

Pharmacy Drug Policy Checklist

POLICY NAME	Dalfampridine	POLICY #	1854P

Criteria

Cov	erage Criteria
	1.1 Diagnosis of multiple sclerosis (MS) Prescribed by a neurologist (nervous system doctor)
	1.2 Patient must be 18 years of age or older
	1.3 Ambulatory (able to walk)
	1.4 No history of seizures
	 1.5 25-foot walk Test Completion Initial coverage: Member has completed two (2) in office 25-foot timed walk tests (with no more than five (5) minute break between tests) AND the average time is submitted as baseline Continued coverage: Member has achieved a 20% decrease in time to walk 25 feet from baseline while on treatment with Ampyra All walk tests must be conducted in office by ordering prescriber
	1.6 Documentation that patients with relapsing-remitting multiple sclerosis are on concurrent therapy with a disease modifying agent (such as Aubagio)
Autl	horization Criteria
	2.1 Initial approval: 12 months
	2.2 Subsequent approvals: 12 months approval based on therapeutic response defined as at least a 20% decrease in the average 25 foot walk test time compared to baseline
Disc	continuation Criteria
	3.1 Experience a seizure, OR
	3.2 Kidney impairment with a creatinine clearance less than (<) 80mL/min, OR
	3.3 Wheelchair bound Criteria References