

PROVIDER QUICK POINTS

PROVIDER INFORMATION



November 27, 2019

New Drug, Reyvow™ (lasmiditan) Will Require Prior Authorization (PA)

Reyvow™ (lasmiditan) was approved on October 11, 2019 for acute treatment of migraine in adults. Reyvow™ (lasmiditan) will not be available until the Drug Enforcement Administration (DEA) determines the controlled substance classification within 90 days. Upon launch, Reyvow™ (lasmiditan) will require PA prior to use. The criteria for approval are based on FDA approved product labeling. Requests will be reviewed when patient-specific documentation has been provided.

The intent of this PA is to ensure appropriate selection of patients for treatment according to FDA approved product labeling. The Reyvow™ (lasmiditan) PA defines appropriate use as use in patients who have an FDA approved indication, who are receiving the FDA labeled dose, and who do not have any FDA labeled contraindications.

As stewards of healthcare expenditures for our subscribers, we are charged with ensuring they receive appropriate, quality care while also managing overall costs. The prior authorization process ensures that the health service or drug being proposed is medically necessary, and reflective of evidence-based medicine and industry standards, prior to treatment. This process helps us manage the cost and quality of care appropriately for our members

Products Impacted

This PA program applies to commercial lines of business and the following Minnesota Health Care Programs.

- Families and Children [formerly known as Prepaid Medical Assistance Program (PMAP)]
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+)

The criteria for approval are based on FDA approved product labeling. Drug-specific PA criteria will be developed and posted once available. Medical policy can be accessed using the Blue Cross provider link.

- Access **providers.bluecrossmn.com**
- Under Tools & Resources, select “Medical Policy”, and read/accept the Blue Cross Medical Policy Statement
- Select the “+” (plus) sign next to “Medical and Behavioral Health Policies” to see the “Changes to Medical Policies” section.
- Select “Pharmacy Policies for Blue Cross and Blue Shield of Minnesota”
- Scroll through the Pharmacy UM Program Criteria to locate specific criteria

CoverMyMeds prior authorization request service

Prescribers can submit ePA drug requests for Blue Cross subscribers who have pharmacy benefits through Blue Cross by either submitting a request through [CoverMyMeds's](#) (CMM) free web portal or by sending an electronic NCPDP file to Prime through an integrated Electronic Medical Record (EMR) system during the e-prescribing process.

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- To access CMM, go to www.covermymeds.com
- The first time you use the portal to submit a PA, you will need to create a CMM account.
- For help using the CMM site select Support (top of the web page) to view FAQs, CMM physician training webinar offerings, and support options to help you get started.

Questions?

If you have questions for a member enrolled in a Minnesota Health Care Programs (MHCP) plan, please contact provider services at **1-866-518-8448**. Please contact provider services at **(651) 662-5200** or **1-800-262-0820** for all other questions.