

# PHARMACY POLICY STATEMENT

## **Georgia Medicaid**

| DRUG NAME    | Zilbrysq (zilucoplan)        |
|--------------|------------------------------|
| BENEFIT TYPE | Pharmacy                     |
| STATUS       | Prior Authorization Required |

Zilbrysq, approved by the FDA in 2023, is a C5 complement inhibitor indicated for the treatment of generalized myasthenia gravis (gMG) in adult patients who are antiacetylcholine receptor (AChR) antibody positive. Approval was based on results of the Phase 3 RAISE study.

Myasthenia gravis is an autoimmune disorder affecting the neuromuscular junction, characterized by muscle weakness and fatigue. The cause is an antibody-mediated immunologic attack directed at proteins in the postsynaptic membrane of the neuromuscular junction, most commonly the acetylcholine receptor (90%). Autoantibodies attack the AChR, blocking or destroying the receptors and damaging the neuromuscular junction, which impairs neuromuscular transmission and prevents muscles from contracting, as acetylcholine is unable to activate its receptor. Ocular motility, swallowing, speech, mobility, and respiratory function can all be affected.

Pyridostigmine, an acetylcholinesterase inhibitor, is the initial drug of choice prescribed for MG. It eases symptoms by slowing the breakdown of acetylcholine. If control is inadequate, immunosuppressive treatment is added, such as prednisone and/or azathioprine. Other drugs are used in cases of severe or refractory MG or myasthenic crisis, which is an emergency.

Zilbrysq (zilucoplan) will be considered for coverage when the following criteria are met:

### **Myasthenia Gravis**

For **initial** authorization:

- Member is at least 18 years of age; AND
- 2. Medication must be prescribed by or in consultation with a neurologist; AND
- 3. Member has a documented diagnosis of MGFA class II-IV myasthenia gravis (see appendix); AND
- 4. Lab result in chart notes shows the member is seropositive for AChR antibodies; AND
- 5. Member has tried and failed at least 1 conventional therapy:
  - A. Pyridostigmine
  - B. Corticosteroid for at least 3 months
  - C. Non-steroid immunosuppressant (e.g., azathioprine) for at least 6 months; AND
- 6. Member has received meningococcal vaccine.
- 7. Dosage allowed/Quantity limit: SubQ once daily based on actual body weight:
  - a) <56 kg: 16.6 mg
  - b) 56 to <77 kg: 23 mg
  - c) 77 kg or greater: 32.4 mg
  - QL: 28 syringes per 28 days

If all the above requirements are met, the medication will be approved for 6 months.

DCH Approved Template on: 12/23/2020



#### For reauthorization:

1. Chart notes must document clinically meaningful improvement in symptom severity and daily functioning compared to pre-treatment baseline (e.g., improved MG-ADL or QMG scores).

If all the above requirements are met, the medication will be approved for an additional 12 months.

CareSource considers Zilbrysq (zilucoplan) not medically necessary for the treatment of conditions that are not listed in this document. For any other indication, please refer to the Off-Label policy.

| DATE       | ACTION/DESCRIPTION               |  |
|------------|----------------------------------|--|
| 10/24/2023 | New policy for Zilbrysq created. |  |

#### Appendix:

| MG Foundation of America (MGFA) Clinical Classification |   |
|---|---|
| Class I   | any ocular weakness; all other muscle strength is normal  |
| Class II  | mild weakness affecting other than ocular muscles; may also have ocular weakness at any level     |
| Class III   | moderate weakness affecting other than ocular muscles; may also have ocular weakness at any level |
| Class IV  | severe weakness affecting other than ocular muscles; may also have ocular weakness at any level   |
| Class V   | defined by intubation, with or without mechanical ventilation                                     |

#### References:

- 1. Zilbrysg [prescribing information]. UCB, Inc.; 2023.
- 2. Narayanaswami P, Sanders DB, Wolfe G, et al. International Consensus Guidance for Management of Myasthenia Gravis: 2020 Update. *Neurology*. 2021;96(3):114-122. doi:10.1212/WNL.000000000011124
- 3. Sanders DB, Wolfe GI, Benatar M, et al. International consensus guidance for management of myasthenia gravis: Executive summary. *Neurology*. 2016;87(4):419-425. doi:10.1212/WNL.0000000000002790
- 4. Alhaidar MK, Abumurad S, Soliven B, Rezania K. Current Treatment of Myasthenia Gravis. *J Clin Med.* 2022;11(6):1597. Published 2022 Mar 14. doi:10.3390/jcm11061597
- 5. Howard JF Jr, Bresch S, Genge A, et al. Safety and efficacy of zilucoplan in patients with generalis ed myasthenia gravis (RAISE): a randomised, double-blind, placebo-controlled, phase 3 study. *Lancet Neurol.* 2023;22(5):395-406. doi:10.1016/S1474-4422(23)00080-7

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