

Market Applicability							
Market	DC	GA	KY	MD	NJ	NY	WA
Applicable	X	X	X	X	X	X	X

## Ajovy (fremanezumab)

Override(s)	Approval Duration
Prior Authorization Quantity Limit	Initial request: 3 months Renewal requests: 1 year

Medications	Quantity Limit
Ajovy (fremanezumab)	May be subject to quantity limit

### APPROVAL CRITERIA

Initial requests for Ajovy (fremanezumab) may be approved when the following criteria are met:

- I. Individual has a diagnosis of one of the following:
  - A. Episodic migraine defined as at least 4 and fewer than 15 migraine days per month and fewer than 15 headache days per month on average during the previous 3 month period; **OR**
  - B. Chronic migraine defined as a headache occurring on 15 or more days per month for more than 3 months, which, on at least 8 days per month, has features of a migraine headache (ICHD-3);

**AND**

- II. Individual is using for migraine prophylaxis;

**AND**

- III. Individual has had a trial (medication samples/coupons/discount cards are excluded from consideration as a trial) of and inadequate response or intolerance to two agents for migraine prophylaxis\* (at least one agent in any two of the following classes) or has a contraindication to all of the following medications (AAN/AHA 2012/2015, Level A and B evidence; ICSI 2013, high quality evidence):
  - A. The following antidepressants: amitriptyline, venlafaxine; **OR**
  - B. One of the following beta blockers: Metoprolol, propranolol, timolol (oral), nadolol, atenolol, nebivolol; **OR**
  - C. The following calcium channel blocker: verapamil; **OR**
  - D. One of the following antiepileptic agents: valproate sodium, divalproex sodium, topiramate, gabapentin; **OR**
  - E. Botox (for chronic migraine).

\*Agents for migraine prophylaxis – May require Prior Authorization

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New Program Date 10/02/2018

This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market specific restrictions or transition-of-care benefit limitations may apply.  
CRX-ALL-0426-19

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Renewal requests for Ajoovy (fremanezumab) may be approved when the following criteria are met:

- I. Individual has a reduction in the overall number of migraine days or reduction in number of severe migraine days per month; **AND**
  - II. Individual has obtained clinical benefit deemed significant by individual or prescriber.
- Requests for Ajoovy (fremanezumab) may **not** be approved for the following:

- I. Individual is using concomitantly with botulinum toxin for migraine prophylaxis.

State Specific Mandates		
State name	Date effective	Mandate details (including specific bill if applicable)
N/A	N/A	N/A

**Key References:**

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5. Beithon J, Gallenberg M, Johnson K, Kildahl P, Krenik J, Liebow M, Linbo L, Myers C, Peterson S, Schmidt J, Swanson J. Institute for Clinical Systems Improvement. Diagnosis and Treatment of Headache. Available from: <http://bit.ly/Headache0113>. Updated January 2013.
6. The International Classification of Headache Disorders 3<sup>rd</sup> Edition (Beta Version). Available from: <https://www.ichd-3.org/>. Accessed September 7, 2018.
7. Loder E, Burch R, Rizzoli P. The 2012 AHS/AAN Guidelines for Prevention of Episodic Migraine: A summary and comparison with other recent clinical practice guidelines. *Headache*. 2018; 52:930-945. Available from: [http://www.headachejournal.org/SpringboardWebApp/userfiles/headache/file/j\\_1526-4610\\_2012\\_02185\\_x.pdf](http://www.headachejournal.org/SpringboardWebApp/userfiles/headache/file/j_1526-4610_2012_02185_x.pdf). Accessed September 7, 2018.

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10. Tepper S, Ashina M, Reuter U, et.al. Safety and efficacy of erenumab for preventative treatment of chronic migraine: a randomized, double-blind, placebo-controlled phase 2 trial. *Lancet Neurol*. 2017; 16:425-34.
11. Silberstein SD, Dodick DW, Bigal ME, et.al. Fremanezumab for the preventive treatment of chronic migraine. *N Engl J Med*. 2017; 377(22): 2113-2122.
12. Dodick DW, Silberstein SD, Bigal ME. Effect of fremanezumab compared with placebo for prevention of episodic migraine. *J Am Med Assoc*. 2018; 319(19):1999-2008.

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