SPECIALTY GUIDELINE MANAGEMENT

EPIDIOLEX (cannabidiol)

POLICY

I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indications¹

Epidiolex is indicated for the treatment of seizures associated with Lennox-Gastaut syndrome or Dravet syndrome in patients 2 years of age and older.

All other indications are considered experimental/investigational and are not a covered benefit.

II. CRITERIA FOR INITIAL APPROVAL

Seizures associated with Lennox-Gastaut syndrome or Dravet syndrome

Authorization of 12 months may be granted for treatment of seizures associated with Lennox-Gastaut syndrome or Dravet syndrome.

III. CONTINUATION OF THERAPY

All members (including new members) requesting authorization for continuation of therapy must meet all initial authorization criteria.

IV. REFERENCES

1. Epidiolex [package insert]. Carlsbad, CA: Greenwich Biosciences, Inc.; June 2018.

Epidiolex

© 2018 CVS Caremark. All rights reserved.

This document contains confidential and proprietary information of CVS Caremark and cannot be reproduced, distributed or printed without written permission from CVS Caremark. This document contains prescription brand name drugs that are trademarks or registered trademarks of pharmaceutical manufacturers that are not affiliated with CVS Caremark.

