

Market Applicability													
Market	DC	FL & FHK	FL MMA	FL LTC	GA	KY	MD	NJ	NV	NY	TN	TX	WA
Applicable	X	X	NA	NA	X	X	X	X	X	X	NA	NA	NA

*FHK- Florida Healthy Kids

Gralise (gabapentin extended-release)

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

Medications	Quantity Limit
Gralise (gabapentin extended-release)	May be subject to quantity limit

APPROVAL CRITERIA

Requests for Gralise (gabapentin extended release) may be approved if the following criteria are met:

- I. Individual has had a trial (medication samples/coupons/discount cards are excluded from consideration as a trial) of immediate release gabapentin; **AND**
- II. Individual is 18 years of age or older; **AND**
- III. Individual has a diagnosis of post-herpetic neuralgia (PHN).

Gralise (gabapentin extended release) may not be approved for the following:

- I. Individual has a CrCl less than 30 ml/min or undergoing hemodialysis.

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

PAGE 1 of 2 05/22/2019
New Program Date 05/22/2017

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.
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Applicable	X	X	NA	NA	X	X	X	X	X	X	NA	NA	NA

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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: February 15, 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.; 2018; Updated periodically.

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