

Aimovig (erenumab-aooe) Ajovy (fremanezumab-vfrm) Emgality (glacanezumab-gnlm) Vyepti (eptinezumab-jjmr) Effective 04/01/2022

Plan	☐ MassHealth UPPL☒ Commercial/Exchange	Prior Authorization ☐ Quantity Limit ☐ Step Therapy		
Benefit	☑ Pharmacy Benefit☑ Medical Benefit			
Specialty Limitations	N/A			
Contact Information	Medical and Specialty Medications			
	All Plans P	hone: 877-519-1908	Fax: 855-540-3693	
	Non-Specialty Medications			
	All Plans P	hone: 800-711-4555	Fax: 844-403-1029	
Exceptions	N/A			

Overview

Aimovig, Ajovy, Emgality and Vyepti are calcitonin gene-related peptide receptor (CGRP) antagonists indicated for the prophylactic treatment of migraines in adults and episodic cluster headaches (**Emgality only**). Aimovig, Ajovy and Emgality are subcutaneous injections. Vyepti is an IV infusion and is covered on the medical benefit only.

Coverage Guidelines

Authorization may be granted for members new to the plan who are currently receiving treatment with the requested medication, excluding when the product is obtained as samples or via manufacturer's patient assistance programs

OR

Authorization may be granted when one of the following criteria is met:

Prophylactic Treatment of Migraines

Authorizations may be granted for the prophylactic treatment of migraines when the following criteria are met:

- 1. The member is \geq 18 years of age
- 2. The member has been experiencing at least 4 migraine days per month
- 3. The member has had an inadequate response to a trial of at least TWO different prophylactic migraine medications each with different mechanisms of action (a total of 2 required trials) that have each been tried for at least 60 days in duration within the past 3 years. Both trials must be from Level A or Level B categories within the American Academy of Neurology Guidelines (AAN) (see Appendix A)
- 4. The member is not currently using any other CGRP for the treatment of migraines

Note: triptans will not be considered as prophylactic options

Episodic Cluster Headaches

Authorization for Emgality for the treatment of episodic cluster headaches may be granted when the following criteria are met:

- 1. The member is ≥ 18 years of age
- 2. The member has experienced at least 5 episodes of cluster headaches within the past 12 months
- 3. The member has had an inadequate response to a trial of injectable sumatriptan or intranasal sumatriptan or intranasal zolmitriptan

Continuation of Therapy

Reauthorizations may be approved when physician assessment is submitted documenting improvement as evidenced by a decrease in frequency and severity of migraines or cluster headaches.

Limitations

- 1. Initial approvals will be granted for to 3 months
- 2. Reauthorizations will be granted for 12 months
- 3. The following quantity limits apply

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Aimovig 70mg/mL	1 pen per 30 days	
Aimovig 140mg/mL	1 pen per 30 days	
Ajovy 225mg/1.5mL pre-filled syringe and	1 pen per 30 days or 3 pens (675mg) every 90 days	
Ajovy 225mg/1.5mL autoinjector		
Emaglity	Migraines 2 pens (240mg) for initial month, then 1 pen per 30 days Cluster headaches Loading dose: 3x100mg (3 consecutive doses) Maintenance dose: 300mg every 4 weeks	
Vypeti 100mg/mL	100mg (1mL) every 3 months	

Appendix

AAN Medication Guideline Recommendations for Migraine Prevention

- 1. **Level A.:** The following medications are established as effective and should be offered for migraine prevention.
 - Antiepileptic drugs (AEDs): divalproex sodium, sodium valproate, topiramate
 - Beta-blockers: metoprolol, propranolol, timolol
- 2. **Level B.** The following medications are probably effective and should be considered for migraine prevention:
 - Antidepressants: amitriptyline
 - Antidepressants: venlafaxine
 - Beta-blockers: atenolol, nadolol

References

- 1. Aimovig (erenumab-aooe) [prescribing information]. Thousand Oaks, CA: Amgen Inc; March 2019
- 2. Ajovy (fremanezumab-vfrm) [prescribing information]. North Wales, PA: Teva Pharmaceuticals; September 2018
- 3. Emgality (galcanezumab-gnlm) [prescribing information]. Indianapolis, IN: Eli Lilly and Company; June 2019



- 4. Vyepti (eptinezumab) [prescribing information]. Bothell, WA: Lundbeck Seattle BioPharmaceuticals Inc; February 2020
- 5. Tepper SJ. History and review of anti-calcitonin gene-related peptide (CGRP) therapies: from translational research to treatment. Headache. 2018;58(suppl 3):238-275. doi: 10.1111/head.13379
- 6. Botox (OnabotulinumtoxinA) [prescribing information]. Irvine, CA: Allergan; May 201Iclusig (ponatinib) [prescribing information]. Cambridge, MA: Ariad Pharmaceuticals Inc; October 2018
- 7. Evidence-based guideline update: pharmacologic treatment for episodic migraine prevention in adults Report of the Quality Standards Subcommittee of the American Academy of Neurology and the American Headache Society Guideline Developer(s): 2000 Sep (revised 2012 Apr 24)
- 8. Headache Classification Committee of the International Headache Society (IHS) The International Classification of Headache Disorders, 3rd edition. Cephalalgia 2018; 38:1
- 9. Koppen H, Stolwijk J, Wilms EB, et al. Cardiac monitoring of high-dose verapamil in cluster headache: An international Delphi study. Cephalalgia 2016; 36:1385
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- 11. Ekbom K, Monstad I, Prusinski A, et al. Subcutaneous sumatriptan in the acute treatment of cluster headache: a dose comparison study. The Sumatriptan Cluster Headache Study Group. Acta Neurol Scand 1993; 88:63
- 12. Magnoux E, Zlotnik G. Outpatient intravenous dihydroergotamine for refractory cluster headache. Headache 2004; 44:249
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- 14. Ekbom K, Hardebo JE. Cluster headache: aetiology, diagnosis and management. Drugs 2002; 62:61.
- 15. Dodick DW, Capobianco DJ. Treatment and management of cluster headache. Curr Pain Headache Rep 2001; 5:83
- 16. Neurol Sci. 2017 May;38(Suppl 1):45-50. doi: 10.1007/s10072-017-2924-7.
- 17. Cluster headache: present and future therapy: PubMed
- 18. Dtsch Med Wochenschr. 2017 Mar;142(6):418-426. doi: 10.1055/s-0042-121336. Epub 2017 Mar 22. [Headache Treatment].:PubMed

Review History

04/17/2019 - Reviewed

07/01/2019 – Implemented

09/18/2019 - Added cluster headaches indication to Emgality

07/22/2020 – added new formulation of Ajovy autoinjector to criteria. Effective 8/1/20

11/18/2020 - Added new drug Vyepti to criteria. Effective 1/1/2021; separated out MH vs. Comm/Exch.

03/17/2021 - removed Aimovig 70mg as dose was discontinued. Effective 06/01/2021.

11/17/2021 – Reviewed and Updated; Criteria updated to Ajovy and Emgality as preferred products. Effective Date: 1/1/2022

01/19/2022 – Reviewed and Updated for Jan P&T; removed "The member has not been treated with Botox for migraines within the past 4 months" and "The member is not currently using Botox for the treatment of migraines". Effective 04/01/22.

9/21/2022 – Reviewed and Updated for Sept P&T; criteria updated for prophylactic treatment of migraines requiring TWO prophylaxis medications rather than 3 prophylaxis medications. For Aimovig, removed requirement of Emgality and Ajovy. Removed provider specialty.

