Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists

Policy

Blue Cross and Blue Shield of Kansas City (Blue KC) will provide coverage for Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists, when it is determined to be medically necessary because the criteria shown below are met.

- Aimovig (erenumab-aooe)
- Ajovy (fremanezumab-vfrm)
- Emgality (galcanezumab-gnlm)

When Policy Topic is covered

A CGRP may be considered medically necessary when the following criteria are met:

1. **Migraine Headache Prevention**: Approve for 1 year if the patient meets the following criteria (A, B, C, and D):
   
   A) Patient is ≥ 18 years of age; AND
   
   B) Patient has ≥ 4 migraine headache days per month (prior to initiating a migraine-preventative medication); AND
   
   C) Patient has tried at least two standard prophylactic pharmacologic therapies, each from a different pharmacologic class (e.g., angiotensin receptor blocker, angiotensin converting enzyme inhibitor, anticonvulsant, β-blocker, calcium channel blocker, tricyclic antidepressant, other antidepressant), and has had inadequate responses to those therapies according to the prescribing physician; AND
   
   D) Patient meets ONE of the following (i or ii):
      
      i. Patient has tried at least one triptan therapy; OR
      ii. Patient has a contraindication to triptan(s) according to the prescribing physician.

When Policy Topic is not covered

CGRPs have not been shown to be effective, or there are limited or preliminary data or potential safety concerns that are not supportive of general approval for the following conditions and are considered investigational. Rationale for non-
coverage for these specific conditions is provided below. (Note: This is not an exhaustive list of Conditions Not Recommended for Approval.)

1. **Acute Treatment of Migraine.** Aimovig, Ajovy, Emgality has not been studied for the acute treatment of migraine.

2. **Cluster Headache.** Aimovig has not been studied in patients with cluster headache. The pivotal trials of Aimovig excluded patients with this condition.\textsuperscript{6,7} Ajovy has not been found to be effective in a Phase III clinical trial in patients with chronic cluster headache.\textsuperscript{6} A trial of Ajovy in episodic cluster headache is on-going.

3. **Hemiplegic Migraine.** Aimovig has not been studied in patients with hemiplegic migraine. The pivotal trials of Aimovig excluded patients with this condition.\textsuperscript{6,7}

4. **Combination Therapy Other CGRP.** Ajovy, Aimovig, and Emgality are calcitonin gene-related peptide (CGRP) antagonists and have not been studied for use in combination with another agent in the same class.\textsuperscript{1,9}

5. Coverage is not recommended for circumstances not listed in the Recommended Authorization Criteria. Criteria will be updated as new published data are available.

**Considerations**

CGRPs require prior authorization through the Clinical Pharmacy Department.

This Blue Cross and Blue Shield of Kansas City policy statement was developed using available resources such as, but not limited to: Food and Drug Administration (FDA) approvals, Facts and Comparisons, National specialty guidelines, local medical policies of other health plans, Medicare (CMS), local providers.

**Description of Procedure or Service**

Aimovig, a calcitonin gene-related peptide (CGRP) receptor antagonist, is indicated for the preventive treatment of migraine in adults.\textsuperscript{1} Aimovig is a human monoclonal antibody that binds to the CGRP receptor and antagonizes CGRP receptor function. The recommended dosage of Aimovig is 70 mg injected subcutaneously (SC) once monthly. Some patients may benefit from a dosage of 140 mg SC once monthly, which is administered as two consecutive SC injections of 70 mg each.

Ajovy, a calcitonin gene-related peptide (CGRP) antagonist, is indicated for the preventive treatment of migraine in adults.\textsuperscript{1} Ajovy is a human monoclonal antibody that binds to the CGRP ligand and blocks its binding to the receptor. The recommended dosage of Ajovy is 225 mg injected subcutaneously (SC) once monthly or 675 mg every 3 months (quarterly), which is administered as three
consecutive SC injections of 225 mg each. A healthcare professional, patient, and/or caregiver may administer Ajovy.

Emgality, a calcitonin gene-related peptide (CGRP) antagonist, is indicated for the preventive treatment of migraine in adults. Emgality is a human monoclonal antibody that binds to the CGRP ligand and blocks its binding to the receptor. The recommended dosage of Emgality is 240 mg (two consecutive subcutaneous injections of 120 mg each) once as a loading dose, followed by monthly doses of 120 mg injected subcutaneously. Emgality is intended for patient self-administration.

Disease Overview
Migraine is a common, chronic condition marked by paroxysmal, unilateral attacks of moderate-to-severe throbbing headache which is aggravated by routine physical activity (e.g., walking or climbing stairs) and associated with nausea, vomiting, and/or photophobia and phonophobia. Migraine headache episodes typically last 4 to 72 hours if untreated. Migraine affects approximately 13% of US adults. Migraines have been defined as chronic or episodic. Chronic migraine is described by the International Headache Society as headache occurring on ≥ 15 days/month for > 3 months and has the features of migraine headache on ≥ 8 days/month. Episodic migraine is characterized by headaches that occur < 15 days/month. Patients with episodic migraine may transform to chronic migraine over time at a rate of about 2.5% of episodic-migraine patients/year. Potential strategies for preventing migraine transformation include preventing and treating headaches, lifestyle modifications, or effective management of comorbidities (e.g., obesity, obstructive sleep apnea, depression, anxiety). Episodic migraine is more common than chronic migraine; however, chronic migraine is associated with a markedly greater personal and societal burden.

Guidelines
The American Academy of Neurology (AAN) published an evidence-based guideline update for the prevention of episodic migraine (2012) recommending divalproex sodium, sodium valproate, topiramate, metoprolol, propranolol, and timolol as effective for migraine prevention and should be offered to patients with migraine to reduce migraine attack frequency and severity (Level A). The guidelines have not been updated to address Aimovig, Ajovy or Emgality.

Rationale
Prior authorization is required to ensure the safe, clinically appropriate and cost effective use of CGRPs while maintaining optimal therapeutic outcomes.

References


**Billing Coding/Physician Documentation Information**

| NA   | Pharmacy benefit |

**Additional Policy Key Words**

Triptans, Botox

**Policy Implementation/Update Information**

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
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<tbody>
<tr>
<td>07/2018</td>
<td>New policy titled Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist-Aimovig</td>
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<tr>
<td>03/2019</td>
<td>Changed policy name to Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists. Added Ajovy and Emgality.</td>
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<tr>
<td>05/2019</td>
<td>Removed step for Ajovy</td>
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determining eligibility for coverage. The medical policies contained herein are for informational purposes. The medical policies do not constitute medical advice or medical care. Treating health care providers are independent contractors and are neither employees nor agents Blue KC and are solely responsible for diagnosis, treatment and medical advice. No part of this publication may be reproduced, stored in a retrieval system or transmitted, in any form or by any means, electronic, photocopying, or otherwise, without permission from Blue KC.