



Drug Coverage Decision for BC PharmaCare

About PharmaCare

BC PharmaCare is a publicly funded drug plan that helps B.C. residents pay for most prescription drugs and pharmacy services, and some medical devices and supplies.

Details of Drug Reviewed

Drug	cenobamate
Brand name	Xcopri™
Dosage form(s)	12.5 mg, 25 mg, 50 mg, 100 mg, 150 mg, and 200 mg tablets
Manufacturer	Paladin Labs Inc.
Submission type	New Submission
Indication reviewed	As an adjunctive therapy for the management of partial-onset seizures (POS) in adults with epilepsy who are not satisfactorily controlled with conventional therapy.
Canada's Drug Agency (CDA-AMC) Clinical Reimbursement Reviews (CRR)	CDA-AMC recommended: to Reimburse with clinical criteria and/or conditions. Visit the CRR website for more details .
Drug Benefit Council (DBC)	The DBC now screens drug submissions under review by CDA-AMC to determine whether or not a full DBC review is necessary, based on past DBC reviews, recommendations, and existing PharmaCare coverage. If a full DBC review is determined to not be required, the Ministry of Health (Ministry's) drug coverage decision will be based on the Canadian Drug Expert Committee (CDEC) recommendation and an internal review only. The DBC screened cenobamate (Xcopri) on April 3, 2023. Since cenobamate is similar to other drugs that were previously reviewed by DBC for the treatment of POS in adults with epilepsy, the Ministry may accept the CDEC's recommendation for Xcopri.

Drug Coverage Decision	Non-benefit
Date	November 14, 2024
Reason(s)	<p>Consistent with CDEC recommendation that Xcopri should be reimbursed by public drug plans as adjunctive therapy in the management of POS in adults with epilepsy who are not satisfactorily controlled with conventional therapy, if the daily cost of Xcopri is the same or lower than the daily cost of other third generation adjunctive therapies (lacosamide (generics), brivaracetam (Brivlera®), eslicarbazepine (Aptiom®), and perampanel [Fycompa®]).</p> <ul style="list-style-type: none"> • CDEC considered two double-blind, randomized controlled trials (RCTs) which showed that Xcopri, when used along with other anti-seizure medications (ASMs), reduced the frequency of POS compared with placebo. • Although Xcopri may meet some of the needs identified by patients with refractory POS, including the reduction in seizure frequency, the comparative benefit versus third generation ASMs remains uncertain because there is no direct evidence comparing the efficacy of Xcopri with third generation ASMs. • Given the uncertainty in the evidence, CDEC recommended that the daily cost of treatment with Xcopri should not exceed the daily cost of alternative third-generation adjunctive therapies (i.e., brivaracetam, eslicarbazepine, and perampanel). • The Ministry participated in the pan-Canadian Pharmaceutical Alliance (pCPA) negotiations with the manufacturer for Xcopri which were not able to address the concerns identified by the CDEC with respect to the cost-effectiveness and value for money. As a result, the pCPA negotiations closed without an agreement.

The drug review process in B.C.

A manufacturer submits a request to the Ministry of Health (the Ministry).

An independent group called the [Drug Benefit Council \(DBC\)](#) gives advice to the Ministry by considering:

- whether the drug is safe and effective
- advice from a national group called [Canada's Drug and Health Technology Agency \(CADTH\)](#)
- what the drug costs and whether funding it provides good value to the province
- ethical considerations of covering and not covering the drug
- input from physicians, patients, caregivers, patient groups and drug submission sponsors

The Ministry makes a BC PharmaCare coverage decision by taking into account:

- existing BC PharmaCare policies, programs and resources
- the evidence-informed advice of the DBC
- drugs already covered by BC PharmaCare that treat similar medical conditions
- the overall cost of covering the drug

Visit [BC PharmaCare](#) and [Drug reviews](#) for more information.

This document is intended for information only.

It does not take the place of advice from a physician or other qualified health care provider.