



**STANDARD COMMERCIAL DRUG FORMULARY
PRIOR AUTHORIZATION GUIDELINES**

ISTRADEFYLLINE

Generic	Brand	HICL	GCN	Exception/Other
ISTRADEFYLLINE	NOURIANZ	45994		

GUIDELINES FOR USE

1. Does the patient have a diagnosis of Parkinson's disease (PD) and meet **ALL** of the following criteria?

- The patient is 18 years of age or older
- The patient is experiencing 'OFF' episodes
- Nourianz will be used concurrently with levodopa/carbidopa
- The patient had a previous trial of, failure of, or contraindication to **TWO** Parkinson's agents from TWO different therapeutic classes: dopamine agonists (e.g., ropinirole, pramipexole, rotigotine), monoamine oxidase-inhibitors (e.g., selegiline, rasagiline), or catechol-O-methyl transferase inhibitors (e.g., entacapone, tolcapone)

If yes, **approve for lifetime by HICL with a quantity limit of #1 per day.**

If no, do not approve.

DENIAL TEXT: The guideline named **ISTRADEFYLLINE (Nourianz)** requires a diagnosis of Parkinson's disease (PD). In addition, the following criteria must be met:

- The patient is 18 years of age or older
- The patient is experiencing 'OFF' episodes
- Nourianz will be used concurrently with levodopa/carbidopa
- The patient had a previous trial of, failure of, or contraindication to **TWO** Parkinson's agents from TWO different therapeutic classes: dopamine agonists (e.g., ropinirole, pramipexole, rotigotine), monoamine oxidase-inhibitors (e.g., selegiline, rasagiline), or catechol-O-methyl transferase inhibitors (e.g., entacapone, tolcapone)

RATIONALE

For further information, please refer to the Prescribing Information and/or Drug Monograph for Nourianz.

REFERENCES

- Nourianz [Prescribing Information]. Bedminster, NJ: Kyowa Kirin, Inc.; September 2019.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A

Commercial Effective: 01/01/20

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P&T Approval: 10/19