

PHARMACY POLICY STATEMENT

Marketplace

DRUG NAME	Exondys 51 (eteplirsen)
BILLING CODE	J1428
BENEFIT TYPE	

10/16/2017	Policy converted into new format. No changes in criteria.
05/20/2019	Criteria on member's ambulatory status and independent walking ability added to initial authorization and reauthorization parts of the policy.
06/23/2020	Length of corticosteroid trial specified to be at least 3 months.
01/14/2021	Added prescriber requirement. Simplified ambulatory requirement. Added requirement of stability or slowed rate of decline of motor function in reauth section.
04/06/2021	Increased duration of steroid trial to 6 months.
03/02/2022	Transferred to new template. Removed ambulatory requirement. Added weight requirement to ensure accurate dosing. Updated references.

References:

1. Exondys 51 [Package Insert]. Cambridge, MA: Sarepta Therapeutics, Inc.; Jan 2022.
2. Sarepta Therapeutics. An Open-Label, Multi-Center Study to Evaluate the Safety and Tolerability of Eteplirsen in