Overview
Nurtec, Reyvow and Ubrelvy are calcitonin gene-related peptide receptor antagonists (CGRP) indicated for the treatment of acute migraines in adults. Reyvow and Ubrelvy are available as oral tablets. Nurtec is available as an oral disintegrating tablet (ODT).

Coverage Guidelines
Authorization may be granted for members new to AllWays Health Partners who are currently receiving treatment with Nurtec, Reyvow or Ubrelvy, excluding when the product is obtained as samples or via manufacturer’s patient assistance program

OR
Authorization may be granted for Nurtec or Reyvow for members who meet all following criteria and documentation has been submitted:
1. The member is using medication for the treatment of migraine headaches
2. The member is ≥18 years of age
3. The prescriber is a neurologist, or a neurology consult is provided
4. The member meets one of the following:
   a. Has had an inadequate response, or adverse drug reaction to two different triptan agents
   b. Has a contraindication to all oral triptans.

Authorization may be granted for Nurtec for members who meet all following criteria and documentation has been submitted:
1. The member is using medication for the prevention of migraine headaches
2. The member is ≥18 years of age
3. The member has inadequate response, intolerance or contraindication to TWO of the following agents:
   a. Beta-adrenergic blockers (e.g. metoprolol, propranolol, timolol)
   b. Antiepileptic agents (e.g. divalproex sodium, valproic acid, topiramate)
   c. Antidepressants (e.g. amitriptyline, venlafaxine)

Authorization may be granted for **Ubrelvy** for members who meet all the following criteria and documentation has been submitted:
1. The member is using medication for the treatment of migraine headaches
2. The member is ≥18 years of age
3. The prescriber is a neurologist, or a neurology consult is provided
4. The member meets one of the following:
   a. Has had an inadequate response, or adverse drug reaction to two different triptan agents
   b. Has a contraindication to all oral triptans.
5. The member has had an inadequate response, intolerance or has a contraindication to Nurtec

**Limitations**
1. Approvals will be granted for 12 months
2. The following quantity limits apply:

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<thead>
<tr>
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<th>Limitation</th>
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<tbody>
<tr>
<td>Nurtec ODT 75mg</td>
<td>15 tablets per 30 days</td>
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<tr>
<td>Reyvow 50mg</td>
<td>Initial Dose: 4 tablets</td>
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<td>Maintenance Dose: 8 tablets per 30 days</td>
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<tr>
<td>Reyvow 100mg</td>
<td>8 tablets per 30 days</td>
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<tr>
<td>Ubrelvy 50mg and 100mg</td>
<td>16 tablets per 30 days</td>
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</tbody>
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**References**
1. Reyvow (lasmiditan) [prescribing information]. Indianapolis, IN: Lilly USA, LLC; July 2020.
5. Ubrelvy (ubrogepant) [prescribing information]. Madison, NJ: Allergan USA Inc; December 2019

**Review History**
09/22/2021 – Reviewed and Updated at September P&T; added new indication for Nurtec ODT for prevention of migraine headaches; separated out Comm/Exch and MH criteria. Effective 12/01/2021.

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