Nurtec™ ODT (rimegepant) orally disintegrating tablets 75 mg

Completing a Letter of Medical Necessity for Nurtec™ ODT (rimegepant)

A Letter of Medical Necessity is an important document to help support your rationale for treatment with Nurtec ODT. The purpose of the letter is to explain why you feel that Nurtec ODT is specifically medically necessary in instances when your patient may not meet the health plan's full criteria for approving coverage, or if you're unsure of the coverage criteria. It can also accompany a prior authorization/reauthorization request or an appeal to reassess a coverage denial for Nurtec ODT. The information below can help guide you and your office through the process of drafting and submitting a Letter of Medical Necessity.

Letter of Medical Necessity Best Practices

- If your patient's health plan has a coverage policy in place for Nurtec ODT, first review the policy to determine the criteria that your patient meets
- Confirm with the health plan if the letter should be addressed to a specific person or department
- Identify additional documents to help support your rationale for treatment with Nurtec ODT, which may include:
  - Relevant patient medical records
  - Nurtec ODT Prescribing Information
  - Nurtec ODT FDA approval letter (this can be found on the FDA website)
  - Peer-reviewed literature, including published clinical trial data for Nurtec ODT
- Draft the letter on your practice's letterhead
- Be sure to include the following information about your patient at the beginning of the letter:
  - Name
  - Date of birth
  - Health plan policy and group numbers
  - Date of request
- State that you are writing on behalf of the patient to request approval of Nurtec ODT (rimegepant)
- Explain why Nurtec ODT is an appropriate treatment for your patient, and if applicable, address any coverage criteria that your patient does not meet
  - If appropriate, include clinical trial results from peer-reviewed literature or the Nurtec ODT Prescribing Information to support the clinical rationale
- State why the preferred agents would not be appropriate therapies for your patient
- Describe your patient's condition with appropriate ICD-10-CM codes (eg, G43: Migraine, G43.0: Migraine without aura, G43.1: Migraine with aura, G43.9: Migraine, unspecified),[1] including existing comorbidities and allergies

To request information on Nurtec ODT, submit a Medical Inquiry Request Form by contacting Biohaven at 1-833-4NURTEC (1-833-468-7832) or visiting www.Nurtec-HCP.com.

INDICATION

Nurtec ODT (rimegepant) is indicated for the acute treatment of migraine with or without aura in adults.

Limitations of Use

Nurtec ODT is not indicated for the preventive treatment of migraine.

Please see next page for Important Safety Information and click here for full Prescribing Information.

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Letter of Medical Necessity Best Practices (cont.)

- List your patient's current and previous therapies, including:
  - Dosage
  - Frequency
  - Dates of use
  - Reason(s) for discontinuation (eg, therapeutic failure, contraindications, intolerance/adverse events)
- Provide your contact information (eg, phone number, email address, fax number) in case the health plan needs to request more information
- List any additional documents included with the letter
- Submit the letter and documentation using the method preferred by the health plan (eg, fax, online portal)

Visit www.Nurtec-HCP.com/savings-support to download a Letter of Medical Necessity template for Nurtec ODT.

IMPORTANT SAFETY INFORMATION

Contraindications: Hypersensitivity to Nurtec ODT or any of its components.

Warnings and Precautions: If a serious hypersensitivity reaction occurs, discontinue Nurtec ODT and initiate appropriate therapy. Serious hypersensitivity reactions have included dyspnea and rash, and can occur days after administration.

Adverse Reactions: The most common adverse reaction was nausea (2% in patients who received Nurtec ODT compared to 0.4% in patients who received placebo). Hypersensitivity, including dyspnea and rash, occurred in less than 1% of patients treated with Nurtec ODT.

Drug Interactions: Avoid concomitant administration of Nurtec ODT with strong inhibitors of CYP3A4, strong or moderate inducers of CYP3A or inhibitors of P-gp or BCRP. Avoid another dose of Nurtec ODT within 48 hours when it is administered with moderate inhibitors of CYP3A4.

Use in Specific Populations: *Pregnant/breast feeding*: It is not known if Nurtec ODT can harm an unborn baby or if it passes into breast milk. *Hepatic impairment*: Avoid use of Nurtec ODT in persons with severe hepatic impairment. *Renal impairment*: Avoid use in patients with end-stage renal disease.

Please click here for full Prescribing Information.

Reference: 1. Center for Diseases Control and Prevention. ICD-10-CM tabular list of diseases and injuries. ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Publications/ICD10CM/2020. Updated June 19, 2019. Accessed September 25, 2020.

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