

PHARMACY PRE-AUTHORIZATION CRITERIA



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| DRUG | Oxtellar XR (oxcarbazepine extended release tablets) |
| POLICY # | 11117 |
| INDICATIONS | Oxtellar XR™ is indicated as adjunctive therapy of partial seizures in adults and in children 6 years to 17 years of age. |
| CRITERIA | ConnectiCare considers Oxtellar XR to be medically necessary for patients who meet the following criteria: <ul style="list-style-type: none">• Patient is diagnosed with seizure disorder AND <ul style="list-style-type: none">• Patient has a documented intolerance to, or treatment failure of an adequate trial of Trileptal (oxcarbazepine) tablets |
| LIMITATIONS | |
| REFERENCES | Oxtellar XR full prescribing information. Rockville, MD, Supernus Pharmaceuticals |
| P&T REVIEW HISTORY | 6/14, 10/14, 11/15, 2/16, 2/17, 1/18 |
| REVISION RECORD | 3/14, 10/14, 9/15 |