AETNA BETTER HEALTH®							
Coverage Policy/Guideline							
Name:	clobazam, r	ufinamide, Sympazan	Page:	1 of 2			
Effective Date: 4/1/2025			Last Review Date:	1/17/2025			
Applies to:	□Illinois	⊠Florida Kids	⊠New Jersey	/			
	$\square$ Maryland	⊠Pennsylvania Kids	□Virginia				

### Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for clobazam, rufinamide, and Sympazan under the patient's prescription drug benefit.

## **Description:**

## **FDA-approved Indications**

#### **Banzel**

Banzel (rufinamide) is indicated for adjunctive treatment of seizures associated with Lennox-Gastaut Syndrome in pediatric patients 1 year of age and older and in adults.

#### Onfi

Onfi (clobazam) is indicated for the adjunctive treatment of seizures associated with Lennox-Gastaut Syndrome (LGS) in patients 2 years of age or older.

## Sympazan

Sympazan is indicated for the adjunctive treatment of seizures associated with Lennox-Gastaut Syndrome (LGS) in patients 2 years of age or older.

### Compendial Uses

Onfi, Sympazan: Seizures associated with Dravet Syndrome

## **Applicable Drug List:**

rufinamide clobazam Sympazan

## Policy/Guideline:

# Coverage Criteria

## **Dravet Syndrome**

Authorization may be granted when the requested drug is being prescribed for the treatment of seizures associated with Dravet syndrome when the following criteria is met:

The request is for Onfi (clobazam) OR Sympazan (clobazam).

### **Lennox-Gastaut Syndrome**

Authorization may be granted when the requested drug is being prescribed for adjunctive treatment of seizures associated with Lennox-Gastaut Syndrome when ONE of the following criteria are met:

- The request is for Banzel (rufinamide) and the following criteria is met:
  - o The patient is 1 year of age or older.
- The request is for Onfi (clobazam) OR Sympazan (clobazam) and the following criteria is met:
  - The patient is 2 years of age or older

	TER HEALTH®	<b>♥ae</b>	etna <sup>®</sup>				
Coverage Policy/Guideline							
Name:	clobazam,	rufinamide, Sympazan	Page:	2 of 2			
Effective Da	te: 4/1/2025		Last Review Date:	1/17/2025			
Applies to:	□Illinois	⊠Florida Kids	⊠New Jersey	/			
	□Maryland	⊠Pennsylvania Kids	□Virginia				

## **Continuation of Therapy**

## **Dravet Syndrome**

Authorization may be granted when the requested drug is being prescribed for adjunctive treatment of seizures associated with Dravet syndrome when ALL of the following criteria are met:

- The request is for Onfi (clobazam) OR Sympazan (clobazam).
- The patient has achieved and maintained positive clinical response as evidenced by reduction in frequency or duration of seizures compared with seizure activity prior to initiation of the requested drug.

## **Lennox-Gastaut Syndrome**

Authorization may be granted when the requested drug is being prescribed for adjunctive treatment of seizures associated with Lennox-Gastaut syndrome when ALL of the following criteria are met:

- The patient meets ONE of the following:
  - The request is for Banzel (rufinamide) and the following criteria is met:
    - The patient is 1 year of age or older.
  - The request is for Onfi (clobazam) OR Sympazan (clobazam) and the following criteria is met:
    - The patient is 2 years of age or older.
    - The patient has achieved and maintained positive clinical response as evidenced by reduction in frequency or duration of seizures compared with seizure activity prior to initiation of the requested drug.

## **Approval Duration and Quantity Restrictions:**

Approval: 12 months

Quantity Level Limit: Reference Formulary for drug specific quantity level limits

### **References:**

- 1. Banzel [package insert]. Nutley, NJ: Eisai Inc.; December 2022.
- 2. Onfi [package insert]. Deerfield, IL: Lundbeck; March 2024.
- 3. Sympazan [package insert]. Warren, NJ: Aquestive Therapeutics.; March 2024.
- 4. Lexicomp Online, AHFS DI (Adult and Pediatric) Online. Waltham, MA: UpToDate, Inc.; 2024. https://online.lexi.com. Accessed May 15, 2024.
- 5. Micromedex® (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: https://www.micromedexsolutions.com/ (cited: 05/15/2024).
- 6. Wirrell EC, Hood V, Knupp KG, et al. International Consensus on Diagnosis and Management of Dravet Syndrome. Epilepsia. 2022;63(7):1761-1777.