

Criteria Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Brivaracetam (Briviact®)

Non-formulary **brivaracetam (Briviact®)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescriber is a Neurologist

-AND-

- Diagnosis of partial-onset seizures on Problem List

-AND-

- Inadequate response or intolerance to levetiracetam **AND** at least 1 other anticonvulsant indicated for partial-onset seizures

-AND-

- Receiving concomitant treatment with at least 2 antiepileptic's

-OR-

- * *New Member*: after trial of levetiracetam

-OR-

- Dose change only: Patient previously met criteria and is already taking the drug.

Note:

Antiepileptics for treatment of partial-onset seizures include:

carbamazepine
felbamate
gabapentin
lamotrigine
levetiracetam
phenytoin

pregabalin
tiagabine
topiramate
oxcarbazepine
valproate
zonisamide