Reference number(s)
3349-A

SPECIALTY GUIDELINE MANAGEMENT

BEOVU (brolucizumab-dbll)

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
Beovu is indicated for:
1. Neovascular (wet) age-related macular degeneration
2. Diabetic macular edema

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

II. CRITERIA FOR INITIAL APPROVAL

A. Neovascular (Wet) Age-Related Macular Degeneration
Authorization of 6 months may be granted for treatment of neovascular (wet) age-related macular degeneration.

B. Diabetic Macular Edema
Authorization of 6 months may be granted for treatment of diabetic macular edema.

III. CONTINUATION OF THERAPY

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in Section II when the member has demonstrated a positive clinical response to therapy (e.g., improvement or maintenance in best corrected visual acuity [BCVA] or visual field, or a reduction in the rate of vision decline or the risk of more severe vision loss).

IV. REFERENCES

1. Beovu [package insert]. East Hanover, NJ: Novartis Pharmaceuticals Corporation; September 2023.
2. Dugel PU, Koh A, Ogura Y et al. HAWK and HARRIER: Phase 3, Multicenter, Randomized, Double-Masked Trials of Brolucizumab for Neovascular Age-Related Macular Degeneration. Ophthalmology. 2020; 127:72-84.