LEVODOPA

Generic	Brand	HICL	GCN	Exception/Other
LEVODOPA	INBRIJA	01897		ROUTE = INHALATION

GUIDELINES FOR USE

INITIAL CRITERIA (NOTE: FOR RENEWAL CRITERIA SEE BELOW)

1. Does the patient have a diagnosis of Parkinson's disease and meet **ALL** of the following criteria?
   - Inbrija is being used for intermittent treatment of OFF episodes associated with Parkinson's disease
   - The patient is currently being treated with carbidopa/levodopa
   - Therapy is prescribed by or in consultation with a neurologist
   - The patient is **NOT** currently taking more than 1600mg of levodopa per day
   - The physician has optimized drug therapy as evidenced by **BOTH** of the following:
     - Change in levodopa/carbidopa dosing strategy or formulation
     - Trial of or contraindication to at least **TWO** Parkinson's disease agents from **TWO** different classes of the following: dopamine agonist (e.g., ropinirole, pramipexole, rotigotine), monoamine oxidase-inhibitors (MAO-I) (e.g., selegiline, rasagiline), catechol-o-methyl transferase (COMT) inhibitors (e.g., entacapone, tolcapone), adenosine receptor antagonist A2A (e.g., istradefylline)

   If yes, **approve for 6 months by GPID with a quantity limit of #10 capsules per day.**
   APPROVAL TEXT: Renewal requires physician attestation of patient improvement with motor fluctuations during OFF episodes with the use of Inbrija (e.g., improvement in speech, facial expression, tremor at rest, action or postural tremor of hands, rigidity, finger taps, hand movements, rapid alternating movements of hands, posture, leg agility, arising from chair)

   If no, do not approve.
   INITIAL DENIAL TEXT: The guideline named **LEVODOPA (Inbrija)** requires a diagnosis of Parkinson's disease. In addition, the following criteria must be met:
   - Inbrija is being used for intermittent treatment of OFF episodes associated with Parkinson's disease
   - The patient is currently being treated with carbidopa/levodopa
   - Treatment is prescribed by or in consultation with a neurologist
   - The patient is **NOT** currently taking more than 1600mg of levodopa per day
   - The physician has optimized drug therapy as evidenced by **BOTH** of the following:
     - Change in levodopa/carbidopa dosing strategy or formulation
     - Trial of or contraindication to at least **TWO** Parkinson's disease agents from TWO different classes of the following: dopamine agonist (e.g., ropinirole, pramipexole, rotigotine), monoamine oxidase-inhibitors (MAO-I) (e.g., selegiline, rasagiline), catechol-o-methyl transferase (COMT) inhibitors (e.g., entacapone, tolcapone), adenosine receptor antagonist A2A (e.g., istradefylline)

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LEVODOPA

GUIDELINES FOR USE (CONTINUED)

RENEWAL CRITERIA

1. Does the patient have a diagnosis of Parkinson's disease **AND** meet the following criterion?
   - Physician attestation of patient improvement with motor fluctuations during OFF episodes with the use of Inbrija (e.g., improvement in speech, facial expression, tremor at rest, action or postural tremor of hands, rigidity, finger taps, hand movements, rapid alternating movements of hands, posture, leg agility, arising from chair)

   If yes, **approve for 12 months by GPID with a quantity limit of #10 capsules per day.**
   If no, do not approve.
   RENEWAL DENIAL TEXT: The guideline named **LEVODOPA (Inbrija)** requires a diagnosis of Parkinson's disease. In addition, the following must be met:
   - Physician attestation of patient improvement with motor fluctuations during OFF episodes with the use of Inbrija (e.g., improvement in speech, facial expression, tremor at rest, action or postural tremor of hands, rigidity, finger taps, hand movements, rapid alternating movements of hands, posture, leg agility, arising from chair)

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

REFERENCES

- Inbrija [Prescribing Information]. Ardsley, NY: Acorda Therapeutics, Inc., September 2019.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A
Commercial Effective: 01/01/20
Created: 05/19
Client Approval: 11/19
P&T Approval: 10/19