Clinical Oversight Review Board (CORB) Criteria for Prescribing/ Criteria-Based Consultation (CBC) Criteria for Coverage

## Satralizumab (Enspryng)

## Notes:

- Quantity Limits: Yes
- ^ Examples of severe breakthrough relapse include but are not limited to:
  - Hospitalization for neurologic deficits from NMOSD relapse (eg quadriparesis or paraparesis)
  - o Optic neuritis severity (hand motion only or worse) confirmed by an ophthalmologist

Non-Formulary **satralizumab (Enspryng)** requires a clinical review. Appropriateness of therapy will be based on the following criteria:

Initiation (new start) criteria, criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously, and criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously: Non-Formulary satralizumab (Enspryng) will be covered on the prescription drug benefit for <u>12 months</u> when the following criteria are met:

- Patient has a confirmed diagnosis of neuromyelitis optica spectrum disorder (NMOSD/NMO)
- Patient is 18 years of age or older
- Prescribed by neurologist with specialty in Multiple Sclerosis or Neuroimmunology
- Patient is anti-aquaporin-4 (AQP4) antibody positive
- Patient has tried and failed rituximab, as demonstrated with either of the following:
  - Severe breakthrough relapse<sup>^</sup> while on rituximab for at least 6 months not attributed to rapid steroid discontinuation **OR**
  - Recurrent moderate breakthrough relapses after 6-month trial of rituximab in combination with maximum tolerated doses of either mycophenolate mofetil or azathioprine **OR**
  - Patient has a severe intolerance or contraindication to rituximab

<u>Continued use criteria for patients previously approved per the above criteria who</u> <u>are currently stable on the medication</u>: Non-Formulary satralizumab (Enspryng) will continue to be covered on the prescription drug benefit for <u>12 months</u> when the following criteria are met:

- Prescribed by neurologist with specialty in Multiple Sclerosis or Neuroimmunology
- Patient is responding positively to therapy and has experienced improvement or stabilization of disease, as documented by neurologist.

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Revised: 06/13/24 Effective: 08/15/24 All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest

