

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

benralizumab (Fasenra)

Initiation (new start) criteria: Formulary **benralizumab (Fasenra)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Prescriber is an Allergist or Pulmonologist
- Patient is at least 6 years of age
- Patient has diagnosis of asthma; type 2, eosinophilic phenotype defined as: An eosinophil count of at least 150 cells/microliter ($0.15 \times 10^9/L$) in the past 6 weeks **OR** an eosinophil count of at least at least 300 cells/microliter ($0.3 \times 10^9/L$) in the past year.
- Patient has uncontrolled asthma defined as any of the following:
 - i. Two or more exacerbations in the past 12 months requiring corticosteroids for 3 days or more
 - ii. One or more asthma exacerbation(s) leading to hospitalization in the past 12 months
 - iii. Asthma Control Test (ACT) is consistently less than 20 over past 12 month
 - iv. Dependence on daily oral corticosteroids for asthma control.
- Patient has uncontrolled asthma despite good adherence (at least 75% over the past 3 months) to a regimen containing: a high dose inhaled corticosteroid (ICS), AND at least one additional asthma controller medication, such as a long-acting beta₂ agonist (LABA); or leukotriene receptor antagonist (LRTI [e.g., montelukast]); or long-acting muscarinic antagonist (LAMA); OR daily oral corticosteroids.
- Benralizumab is to be used in combination with a high dose ICS and at least one additional asthma controller medication, such as a LABA; or LRTI; or LAMA; OR daily oral corticosteroids.
- Benralizumab is NOT used in combination with any of the following: mepolizumab (Nucala), dupilumab (Dupixent), reslizumab (Cinqair), tezepelumab-ekko (Tezspire), or omalizumab (Xolair).

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

- Prescriber is an Allergist or Pulmonologist
- Patient is at least 6 years of age
- Patient has diagnosis of asthma
- Benralizumab is used in combination with a high dose ICS and at least one additional asthma controller medication, such as a LABA; or LRTI; or LAMA; OR daily oral corticosteroids.
- Benralizumab is NOT used in combination with any of the following: mepolizumab (Nucala), dupilumab (Dupixent), reslizumab (Cinqair), tezepelumab-ekko (Tezspire), or omalizumab (Xolair).

Continued use criteria (12 months after initiation): Formulary **benralizumab (Fasenra)** will continue to be covered on the prescription drug benefit when the following criteria are met:

- Evidence of improvement from baseline documented by any of the following:
 - i. Fewer asthma exacerbations (defined as periods of worsening asthma that requires treatment with systemic corticosteroids,;
 - ii. Lowered daily dose of oral corticosteroids;
 - iii. An increase of at least 3 points on the asthma control test (ACT);
 - iv. Fewer asthma exacerbations, lowered daily dose of oral corticosteroids, or improved quality of life attested by the prescriber.