

Lemtrada (alemtuzumab)
Effective 01/01/2021

Plan	<input checked="" type="checkbox"/> MassHealth <input type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization <input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Benefit	<input type="checkbox"/> Pharmacy Benefit <input checked="" type="checkbox"/> Medical Benefit (NLX)		
Specialty Limitations	This medication has been designated specialty and must be filled at a contracted specialty pharmacy.		
Contact Information	Specialty Medications		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	Non-Specialty Medications		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	Medical Specialty Medications (NLX)		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
Exceptions	N/A		

Overview

Lemtrada is a monoclonal antibody disease-modifying drugs indicated for relapse remitting multiple sclerosis (RRMS) and active secondary progressive multiple sclerosis (SPMS) in adults

FDA Approved indication: Lemtrada is indicated for the treatment of patients with relapsing forms of multiple sclerosis (MS). Because of its safety profile, the use of Lemtrada should generally be reserved for patients who have had an inadequate response to two or more drugs indicated for the treatment of MS.

All other indications are considered experimental/investigational and are not covered benefits.

Coverage Guidelines

First Course – Relapsing forms of multiple sclerosis

Authorization of 30 days (5 doses) may be granted to members with a diagnosis of a relapsing form of multiple sclerosis who have had an inadequate response to two or more drugs indicated for multiple sclerosis.

Second Course – Relapsing forms of multiple sclerosis

Authorization of 30 days (3 doses) may be granted to members with a diagnosis of a relapsing form of multiple sclerosis who have completed one previous course of therapy.

Limitations

All approvals will be granted for 30 days.

References

1. Lemtrada [package insert]. Cambridge, MA: Genzyme Corporation; July 2016.
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Review History

11/18/2020 – Transitioned from SGM to Custom Criteria; separated MH vs. Comm/Exch

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