POLICY NAME Leqembi (lecanemab) POLICY #

3214P

Criteria

| Coverage Criteria | |
|---|--|
| | Diagnosis of mild cognitive impairment related to Alzheimer disease or mild Alzheimer disease dementia |
| | Functional Assessment Staging Test (FAST) Stage score of 2-4, meeting criteria for mild cognitive impairment or mild Alzheimer disease dementia |
| | Documented evidence of beta-amyloid plaques on the brain through PET imaging and/or cerebrospinal fluid (CSF) analysis |
| | Prescribed by a neurologist (nervous system doctor), geriatric psychiatrist (mental health physician specializing in treating elderly patients), or geriatrician (elder patient doctor) who specializes in treating dementia |
| | Physician participates in a qualifying registry with appropriate clinical team/follow-up care plan |
| | Documentation to support mild cognitive decline such as Mini-Mental State Examination (MMSE) ≥19, Montreal Cognitive Assessment (MoCA) ≥17, or clinical dementia rating (CDR) 0.5 to 1 |
| | |
| Exclusion Criteria – Any of the following prevents coverage | |
| | Documentation of any amyloid-related imaging abnormalities (ARIA), such as brain swelling or brain bleeds |
| | Coverage of Aduhelm is considered experimental at this time and excluded from coverage |
| | Administration outside of a qualifying registry are excluded from coverage |