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CRX-ALL-0066-18

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### Nuedexta

*(dextromethorphan hydrobromide and quinidine sulfate)*

#### Override(s)

<table>
<thead>
<tr>
<th>Override(s)</th>
<th>Approval Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior Authorization</td>
<td>1 year</td>
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#### Medications

<table>
<thead>
<tr>
<th>Medications</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>Nuedexta (dextromethorphan hydrobromide and quinidine sulfate)</td>
<td>May be subject to quantity limit</td>
</tr>
</tbody>
</table>

#### APPROVAL CRITERIA

Requests for Nuedexta (dextromethorphan hydrobromide and quinidine sulfate) may be approved if the following criteria are met:

I. Individual is 18 years of age or older; **AND**

II. Individual has a diagnosis of pseudobulbar affect (PBA); **AND**

III. Individual has a concomitant diagnosis with an unrelated neurologic disease or injury [amyotrophic lateral sclerosis (AAN 2014; Pioro et al. 2010), multiple sclerosis (AAN 2016; Pioro et al, 2010), stroke (2016 AHA/ASA)].

Nuedexta (dextromethorphan hydrobromide/quinidine sulfate) may not be approved for the following:

I. Concomitant use with any of the following:
   A. Agents containing quinidine, quinine, or mefloquine; **OR**
   B. Agents that both prolong the QT interval and are metabolized by CYP2D6 (for example, thioridazine, pimozide);

   **OR**

II. Concomitant monoamine oxidase inhibitor (MAOI) use or use in the preceding 14 days;

   **OR**

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III. Individual has any of the following cardiovascular conditions:
   A. Prolonged QT interval, congenital long QT syndrome, or history suggestive of torsades de pointes; **OR**
   B. Heart failure; **OR**
   C. Complete atrioventricular (AV) block without an implanted pacemaker or at high-risk of a complete AV block.

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**Market Applicability**

<table>
<thead>
<tr>
<th>Market</th>
<th>DC</th>
<th>FL &amp; FHK</th>
<th>FL MMA</th>
<th>FL LTC</th>
<th>GA</th>
<th>KS</th>
<th>KY</th>
<th>LA</th>
<th>MD</th>
<th>NJ</th>
<th>NV</th>
<th>NY</th>
<th>TN</th>
<th>TX</th>
<th>WA</th>
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<tbody>
<tr>
<td>Applicable</td>
<td>X</td>
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**State Specific Mandates**

<table>
<thead>
<tr>
<th>State name</th>
<th>Date effective</th>
<th>Mandate details (including specific bill if applicable)</th>
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<tbody>
<tr>
<td>N/A</td>
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</table>

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**Key References:**

Updated periodically.


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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