

Reference number(s)

3982-A

Specialty Guideline Management Fintepla

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Fintepla	fenfluramine

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

Fintepla is indicated for the treatment of seizures associated with Dravet syndrome (DS) and Lennox-Gastaut syndrome (LGS) in patients 2 years of age and older.

All other indications are considered experimental/investigational and not medically necessary.

Coverage Criteria

Seizures Associated with Dravet Syndrome and Lennox-Gastaut Syndrome¹

Authorization of 12 months may be granted for treatment of seizures associated with Dravet syndrome or Lennox-Gastaut syndrome in members 2 years of age and older.

Continuation of Therapy

Authorization of 12 months may be granted for continuation of treatment in members (including new members) 2 years of age or older requesting reauthorization for an indication listed in the coverage criteria when the member has achieved or maintained a positive clinical response (e.g., decrease in seizure frequency).

Other

Due to well documented potential for serious adverse effects, phentermine and fenfluramine are not recommended to be used concurrently. Member cannot use the requested medication concomitantly with phentermine.

References

1. Fintepla [package insert]. Smyrna, GA: UCB, Inc.; April 2025.