ConnectiCare

# Commercial/Healthcare Exchange PA Criteria

***Effective: May 8th, 2019***

***Prior Authorization:*** Inbrija

***Products Affected:*** Inbrija (levodopa) capsule for oral inhalation

***Medication Description:*** Inbrija is an aromatic amino acid indicated for the intermittent treatment of "off" episodes in patients with Parkinson's disease treated with carbidopa/levodopa. Parkinson's disease is a progressive neurodegenerative disorder that causes a range of symptoms, such as impaired or slow movements, muscle stiffness, and tremors. As Parkinson's disease worsens, patients are likely to experience "off" periods, which are characterized by the return of Parkinson's symptoms and can occur despite underlying baseline therapy with carbidopa/levodopa. "Off" episodes can occur because the symptomatic relief from their oral regimen takes longer than normal to take effect or the positive effects of their levodopa medication have worn off prior to the next scheduled dose. These periods may come on slowly between regularly scheduled carbidopa/levodopa doses or abruptly at unpredictable times.

***Covered Uses:*** Intermittent treatment of "off" episodes in patients with Parkinson's disease treated with carbidopa/levodopa.

***Exclusion Criteria:***

1. Patients currently taking or who within the last 2 weeks have taken non-selective monoamine oxidase (MAO) inhibitors (e.g., phenelzine or tranylcypromine)
2. Patients with a history of asthma, COPD, or other chronic underlying lung disease

***Required Medical Information:***

3. Diagnosis
4. Current therapy regimen
5. Previous therapies tried/failed

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

***Prescriber Restrictions:*** Prescribed by, or in consultation with, a neurologist.

***Coverage Duration:*** 12 months

***Other Criteria:***

Approve Inbrija if the patient meets the following criteria (A, B, C, D, E and F)

A. The patient is 18 years of age or older; **AND**
B. The patient has a diagnosis of Parkinson's disease; **AND**
C. Inbrija is being prescribed by, or in consultation with, a neurologist; **AND**
D. Patient is experiencing "off" episodes (return of Parkinson's symptoms) while receiving a carbidopa/levodopa regimen where:
    a. Attempts have been made to adjust the carbidopa/levodopa's dose in order to manage symptoms without success; **AND**
    b. Patient will continue receiving with carbidopa/levodopa in combination with Inbrija **AND**
E. Patient has had previous inadequate responses to or has been intolerant of at least **TWO** different classes of medications for the treatment of Parkinson's disease (e.g. monoamine oxidase type B

[MAOB] inhibitors, dopamine agonists, catechol-O-methyl transferase[COMT] inhibitors, etc), unless contraindicated; **AND**

F. Patient does not have a history of asthma, COPD, or other chronic underlying lung disease.

***References:***


1. Inbrija™ powder for inhalation [prescribing information]. Ardsley, NY: Acorda Therapeutics, Inc.; December 2018.
2. Connolly BS, Lang AE. Pharmacological treatment of Parkinson disease. A review. *JAMA.* 2014;311(16):1670-1683


***Policy Revision history***

| Rev # | Type of Change | Summary of Change | Sections Affected | Date |
|---|---|---|---|---|
| 1 | New Policy | New Policy | All | 4/23/2019 |