Market Applicability/Effective Date													
Market	FL & FHK	FL MMA	FL LTC	GA	KS	КҮ	MD	NJ	NV	NY	TN	TX	WA
Applicable	Х	NA	NA	Х	NA	Х	Х	Х	Х	Х	NA	NA	NA

<sup>\*</sup>FHK- Florida Healthy Kids

# **Neupro (rotigotine)**

Override(s)	Approval Duration						
Prior Authorization	1 year						

Medications	Quantity Limit					
Neupro (rotigotine)	N/A					

## **APPROVAL CRITERIA**

Requests for Neupro (rotigotine) may be approved if the following criteria are met:

- I. Individual is using for one of the following:
  - A. Idiopathic Parkinson's disease; OR
  - B. Moderate-to-severe Restless Legs Syndrome (RLS);

#### AND

- II. Individual has had a previous trial of and inadequate response or intolerance or has a contraindication to one of the following:
  - A. Mirapex (pramipexole); OR
  - B. Requip (ropinirole);

### OR

III. Individual is unable to swallow or take oral medications.

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

#### **Key References**:

PAGE 1 of 2 10/01/2018

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.

Market Applicability/Effective Date													
Market	FL & FHK	FL MMA	FL LTC	GA	KS	КҮ	MD	NJ	NV	NY	TN	TX	WA
Applicable	Х	NA	NA	Χ	NA	Х	Х	Х	Х	Х	NA	NA	NA

<sup>\*</sup>FHK- Florida Healthy Kids

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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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