

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

*FHK- Florida Healthy Kids

Migranal (dihydroergotamine mesylate) Nasal Spray

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

Medications	Quantity Limit
Migranal (dihydroergotamine mesylate) Nasal Spray	1 kit (8 amps) per 30 days

APPROVAL CRITERIA

Requests for Migranal (dihydroergotamine mesylate) Nasal Spray 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 and inadequate response or intolerance to two preferred triptan agents;
Preferred agents: sumatriptan tablet, naratriptan tablet
AND
- II. For approval of up to a maximum of 2 kits per 30 days*, the individual must meet the following criteria:
 - A. Individual has a diagnosis of migraine headaches; **AND**
 - B. Individual has had a previous trial (medication samples/coupons/discount cards are excluded from consideration as a trial) and an inadequate response to **one** of the following daily preventative therapies (AAN/AHA 2012/2015, ICSI 2013):
 1. A tricyclic antidepressant [such as but not limited to amitriptyline, doxepin]; **OR**
 2. A beta blocker [such as but not limited to metoprolol tartrate, propranolol, timolol, atenolol, nadolol, nebivolol]; **OR**
 3. A calcium channel blocker [such as but not limited to nifedipine, verapamil]; **OR**
 4. An ACE inhibitor [such as but not limited to lisinopril]; **OR**
 5. An angiotensin receptor blocker (ARB) [such as but not limited to candesartan]; **OR**
 6. An alpha-2 agonist [such as but not limited to guanfacine]; **OR**
 7. An antiepileptic [such as but not limited to divalproex sodium, sodium valproate, topiramate, carbamazepine, gabapentin]; **OR**
 8. Other select antidepressants [such as but not limited to venlafaxine]; **OR**
 9. Cyproheptadine (Periactin).

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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***Note:** Per package insert, studies have shown no additional benefit from acute doses greater than 2.0 mg for a single migraine administration. The safety of doses greater than 3.0 mg in a 24 hour period and 4.0 mg in a 7 day period has not been established.

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.: 2017. 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>. Accessed January 30, 2017.

DrugPoints® System (electronic version). Truven Health Analytics, Greenwood Village, CO. Updated periodically.

Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2017; Updated periodically.

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