# STEP THERAPY POLICY

**POLICY:** Alzheimer's Disease Step Therapy Policy

- Adlarity® (donepezil transdermal system Corium)
- Aricept<sup>®</sup>, Aricept<sup>®</sup> ODT (donepezil tablets and orally disintegrating tablets Pfizer/Eisai, generic)
- Exelon<sup>®</sup> (rivastigmine capsules Novartis, generic)
- Exelon<sup>®</sup> Patch (rivastigmine transdermal system Novartis, generic)
- Namzaric® (memantine extended-release and donepezil capsules Forest)
- Razadyne® (galantamine tablets and oral solution Janssen, generic)
- Razadyne® ER (galantamine extended-release capsules Janssen, generic)

**REVIEW DATE:** 12/07/2022

#### **OVERVIEW**

The acetylcholinesterase inhibitors (ChIs) [donepezil, rivastigmine, galantamine] and the *N*-methyl-D-aspartate (NMDA) antagonist memantine are indicated for the **treatment of Alzheimer's disease** (AD).<sup>1-7</sup>

- Adlarity, donepezil, and rivastigmine transdermal are the only agents approved for all degrees of AD [mild, moderate, and severe].
- Galantamine/galantamine extended-release (ER) and oral rivastigmine are approved for **mild to moderate AD**.
- Oral and transdermal rivastigmine are also indicated for the **treatment of mild to moderate** dementia associated with Parkinson's disease (PD).
- Namzaric is indicated for the **treatment of moderate to severe dementia of the Alzheimer's type** in patients stabilized on donepezil 10 mg once daily.

Namzaric is a fixed-dose combination containing donepezil and memantine ER.<sup>7</sup> This policy does not include the single-agent NMDA antagonists.

## **POLICY STATEMENT**

This program has been developed to encourage the use of a Step 1 (A or B) Product prior to the use of a Step 2 (A or B) Product. If the Step Therapy rule is not met for the Step 2 (A or B) Product at the point of service, coverage will be determined by the Step Therapy criteria below. This program has <u>two separate components</u>: one for **generic acetylcholinesterase inhibitor products** (does NOT include donepezil 23 mg tablets) and one for the **Aricept 23 mg strength products** (brand or generic). All approvals are provided for 1 year in duration.

**<u>Automation</u>**: A patient with a of one Step 1 (A or B) Product within the 130-day look-back period is excluded from Step Therapy.

### Generic acetylcholinesterase inhibitor:

**Step 1A:** generic donepezil tablets and orally disintegrating tablets (does NOT include donepezil 23 mg tablets), generic galantamine tablets or oral solution, generic galantamine extended-release capsules, generic rivastigmine capsules, generic rivastigmine transdermal system

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**Step 2A:** Adlarity, Aricept 5 and 10 mg tablets, Aricept ODT, Exelon, Exelon Patch, Namzaric, Razadyne, Razadyne ER

# Aricept 23 mg strength (brand or generic):

**Step 1B:** Aricept 10 mg tablets (brand or generic), Aricept ODT 10 mg (brand or generic)

**Step 2B:** Aricept 23 mg tablets (brand or generic)

### **CRITERIA**

### Generic acetylcholinesterase inhibitor criteria

- 1. If the patient has tried one Step 1A Product, approve a Step 2A Product.
- **2.** No other exceptions are recommended.

# Aricept 23 mg strength (brand or generic) criteria

- 1. If the patient has tried one Step 1B Product, approve a Step 2B Product.
- **2.** No other exceptions are recommended.

#### REFERENCES

- Aricept® tablets/Aricept® ODT (orally disintegrating tablets) [prescribing information]. Woodcliff Lake, NJ: Eisai; December 2018.
- Razadyne<sup>®</sup> tablets and Razadyne<sup>™</sup> ER extended-release capsules [prescribing information]. Titusville, NJ: Janssen; August 2021.
- 3. Exelon® capsules [prescribing information]. East Hanover, NJ: Novartis; December 2018.
- 4. Exelon® patch [prescribing information]. East Hanover, NJ: Novartis; December 2018.
- 5. Namenda® tablets and oral solution [prescribing information]. Madison, NJ: Allergan; November 2018.
- 6. Namenda XR<sup>®</sup> extended-release capsules [prescribing information]. Madison, NJ: Allergan: November 2019.
- 7. Namzaric® capsules [prescribing information]. Madison, NJ: Allergan; January 2019.
- 8. Adlarity® transdermal system [prescribing information]. Grand Rapids, MI: Corium; March 2022.