Policies Repository

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Policy Title	Efalizumab (Raptiva®)
Policy Number	FS.CLIN.54

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This Pharmacy Policy document describes the status of pharmaceutical information and/or technology at the time the document was developed. Since that time, new information relating to drug efficacy, interactions, contraindications, dosage, administration routes, safety or FDA approval may have changed. If the Medical/Pharmacy Reviewer is aware of any new information on the subject of this document, please provide it promptly to the Medical/Pharmacy Policy Department. This information may include new FDA approved indications, withdrawals or other FDA alerts. This type of information is relevant not only when considering whether this Policy should be updated, but also when applying it to current requests for coverage.

Members are advised to use participating pharmacies in order to receive the highest level of benefits.

Policy

Efalizumab (Raptiva®) is indicated for the treatment of adult patients (18 years or older) with chronic moderate to severe plaque psoriasis who are candidates for systemic therapy or phototherapy.

Policy Description

Efalizumab (Raptiva®) is an immunosuppressive recombinant humanized IgG1 kappa isotype monoclonal antibody that binds to human CD11a, the α subunit of leukocyte function antigen-1 (LFA-1), which is expressed on all leukocytes, and decreases cell surface expression of CD11a. Efalizumab (Raptiva®) inhibits the binding of LFA-1 to intercellular adhesion molecule-1 (ICAM-1), thereby inhibiting the adhesion of leukocytes to other cell types. Interaction between LFA-1 and ICAM-1 contributes to the initiation and maintenance of multiple processes, including activation of T lymphocytes, adhesion of T lymphocytes to endothelial cells, and migration of T lymphocytes to sites of inflammation including psoriatic skin. Lymphocyte activation and trafficking to skin play a role in the pathophysiology of chronic plaque psoriasis. In psoriatic skin, ICAM-1 cell surface expression is upregulated on endothelium and keratinocytes. CD11a is also expressed on the surface of B lymphocytes, monocytes, neutrophils, natural killer cells, and other leukocytes. Therefore, the potential exists for Efalizumab (Raptiva®) to affect the activation, adhesion, migration, and numbers of cells other than T lymphocytes.

Policy Guideline Inclusion

Efalizumab (Raptiva®) is approved when the following inclusion criterion is met:

- Documented diagnosis of moderate to severe chronic plaque psoriasis and ALL of the following:
  - Patient is an adult (≥ 18 years)
  - Medication is being recommended and prescribed by a dermatologist
  - Patient had at least a 30-day trial and failure with ONE of the following drugs OR contraindication to ALL of the following drugs:
    - Topical calcipotriene containing products
    - Topical anthralin
    - Topical steroids

- Topical immunomodulators (Elidel®, Protopic®)
- Topical retinoids
- Topical fluorouracil (Efudex®)
- Adalimumab (Humira®)
- Etanercept (Enbrel®)

- Patient does not have concurrent immunosuppressive therapy
- Patient does not have active infection
- Patient does not have active malignancy

Policy Guideline Exclusion

Efalizumab (Raptiva®) is denied when **any** of the following exclusion criteria is present:

- No documented diagnosis of moderate to severe chronic plaque psoriasis
- Patient is less than 18 years of age
- Medication is not being recommended and prescribed by a dermatologist
- Patient does not have at least a 30-day trial and failure with ONE of the following drugs OR contraindication to ALL of the following drugs:
  - Topical calcipotriene containing products
  - Topical anthralin
  - Topical steroids
  - Topical immunomodulators (Elidel®, Protopic®)
  - Topical retinoids
  - Topical fluorouracil (Efudex®)
  - Adalimumab (Humira®)
  - Etanercept (Enbrel®)
- Patient has concurrent immunosuppressive therapy
- Patient has active infection
- Patient has active malignancy

Policy List of Applicable Drugs

Brand Name	Generic Name
Raptiva	efalizumab

Dosing and Administration

Refer to the specific manufacturer's prescribing information for administration and dosage details, contraindications, and Black Box warnings.

Policy References

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Policy Link to Related Policies

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