## Clinical Policy: Levacetylleucine (Aqneursa)

Reference Number: PA.CP.PHAR.682
Effective Date: 02/2025
Last Review Date: 07/2025

**Description**
Levacetylleucine (Aqneursa™) is a modified amino acid.

**FDA Approved Indication(s)**
Aqneursa is indicated for the treatment of neurological manifestations of Niemann-Pick disease type C (NPC) in adults and pediatric patients weighing ≥ 15 kg.

**Policy/Criteria**
*Provider must submit documentation (such as office chart notes, lab results or other clinical information) supporting that member has met all approval criteria.*

It is the policy of PA Health & Wellness® that Aqneursa is **medically necessary** when the following criteria are met:

**I. Initial Approval Criteria**

**A. Niemann-Pick Disease Type C** (must meet all)**:**

1. Diagnosis of NPC confirmed by one of the following (a or b):
   a. Genetic analysis indicating mutation in both alleles of *NPC1* or *NPC2*;
   b. Genetic analysis indicating mutation in one allele of *NPC1* or *NPC2* along with one of the following (i or ii):
      i. Positive filipin staining test result;
      ii. Positive biomarker result (e.g., oxysterol, lyso-sphingolipid, bile acid);
2. Prescribed by or in consultation with a geneticist, neurologist, endocrinologist, or metabolic disease specialist;
3. Weight is ≥ 15 kg
4. Documentation of member's current body weight in kg;
5. Member presents with at least one neurological sign or symptom of the disease (*see Appendix D*);
6. Aqneursa is not prescribed concurrently with Miplyffa™;
7. Dose does not exceed the following, based on body weight:
   a. For 15 kg to < 25 kg: 2 g (2 packets) per day;
   b. For 25 kg to < 35 kg: 3 g (3 packets) per day;
   c. For ≥ 35 kg: 4 g (4 packets) per day.

**Approval duration: 12 weeks**

**B. Other diagnoses/indications**

1. Refer to the off-label use policy if diagnosis is NOT specifically listed under section III (Diagnoses/Indications for which coverage is NOT authorized): PA.CP.PMN.53

## II. Continued Therapy

**A. Niemann-Pick Disease Type C** (must meet all)**:**

1. Currently receiving medication via PA Health & Wellness benefit and documentation supports positive response to therapy or the Continuity of Care policy (PA.PHARM.01) applies;
2. Member is responding positively to therapy as evidenced by an improvement or stabilization in a domain affected by NPC (e.g., ambulation, fine motor skills, swallowing, sitting, speech);
3. Aqneursa is not prescribed concurrently with Miplyffa;
4. If request is for a dose increase, new dose does not exceed the following by body weight:
   a. For 15 kg to < 25 kg: 2 g (2 packets) per day;
   b. For 25 kg to < 35 kg: 3 g (3 packets) per day;
   c. For ≥ 35 kg: 4 g (4 packets) per day.

**Approval duration: 12 months**

**B. Other diagnoses/indications** (must meet 1 or 2)**:**

1. Currently receiving medication via PA Health & Wellness benefit and documentation supports positive response to therapy or the Continuity of Care policy (PA.PHARM.01) applies.
   **Approval duration: Duration of request or 12 months (whichever is less)**; or
2. Refer to the off-label use policy if diagnosis is NOT specifically listed under section III (Diagnoses/Indications for which coverage is NOT authorized): PA.CP.PMN.53

## III. Diagnoses/Indications for which coverage is NOT authorized:

**A.** Non-FDA approved indications, which are not addressed in this policy, unless there is sufficient documentation of efficacy and safety according to the off label use policies – PA.CP.PMN.53

## IV. Appendices/General Information

*Appendix A: Abbreviation/Acronym Key*
FDA: Food and Drug Administration
NPC: Niemann-Pick disease Type C
SARA: Scale for the Assessment and Rating of Ataxia

*Appendix B: Therapeutic Alternatives*
Not applicable

*Appendix C: Contraindications/Boxed Warnings*
None reported

*Appendix D: General Information*

- Examples of neurological signs or symptoms of NPC include hearing loss, vertical supranuclear gaze palsy, dysarthria, ataxia, dystonia, impaired ambulation, dysarthria, dysphagia, seizures, and dementia.
- NPC neurological severity assessment

- SARA domains and scoring (total score: 0-40)

| 8-Domains | Score Scale |
|---|---|
| Gait | 0-8 |
| Stance | 0-6 |
| Sitting | 0-4 |
| Speech disturbance | 0-6 |
| Finger chase | 0-4 |
| Nose-finger test | 0-4 |
| Fast alternating hand movements | 0-4 |
| Heel-shin slide | 0-4 |

- SARA scores range from 0 to 40, with lower scores indicating better neurologic status. A baseline SARAscore of ≥ 7 and ≤ 34 was an eligibility criterion for all patients in Aqneursa's pivotal trial. This essentially excluded patients with very mild and very severe NPC.
- The ability to walk either independently or with assistance is also an objective measure of NPC neurological severity. Given the limited use of the SARA scale in general for NPC, this adds an alternative to providers for objective severity assessment.

## V. Dosage and Administration

| Indication | Dosing Regimen | Maximum Dose |
|---|---|---|
| NPC | Recommended dose is based actual body weight administered PO up to three times daily:<br>• 15 kg to < 25 kg: 1 g morning dose, no afternoon dose, 1 g evening dose<br>• 25 kg to < 35 kg: 1 g morning dose, 1 g afternoon dose, 1 g evening dose<br>• ≥ 35 kg: 2 g morning dose, 1 g afternoon dose, 1 g evening dose | 4 g/day |

## VI. Product Availability

Granules for oral suspension: 1 g Aqneursa in a unit-dose packet

## VII. References

1. Aqneursa Prescribing Information. Austin, TX: IntraBio, Inc.; September 2024. Available at https://www.aqneursa.com/wp-content/prescribing-information.pdf. Accessed April 15, 2025.
2. Bremova-Ertl T, Ramaswami U, Brands M, et al. Trial of *N*-Acetyl-l-Leucine in Niemann-Pick disease type C. N Engl J Med. 2024;390(5):421-431.
3. Geberhiwot T, Moro Alessandro, Dardis A, et al. Consensus clinical management guidelines for Niemann-Pick disease type C. Orphanet Journal of Rare Diseases 2018 April 6;13(1):50.
4. Patterson MC, Clayton P, Gissen P, et al. Recommendations for the detection and diagnosis of Niemann-Pick disease type C: An update. Neurol Clin Pract. 2017;7(6):499-511.

| Reviews, Revisions, and Approvals | Date |
|---|---|
| Policy created | 01/2025 |

| Reviews, Revisions, and Approvals | Date |
|---|---|
| 3Q 2025 annual review: no significant changes; references reviewed and updated. | |