

## 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 Indications

Epidiolex is indicated for the treatment of seizures associated with Lennox-Gastaut syndrome (LGS), Dravet syndrome (DS), or tuberous sclerosis complex (TSC) in patients 1 year of age and older.

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

##### II. CRITERIA FOR INITIAL APPROVAL

###### A. 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 in members 1 year of age and older.

###### B. Seizures associated with Tuberous Sclerosis Complex

Authorization of 12 months may be granted for treatment of seizures associated with tuberous sclerosis complex in members 1 year of age and older.

##### III. CONTINUATION OF THERAPY

Authorization of 12 months may be granted for continuation of treatment in members (including new members) 1 year of age and older requesting reauthorization for an indication listed in Section II when the member has achieved or maintained a positive clinical response (e.g., decrease in seizures).

##### IV. REFERENCE

1. Epidiolex [package insert]. Palo Alto, CA: Jazz Pharmaceuticals, Inc.; March 2024.