

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

## Eplontersen (Wainua)

### Notes:

- Quantity Limits: Yes

Non-Formulary **eplontersen (Wainua)** 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 **eplontersen (Wainua)** will be covered on the prescription drug benefit for 12 months when the following criteria are met:

- Prescribed by a neurologist with specialty in neuromuscular disorders
- Patient is 18 years or older
- Patient has a diagnosis of Neuropathic Heredofamilial Amyloidosis with polyneuropathy that is thought to be primarily due to amyloidosis
- Documented confirmed transthyretin (TTR) mutation from genetic testing
- Objective weakness in motor strength exam consistent with diagnosis and with confirmation via electrodiagnostic studies
- Karnofsky performance status score of 50 or higher
- Patient has not had a prior liver transplant
- Patient has failed an adequate trial of, or patient has an allergy or intolerance to vutrisiran (Amvuttra)

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

- Patient has not experienced a significant clinical decline, as documented by neurologist
- Patient has a Karnofsky performance status score of 31 or higher

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