

PHARMACY PRE-AUTHORIZATION CRITERIA



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|--------------------|---|
| DRUG (S) | <p>Lyrica (pregabalin) Lyrica CR (pregabalin)</p> |
| POLICY # | <p>14127</p> |
| INDICATIONS | <p>Lyrica is indicated for management of postherpetic pain (PHN), as adjunctive therapy for adults with partial onset seizures, for the management of neuropathic pain associated with diabetic peripheral neuropathy(DPN), for the management of neuropathic pain associated with spinal cord injury, and for the management of fibromyalgia.</p> <p>Lyrica CR is indicated for the management of neuropathic pain associated with diabetic peripheral neuropathy (DPN), and postherpetic neuralgia. Efficacy of Lyrica CR has not been established for the management of fibromyalgia or as adjunctive therapy for adult patients with partial onset seizures.</p> |
| CRITERIA | <p>ConnectiCare will consider Lyrica to be medically necessary in patients who meet the following criteria:</p> <ul style="list-style-type: none"> • The patient has a diagnosis of seizure disorder <p>OR</p> <ul style="list-style-type: none"> • The patient has a clinical diagnosis of diabetic neuropathic pain, neuropathic pain, or post herpetic neuralgia <p>AND</p> <ul style="list-style-type: none"> • Failure or intolerance to Neurontin (gabapentin) OR Cymbalta (duloxetine) <p>OR</p> <ul style="list-style-type: none"> • The patient has a clinical diagnosis of Fibromyalgia <p>AND</p> <ul style="list-style-type: none"> • Failure or intolerance to one of the following: <ul style="list-style-type: none"> ○ Neurontin (gabapentin) ○ Cymbalta (duloxetine) ○ A tricyclic antidepressant (amitriptyline, nortriptyline) ○ Savella <p>ConnectiCare will consider Lyrica CR to be medically necessary in patients who meet the following criteria:</p> <ul style="list-style-type: none"> • The patient has a clinical diagnosis of diabetic neuropathic pain or post herpetic neuralgia <p>AND</p> <ul style="list-style-type: none"> • Failure or intolerance to Neurontin (gabapentin) OR Cymbalta (duloxetine) <p>AND</p> |

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|-------------------------------|--|----------------|-----------------------|---------------------|-----------------------|---------------------|--------|--------|---------|----|----|--------|--------|---------|----|----|--------|----------|----------------|-----|----|--------|--------|---------|----|----|--------|--------|---------|----|----|--------|-------|---------|----|----|--------|--------|---------|----|----|--------|-------|---------|----|----|--------|-------|---------|----|----|
| | <ul style="list-style-type: none"> The patient has failed a trial of immediate release Lyrica. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LIMITATIONS | The following quantity limits will be allowed by the plan: <table border="1" data-bbox="354 701 1097 1247"> <thead> <tr> <th>Drug Name</th> <th>Strength</th> <th>Dosage Form</th> <th>Quantity Limit Amount</th> <th>Quantity Limit Days</th> </tr> </thead> <tbody> <tr> <td>LYRICA</td> <td>100 MG</td> <td>CAPSULE</td> <td>90</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>150 MG</td> <td>CAPSULE</td> <td>90</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>20 MG/ML</td> <td>SOLUTION, ORAL</td> <td>900</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>200 MG</td> <td>CAPSULE</td> <td>90</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>225 MG</td> <td>CAPSULE</td> <td>60</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>25 MG</td> <td>CAPSULE</td> <td>90</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>300 MG</td> <td>CAPSULE</td> <td>60</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>50 MG</td> <td>CAPSULE</td> <td>90</td> <td>30</td> </tr> <tr> <td>LYRICA</td> <td>75 MG</td> <td>CAPSULE</td> <td>90</td> <td>30</td> </tr> </tbody> </table> | Drug Name | Strength | Dosage Form | Quantity Limit Amount | Quantity Limit Days | LYRICA | 100 MG | CAPSULE | 90 | 30 | LYRICA | 150 MG | CAPSULE | 90 | 30 | LYRICA | 20 MG/ML | SOLUTION, ORAL | 900 | 30 | LYRICA | 200 MG | CAPSULE | 90 | 30 | LYRICA | 225 MG | CAPSULE | 60 | 30 | LYRICA | 25 MG | CAPSULE | 90 | 30 | LYRICA | 300 MG | CAPSULE | 60 | 30 | LYRICA | 50 MG | CAPSULE | 90 | 30 | LYRICA | 75 MG | CAPSULE | 90 | 30 |
| Drug Name | Strength | Dosage Form | Quantity Limit Amount | Quantity Limit Days | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 100 MG | CAPSULE | 90 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 150 MG | CAPSULE | 90 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 20 MG/ML | SOLUTION, ORAL | 900 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 200 MG | CAPSULE | 90 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 225 MG | CAPSULE | 60 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 25 MG | CAPSULE | 90 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 300 MG | CAPSULE | 60 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 50 MG | CAPSULE | 90 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LYRICA | 75 MG | CAPSULE | 90 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REFERENCES | Lyrica®capsules {package insert}. New York, NY: Pfizer, Inc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| P&T REVIEW HISTORY | 9/05, 6/07, 6/08, 3/09, 6/09, 9/09, 9/10, 12/11, 10/12, 10/13, 10/14, 11/15, 11/16, 11/17, 1/18, 7/18, 11/18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REVISION RECORD | 3/09, 6/09, 1/11, 9/11, 10/12, 5/13, 12/13, 1/18, 7/18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |