

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Eslicarbazepine (Aptiom)

Notes:

- Quantity Limits: Yes
- Antiepileptic medications for treatment of partial (focal) onset seizures include: levetiracetam, carbamazepine, lamotrigine, oxcarbazepine, valproic acid product, felbamate, gabapentin, phenytoin, pregabalin, topiramate, valproate, zonisamide, lacosamide

Initiation (new start) criteria, and criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously: Non-formulary **eslicarbazepine (Aptiom)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Prescribed by a neurologist
- Patient has a diagnosis of partial-onset (focal) seizures
- Patient has failed an adequate trial of, or has contraindications to at least five other antiepileptic medications

Criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously: Non-formulary **eslicarbazepine (Aptiom)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Patient has a diagnosis of partial-onset (focal) seizures
- Patient has failed an adequate trial of, or has contraindications to at least five other antiepileptic medications

Continued use criteria for patients previously approved per the above criteria who are currently stable on the medication: Non-formulary **eslicarbazepine (Aptiom)** will continue to be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Continues to be prescribed by a neurologist
- Sustained improvement in seizure control (frequency and/or severity) since starting eslicarbazepine as documented by neurologist