

Pharmacy Drug Policy & Procedure

Policy Name: Skyclarys (omaveloxolone) Policy#: 3195P

Purpose of the Policy

The purpose of this policy is to define coverage criteria for Skyclarys (omaveloxolone)

Statement of the Policy

Health Alliance Medical Plans will approve the use of Skyclarys (omaveloxolone) under the pharmacy benefit if the following criteria are met.

Criteria

1. Coverage Criteria

- 1.1 Documented diagnosis of Friedreich ataxia confirmed by BOTH neuroimaging as well as genetic testing
 - Magnetic resonance imaging (MRI) of the brain and spinal cord are recommended to confirm diagnosis
 - Genetic testing to confirm triplet repeat in the first intron of the frataxin (FXN) gene is required
- 1.2 Age 16-40 years old
- 1.3 Prescribed by or in consultation with a neurologist (nervous system doctor)
- 1.4 Documentation of baseline modified Friedreich's Ataxia Rating Scale (mFARS) score of 20-80
- 1.5 Patient is currently able to move independent of mobile aids or able to complete most activities of daily living (ADLs) independently
- 1.6 Clinical review of documentation confirming that patient has met all of the above requirements for treatment completed by both a pharmacist and medical director

2. Exclusion Criteria

- 2.1 Evidence of severe pes cavus (foot deformities)
 - Participants in clinical trials with severe pes cavus was limited and clinical improvement in this patient population has not been established
- 2.2 Documentation of severe liver impairment (Child-Pugh C)
- 2.3 Clinically significant heart disease or uncontrolled diabetes

3. Managed Dose Limit

3.1 90 capsules per 30 days

4. Approval Period

- 4.1 Initial: 12 months
- 4.2 Reauthorization: 12 months with documented medical assessment that the disease progression has been slowed or improvement in mFARS

CPT Codes	
HCPCS Codes	

References

- 1. Skyclarys (omaveloxolone) [prescribing information]. Cambridge, MA: Reata Pharmaceuticals Inc; January 2024.
- 2. Lynch DR, Chin MP, Delatycki MB, et al. Safety and efficacy of omaveloxolone in Friedreich ataxia (MOXIe Study). Ann Neurol. 2021;89 (2):212-225.
- 3. Lynch DR, Chin MP, Boesch S, et al. Efficacy of Omaveloxolone in Friedreich's Ataxia: Delayed-Start Analysis of the MOXIe Extension. Mov Disord. 2023 Feb;38 (2):313-320.
- 4. Abeti R, Baccaro A, Esteras N, Giunti P. Novel Nrf2-inducer prevents mitochondrial defects and oxidative stress in Friedreich's ataxia models. Front Cell Neurosci. 2018; 12:188.

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DISCLAIMER

This Medical Policy has been developed as a guide for determining medical necessity. The process of medical necessity review also entails review of the most recent literature and physician review. Medical Policy is not intended to dictate to providers how to practice medicine. Providers are expected to exercise their medical judgment in providing the most appropriate care. Health Alliance encourages input from providers when developing and implementing medical policies. Benefit determinations are based on applicable contract language in the member's Policy/ Subscription Certificate/ Summary Plan Description. This Medical Policy does not guarantee coverage. There may be a delay between the revision of this policy and the posting on the web. Please contact the Health Alliance Customer Service Department at 1-800-851-3379 for verification of coverage.