

### **UnitedHealthcare Individual & Family ACA Marketplace Plans Clinical Pharmacy Program Guidelines for Antiparkinson Agents**

Program	Step Therapy
Medication	Rasagiline (generic Azilect)
Issue Date	9/2020
Pharmacy and	11/2022
Therapeutics	
Approval Date	
Effective Date	2/2023

#### 1. Background:

Rasagiline (generic Azilect) is an antiparkinson agent indicated for the treatment of Parkinson's disease as monotherapy or as adjunct therapy in patients taking / not taking levodopa, with or without other Parkinson's Disease drugs.

Step Therapy programs are utilized to encourage the use of lower cost alternatives for certain therapeutic classes. This program requires a member to try selegiline before providing coverage for Rasagiline (generic Azilect).

## 2. Coverage Criteria<sup>a</sup>:

- A. Rasagiline (generic Azilect) will be approved based on the following criterion:
  - 1. History of failure, contraindication, or intolerance to the following (list reason for therapeutic failure, contraindication, or intolerance):
    - a. selegiline (generic Eldepryl)

### Authorization will be issued for 12 months

<sup>a</sup> State mandates may apply. Any federal regulatory requirements and the member specific benefit plan coverage may also impact coverage criteria. Other policies and utilization management programs may apply.

#### 3. Additional Clinical Rules:

• Notwithstanding Coverage Criteria, UnitedHealthcare may approve initial and reauthorization based solely on previous claim/medication history, diagnosis codes (ICD-10) and/or claim logic. Use of automated approval and re-approval processes varies by program and/or therapeutic class.

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• Supply limits may be in place

# 4. References:

1. Rasagiline [package insert]. Overland Park, KS. Teva Neuroscience; April 2021.

Program	Step Therapy – Antiparkinson Agents
Change Control	
Date	Change
10/2016	New program.
1/2017	Administrative change. Clarified applies to Essential PDL only.
10/2017	Annual review. State mandate reference language updated.
10/2018	Annual review. Updated references.
10/2019	Annual review. Administrative changes.
10/2020	Renamed policy to Antiparkinson Agents, revised background,
	added 90 day supply within the past 120 days language to
	operationalize step therapy bypass state mandate, and removed
	brand Azilect as a target drug.
9/2021	Updated references. Updated background to remove automation
	language.
11/2022	Annual review, no changes to clinical criteria.