

Criteria Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

Cannabidiol (Epidiolex)

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

Criteria for initial coverage (6 months)

- Prescribed by neurologist **AND**
- Age 2 years or older **AND**
- Prescribed for Dravet Syndrome or Lennox-Gastaut syndrome **AND**
- Refractory to at least 2 anti-epileptic drugs (AEDs) that are appropriate for diagnosis*; or patient has intolerance or contraindication **AND**
- No significant hepatic impairment (ALT or AST greater than 3 times upper limit of normal with bilirubin greater than 2 times upper limit of normal) **AND**
- Not using other cannabis or cannabis derivatives

Continued use criteria: Non-formulary **cannabidiol (Epidiolex)** will continue to be covered for 12 months on the prescription drug benefit when the following criteria are met:

- Continued to be prescribed by neurologist for Dravet Syndrome or Lennox-Gastaut syndrome **AND**
- Age 2 years or older **AND**
- Sustained improvement in seizure control (frequency and/or severity) since starting Epidiolex as assessed and documented by neurologist **AND**
- No significant hepatic impairment (ALT or AST greater than 3x upper limit of normal with bilirubin greater than 2 times upper limit of normal) **AND**
- Not using other cannabis or cannabis derivatives

* **AEDs for Lennox Gastaut:** felbamate, valproate, topiramate, lamotrigine, rufinamide, clobazam, clonazepam, zonisamide; **AEDs for Dravet Syndrome:** valproate, clobazam, levetiracetam, topiramate, zonisamide, clonazepam