

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

Duopa (levodopa/carbidopa enteral suspension)

Override(s)	Approval Duration
Prior Authorization	1 year

Medications
Duopa (levodopa/carbidopa enteral suspension)

APPROVAL CRITERIA

Requests for Duopa (carbidopa and levodopa enteral suspension) may be approved if the following criteria are met:

- I. Individual has advanced Parkinson's disease (PD) with complicated motor fluctuations;
AND
- II. Symptoms have not been adequately controlled with optimal medical therapy which includes the following:
 - A. Oral levodopa-carbidopa; **AND**
 - B. Dopamine agonists; **AND**
 - C. One agent from the following classes:
 1. Catechol-O-methyl transferase (COMT) inhibitor; **OR**
 2. Monoamine oxidase B (MAO)-B inhibitor.

Duopa (carbidopa and levodopa enteral suspension) may not be approved for the following:

- I. Individual is receiving a nonselective MAO inhibitor (such as phenelzine or tranylcypromine); **OR**
- II. Individuals has a diagnosis of atypical PD or secondary PD; **OR**
- III. When requesting for all other conditions, or when the above criteria are not met.

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

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

Key References:

1. Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2019. URL: <http://www.clinicalpharmacology.com>. Updated periodically.
2. DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Accessed: June 14, 2019.
3. DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
4. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2019; Updated periodically.

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-0489-20