	Market Applicability/Effective Date													
Market	FL & FHK	FL MMA	FL LTC	GA	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	Х	N/A	N/A	X	N/A	Χ	Х	Χ	X	X	X	N/A	N/A	X

^{*}FHK- Florida Healthy Kids

Pec-0634Non Preferred Oral Triptans Step Therapy

Override(s)	Approval Duration					
Prior Authorization Quantity Limit	1 year					

Medications	Quantity Limit			
Amerge Brand 1mg, 2.5mg tablets				
Axert (almotriptan) 6.25mg, 12.5mg tablets				
Imitrex Brand 25mg, 50mg, 100mg tablets				
Frova (frovatriptan) 2.5mg tablets				
Maxalt (rizatriptan) 5mg, 10mg tablets	Subject to			
Maxalt MLT (rizatriptan) 5mg, 10mg orally disintegrating tablets	Quantity Limits			
Relpax (eletriptan) 20mg, 40mg tablets				
Treximet (sumatriptan/naproxen sodium) 10mg/60mg, 85mg/500mg tablets				
Zomig (zolmitriptan) 2.5mg. 5mg tablets				
Zomig ZMT (zolmitriptan) 2.5mg, 5mg orally disintegrating tablets				

APPROVAL CRITERIA

Requests for non-preferred oral triptan agents may be approved if the following criteria are met:

- I. Individual has had trial of and inadequate response or intolerance to **two** preferred oral triptan agents.
 - Preferred Oral Agents: sumatripatn tablet, naratriptan tablet

Requests for Treximet (sumatriptan/naproxen sodium) must also meet the following criteria:

- I. Individual has had a trial and an adequate response to one oral non-steroidal antiinflammatory drug (NSAID) used at the same time as oral triptan agent; **AND**
- II. Documentation has been provided for why the combination agent is clinically necessary and not for convenience.

PAGE 1 of 2 08/23/2017

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.

WEB-PEC-0634-17

		Market Applicability/Effective Date													
Mar	rket	FL & FHK	FL MMA	FL LTC	GA	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Appli	cable	Χ	N/A	N/A	Х	N/A	Х	Χ	Χ	Χ	Χ	Χ	N/A	N/A	Χ

*FHK- Florida Healthy Kids

<u>Note:</u> Axert is FDA approved in pediatric individuals 12 years of age or older. Maxalt and Maxalt MLT is FDA approved for pediatric individuals ages 6-17. Axert requests for individuals age 12 years up to 18 years are exempt from step therapy. Maxalt and Maxalt MLT requests for individuals age 6 years up to 18 years are exempt from step therapy.

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

Key References:

Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2016. URL: http://www.clinicalpharmacology.com. Updated periodically.

DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. http://dailymed.nlm.nih.gov/dailymed/about.cfm.

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