e., intravenous)

**\*Note:** the ALSFRS-R is a 12-item questionnaire assessing functional disease progression across four domains including bulbar, fine motor, gross motor, and respiratory. Each item is scored on a five-point ordinal scale from 0 (loss or significant impairment) up to 4 (normal)

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function) with a possible cumulative score of 48. A score of 2 or better on each item would correspond to a minimum ALSFRS-R score of 24.

## V. CONTINUATION OF THERAPY

Authorization of 6 months may be granted for members requesting continuation of therapy when all of the following criteria are met:

1. Member has a diagnosis of clinically definite or probable ALS
2. Member has a disease duration of 2 years or less
3. Member has a percent-predicted forced vital capacity (%FVC)  $\geq 80\%$
4. Member has responded to therapy compared to pretreatment baseline with disease stability or mild progression indicating a slowing of decline on the ALSFRS-R (patient has not experienced rapid disease progression while on therapy)
5. Member does not have a cumulative score on the ALSFRS-R of  $\leq 3$  (The cumulative possible score on the ALSFRS-R is 48; a cumulative score of 3 indicates loss/significant impairment [i.e., item score of zero] in nine or more items on the 12-item questionnaire)
6. Member has not experienced any unacceptable toxicity from the drug. Examples of unacceptable toxicity are hypersensitivity reactions (e.g., redness, wheals, and erythema multiforme), anaphylaxis (e.g., urticaria, decreased blood pressure, and dyspnea), and sulfite allergic reactions.
7. Patient's respiratory status does not require invasive ventilation or tracheostomy
8. Radicava ORS will not be used in combination with other formulations of edaravone (i.e., intravenous)

## VI. QUANTITY LIMIT

Radicava ORS has a quantity limit of 50 ml per 28 days, with post-limit for initial treatment cycle of 70 ml per 28 days.

Indication	Dose
ALS	<p>105 mg (5 mL) taken orally or via feeding tube in the morning after overnight fasting</p> <ul style="list-style-type: none"> <li>Initial treatment cycle: daily dosing for 14 days, followed by a 14-day drug-free period</li> <li>Subsequent treatment cycles: daily dosing for 10 days out of 14-day periods, followed by 14-day drug-free periods</li> </ul> <p>Switching from Radicava to Radicava ORS:</p> <ul style="list-style-type: none"> <li>Patients treated with 60 mg of Radicava intravenous infusion may be switched to 105 mg (5 mL) Radicava ORS using the same dosing frequency. Upon switching to Radicava ORS, patients should follow dosing recommendations with regards to food consumption.</li> </ul>

## VII. REFERENCES

1. Radicava [package insert]. Jersey City, NJ; Mitsubishi Tanabe Pharma America, Inc; May 2022. Accessed December 2022.
2. Tanaka M, Sakata T, Palumbo J, et al. A 24-Week, Phase III, Double-Blind, Parallel-Group Study of Edaravone (MCI-186) for Treatment of Amyotrophic Lateral Sclerosis (ALS). *Neurology* April 5, 2016 vol. 86 no. 16 Supplement P3.189.
3. Cedarbaum JM, Stambler N, Malta E, et al. The ALSFRS-R: a revised ALS functional rating scale that incorporates assessments of respiratory function. BDNF ALS Study Group (Phase III). *J Neurol Sci.* 1999 Oct 31;169(1-2):13-21.
4. Miller RG, Jackson CE, Kasarskis EJ, et al. Practice parameter update: the care of the patient with amyotrophic lateral sclerosis: drug, nutritional, and respiratory therapies (an evidence-based review): report of the Quality Standards Subcommittee of the American Academy of Neurology. *Neurology.* 2009 Oct 13;73(15):1218-26.
5. Kinsley L, Siddique T. Amyotrophic Lateral Sclerosis Overview. GeneReviews. February 12, 2015; <http://www.ncbi.nlm.nih.gov/books/NBK1450/>.
6. Hardiman O, van den Berg LH, Kiernan MC. Clinical diagnosis and management of amyotrophic lateral sclerosis. *Nat Rev Neurol.* 2011 Oct 11;7(11):639-49.
7. Costa J, Swash M, de Carvalho M. Awaji criteria for the diagnosis of amyotrophic lateral sclerosis: a systematic review. *Arch Neurol.* 2012 Nov;69(11):1410-6.
8. Writing Group; Edaravone (MCI-186) ALS 19 Study Group. Safety and efficacy of edaravone in well defined patients with amyotrophic lateral sclerosis: a randomised, double-blind, placebo-controlled trial. *Lancet Neurol.* 2017;16(7):505-512. doi:10.1016/S1474-4422(17)30115-1.