

Policies Repository



Policy Title Levetiracetam Extended-Release (Keppra XR™)

Policy Number FS.CLIN.77

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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 Levetiracetam Extended-Release (Keppra XR™) is indicated for adjunctive therapy in the treatment of partial onset seizures in patients 16 years of age with epilepsy.

The use of Levetiracetam Extended-Release (Keppra XR™) requires prior authorization (ie, clinical pharmacy and/or Medical Director review).

Policy Description Levetiracetam Extended-Release (Keppra XR™) is an antiepileptic drug available as the extended-release formulation of existing drug Levetiracetam (Keppra). Levetiracetam is chemically unrelated to other existing antiepileptic drugs (AEDs). The precise mechanism(s) by which levetiracetam exerts its antiepileptic effect is unknown. Clinical trials were not found that showed an increase in compliance over existing Levetiracetam (Keppra).

Policy Guideline Inclusion Levetiracetam extended-release tablets (Keppra XR™) is approved when **all** of the following inclusion criteria are met:

- Documentation of diagnosis of Partial-onset seizure
- Documentation of non-compliance with a 30 day therapy of Levetiracetam immediate release containing product

Policy Guideline Exclusion Levetiracetam extended-release tablets (Keppra XR™) is denied when **any** of the following exclusion criteria are found:

- No documentation of diagnosis of Partial-onset seizures
- No documentation of non-compliance with a 30 day therapy of Levetiracetam immediate release containing product

Policy List of Applicable Drugs

Brand Name	Generic Name
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Keppra XR™	Levetiracetam extended-release tablets
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Dosing and Administration Refer to the specific manufacturer's prescribing information for administration and dosage details for each specific agent.

Policy References

Keppra XR™ (levetiracetam) extended-release tablets. In: Facts and Comparisons [online through Facts and Comparisons Online]. Indy, IN: Walter Kluwer Health Inc. Accessed March 19, 2010.

Keppra XR™ (levetiracetam) extended-release tablets. In: Drugdex [online through Micromedex Healthcare Series]. Greenwood Village, CO: Thomson Micromedex. Accessed March 19, 2010.

Keppra XR™ (levetiracetam) extended-release tablets.Smyrna, GA: UCB; April 2009.

Policy Link to Related Policies

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