Reviewed: 6/2020, 5/2021, 5/2022, 1/2023, 1/2024, 1/2025

Scope: Medicaid

# Xcopri (cenobamate)

## **POLICY**

## I. CRITERIA FOR INITIAL APPROVAL

An authorization may be granted when all the following criteria are met:

- The patient is at least 18 years of age
- The prescriber is a neurologist or prescribed in consultation with a neurologist
- The patient does not have Familial Short QT syndrome
- Prescriber is aware and counseled the patient on the potential for the side effect of Drug Reaction with Eosinophilia and Systemic Symptoms (DRESS)/Multiorgan Hypersensitivity
- The patient has a diagnosis of partial onset seizures
- Documentation that the patient has had a trial of at least 2 other antiepileptic drugs titrated to an
  appropriate maintenance dose or failure of at least two other antiepileptic drugs due to intolerable
  side effects
- Documentation of seizure frequency

# II. CRITERIA FOR CONTINUATION OF THERAPY

- The prescriber is a neurologist or prescribed in consultation with a neurologist
- Documentation of seizure frequency
- Documented decrease in the amount of seizure frequency

## III. QUANTITY LIMIT

- Xcopri 200mg tab, 100-150mg pak (250mg daily dose) and the 150-200mg pak (350mg daily dose): 2 tablets per day
- Xcopri 25mg, 50mg, 100mg, 150mg tab: 1 tablet per day
- Xcopri 12.5-25mg, 50-100mg, 150-200mg titration packs: 1 tablet per day

## IV. COVERAGE DURATION

• 12 months

## V. REFERENCES

1. Xcopri (cenobamate) [package insert]. Paramus, NJ: SK Life Science Inc; October 2023.



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