

## Commercial/Healthcare Exchange PA Criteria

*Effective: May 6<sup>th</sup>, 2019*

**Prior Authorization:** Ajovy

**Products Affected:** Ajovy (fremanezumab-vfrm) subcutaneous single-dose prefilled syringe

**Medication Description:** Ajovy (fremanezumab-vfrm) is a human immunoglobulin G2 (IgG2) monoclonal antibody that targets the calcitonin gene-related peptide (CGRP) receptor, a receptor involved in migraine attacks.

**Covered Uses:** Preventative treatment of migraine in adults.

**Exclusion Criteria:**

1. Concurrent use (for example, during the same time period) of two CGRP inhibitors indicated for the preventative treatment of migraine (for example, Aimovig, Emgality, Nurtec ODT, Vyepti)
2. Acute treatment of migraine
3. Treatment of chronic or episodic cluster headache

**Required Medical Information:**

1. Diagnosis
2. Previous therapies tried and failed

**Age Restrictions:** 18 years of age or older

**Prescriber Restrictions:** N/A

**Coverage Duration:** 12 months

**Other Criteria:**

**Initial Criteria**

1. Patient has clinically diagnosed episodic migraine as defined at least 4 migraine days per month; **AND**
2. Patient has prior usage of at least **TWO** standard prophylactic pharmacologic therapies, each from a different pharmacologic class, used to prevent migraines or reduce migraine frequency including:
  - a. Angiotensin receptor blockers;
  - b. Angiotensin Converting Enzyme Inhibitors;
  - c. Beta-blockers (i.e. propranolol, metoprolol, atenolol);
  - d. Calcium Channel blockers (i.e. verapamil);
  - e. Anti-epileptics (i.e. as topiramate or divalproex sodium);
  - f. Antidepressants (venlafaxine OR a tricyclic antidepressant such as amitriptyline or nortriptyline); **AND**
3. The patient has had inadequate efficacy to both of those standard prophylactic pharmacologic therapies, according to the prescribing physician; **OR**
4. The patient has experienced adverse event(s) severe enough to warrant discontinuation of both of those standard prophylactic pharmacologic therapies, according to the prescribing physician.

***Renewal Criteria:***

1. Positive response to therapy demonstrated by a 50% reduction in monthly migraine days; **AND**
2. The use of acute migraine medications (ie NSAIDs, triptans) has decreased since start therapy; **AND**
3. Patient has an overall improvement in function with therapy

***References:***

1. Ajovy [package insert]. North Wales, PA; Teva; September 2018.

***Policy Revision history***

<b>Rev #</b>	<b>Type of Change</b>	<b>Summary of Change</b>	<b>Sections Affected</b>	<b>Date</b>
1	New Policy	New Policy	All	04/19/2019
2	Update	Addition of Renewal Criteria	Other Criteria	3/27/2020
3	Update	Removed the following from other criteria:  5. Patient has prior usage in the last 18 months of at least one triptan therapy; <b>AND</b>  6. Patient is intolerant to or, has a contraindication to or, inadequate response from triptan therapy.	Other Criteria	07/01/2021
4	Update	Updated Exclusion criteria: From: 1. Concurrent use with another (CGRP) inhibitor to:  Concurrent use (for example, during the same time period) of two CGRP inhibitors indicated for the preventative treatment of migraine (for example, Aimovig, Ajovy, Emgality, Nurtec ODT, Vyepti)	Exclusion Criteria	4/5/2022