

**Corlanor (ivabradine)  
Effective January 1, 2020**

<b>Plan</b>	<input checked="" type="checkbox"/> MassHealth <input checked="" type="checkbox"/> Commercial/Exchange	<b>Program Type</b>	<input checked="" type="checkbox"/> Prior Authorization <input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
<b>Benefit</b>	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit (NLX)		
<b>Specialty Limitations</b>	N/A		
<b>Contact Information</b>	<b>Specialty Medications</b>		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	<b>Non-Specialty Medications</b>		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	<b>Medical Specialty Medications (NLX)</b>		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
<b>Exceptions</b>	N/A		

**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) ≤ 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**

1. Authorization may be granted for members who are currently receiving treatment with Corlanor excluding when the product is obtained as samples or via manufacturer’s patient assistance program  
**OR**
2. Approval of Corlanor will be granted if the member meets all following criteria and documentation has been submitted:
  - a. The prescriber is a cardiologist, or consult with a cardiologist is provided
  - b. For members ≥ 18 years or older: resting heart rate of ≥ 70 beats per minute (bpm)
  - c. For members 6 months to 17 years of age: resting heart rate is in the normal range according to age (*see Appendix*)
  - d. The member meets one of the following:
    - member is currently receiving a beta-blocker (carvedilol, metoprolol succinate or bisoprolol) at maximally tolerated age appropriate doses
    - member has had an adverse reaction to a beta-blocker **or**
    - clinical rationale why a beta-blocker cannot be used has been submitted **and** one of the following:



- a. member had received standard of care therapy with an ACE inhibitor, ARB, or angiotensin-receptor neprilysin inhibitor (ARNI) in combination with a beta-blocker
- b. 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

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