

# Aimovig (erenumab-aooe)

#### **Coverage Criteria:**

- 1. Prescribed by or in consultation with a neurologist; and,
- 2. Patient is diagnosed with chronic migraine or episodic migraine not related to a similar diagnosis (such as cluster headaches, TMD, rebound headache, etc.); and,
- 3. Patient is  $\geq$  18 years of age; and,
- 4. Patient is experiencing at least 4 migraine days per month over at least 3 consecutive months; and.
- 5. Patient has tried and failed at least two preventative drug therapies, meeting the following criteria:
  - a. Therapies must include at least two of the following four drug categories: beta blocker, calcium channel blocker, anticonvulsant or antidepressant; and,
  - b. Failure of each therapy is defined as at least 12 weeks of treatment; and,
    - i. Less than a 50% reduction in migraines from baseline; or,
    - At least 1 migraine exacerbation requiring emergency room treatment or hospitalization while on therapy; and,
- 6. Patients prescribed Aimovig must try and fail Ajovy and Emgality, for a duration of at least 12 weeks each; and,
- 7. Aimovig is not used in combination with botulinum toxin; and,
- 8. Prescribed within the FDA approved dosing regimen.

#### **Coverage Duration:**

Initial authorization will be provided for 6 months Reauthorization will be provided for 12 months

### Other Criteria:

Aimovig 70 mg auto-injector: 1 syringe per 30 days Aimovig 140 mg auto-injector: 1 syringe per 30 days

The provision of pharmaceutical samples (from the prescriber or manufacturer assistance/free trial programs) does not guarantee coverage. All criteria must be met in order to obtain coverage. In addition, the use of pharmaceutical samples will not be considered when evaluating the member's medical condition or prior prescription history for medications.

## **Renewal Criteria:**

Re-authorization will be provided for 12 months for patients who continue to meet criteria 2, 3, 6, 7 and 8 above. In addition, approval requires medical documentation demonstrating a positive effect from the medication defined as a reduction of at least 2 migraine days per month from baseline.

P&T Date: 5/9/22 Effective Date: 5/23/22