

Corlanor (ivabradine)
Effective 01/01/2020

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization <input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Benefit	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit		
Specialty Limitations	N/A		
Contact Information	Medical and Specialty Medications		
	All Plans	Phone: 877-519-1908	Fax: 855-540-3693
Exceptions	Non-Specialty Medications		
	All Plans	Phone: 800-711-4555	Fax: 844-403-1029

Overview

Corlanor (ivabradine) is a hyperpolarization-activated cyclic nucleotide-gated (HCN) channel blocker. The HCN channels help to generate rhythmic activity with groups of the heart and brain cells. Ivabradine is FDA indicated to reduce the risk of hospitalization for worsening heart failure in patients with stable, symptomatic chronic heart failure with left ventricular ejection fraction (LVEF) $\leq 35\%$, who are in sinus rhythm with resting heart rate ≥ 70 beats per minute, and either are on maximally tolerated doses of beta-blockers or have a contraindication to beta-blocker use.

Coverage Guidelines

Authorization may be granted for members new to the plan who are currently receiving treatment with Corlanor excluding when the product is obtained as samples or via manufacturer's patient assistance program

OR

Approval of Corlanor will be granted if the member meets all following criteria and documentation has been submitted:

1. The prescriber is a cardiologist, or consult with a cardiologist is provided
2. For members ≥ 18 years or older: resting heart rate of ≥ 70 beats per minute (bpm)
3. For members 6 months to 17 years of age: resting heart rate is in the normal range according to age (*see Appendix*)
4. The member meets one of the following:
 - a. member is currently receiving a beta-blocker (carvedilol, metoprolol succinate or bisoprolol) at maximally tolerated age appropriate doses
 - b. member has had an adverse reaction to a beta-blocker **or**
 - c. clinical rationale why a beta-blocker cannot be used has been submitted **and** one of the following:
 - i. member had received standard of care therapy with an ACE inhibitor, ARB, or angiotensin-receptor neprilysin inhibitor (ARNI) in combination with a beta-blocker
 - ii. clinical rationale why member cannot receive standard of care therapy with an ACE inhibitor, ARB, or ARNI in combination with a beta-blocker has been submitted.

Limitations

1. Approvals will be granted for 24 months

Appendix

Normal Resting Heart Rate and Bradycardia for Age:

Age	Normal	Bradycardia
6-12 months	≥ 105 bpm	< 80 bpm
>1 year to < 3 years	≥ 95 bpm	< 70 bpm
3-5 years	≥ 75 bpm	< 50 bpm
>5 years	≥ 70 bpm	< 50 bpm

References

1. Corlanor (ivabradine) [prescribing information]. Thousand Oaks, CA: Amgen Inc; April 2019
2. Koruth JS, Lala A, Pinney S, et al. The Clinical Use of Ivabradine. *J Am Coll Cardiol* 2017; 70:1777
3. Mathew ST, Po SS, Thadani U. Inappropriate sinus tachycardia-symptom and heart rate reduction with ivabradine: A pooled analysis of prospective studies. *Heart Rhythm* 2018; 15:240
4. Ptaszynski P, Kaczmarek K, Ruta J, et al. Metoprolol succinate vs. ivabradine in the treatment of inappropriate sinus tachycardia in patients unresponsive to previous pharmacological therapy. *Europace* 2013; 15:116

Review History

11/20/19 – Reviewed at P&T

11/18/2020- Reviewed at P&T

07/21/2021-Reviewed at P&T; no clinical changes.

11/16/2022 – Reviewed for Nov P&T. Separated out MH vs Comm/Exch. No clinical changes.

