

<b>Title:</b>	<b>Clinical Programs</b>	<b>SECTION: 2.44</b>
<b>Program:</b>	<b>Lyrica (pregabalin)</b>	

**DESCRIPTION**

The purpose of this document is to provide approval criteria and guidelines for prior authorization of benefits (PAB) for Lyrica (pregabalin). Claims submitted without obtaining prior authorization of benefits will reject on the pharmacy claim system.

<b>Medication</b>	<b>Strength</b>	<b>Comments</b>
Lyrica (pregabalin)	25mg , 50mg, 75mg, 100mg, 150mg, 200mg, 225mg, 300mg capsules	N/A

**OVERRIDE(S)**

Prior Authorization of Benefits

**APPROVAL DURATION**

Lifetime

**APPROVAL CRITERIA**

- I. Member has a diagnosis of epilepsy or seizures **OR**
  
- II. Member has diagnosis of neuropathic pain associated with diabetic peripheral neuropathy **AND** member had a trial of one of the following medications or any other agent that is FDA approved or medically accepted for neuropathic pain associated with diabetic peripheral neuropathy within the past 180 days or :
  - Cymbalta
  - Carbamazepine
  - Tricyclic antidepressants
  - Fluphenazine
  - Gabapentin
  - Trazadone

**OR**

- III. Member has a diagnosis of post herpetic neuralgia **AND** member had a trial of one of the following medications or any other agent that is FDA approved or medically accepted for post herpetic neuralgia within the past 180 days:
  - Carbamazepine
  - Gabapentin
  - Lidocaine patch (Lidoderm)
  - Tricyclic antidepressants

**OR**

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- IV.** Member has a diagnosis of Fibromyalgia and meets all of the following criteria:
- A. Patient has widespread pain (on the left and right side of the body and above and below the waist) AND axial skeletal pain (cervical spine or anterior chest or thoracic spine or low back) present for at least 3 months  
**AND**
  - B. Pain in at least 11 of 18 specific tender point sites after digital palpation with an approximate force of 4 kg. Tender point sites are bilateral and include the following:
    - 1. Occiput
    - 2. Low Cervical
    - 3. Trapezius
    - 4. Supraspinatus
    - 5. Second rib
    - 6. Lateral epicondyle
    - 7. Gluteal
    - 8. Greater trochanter
    - 9. Knee**AND**
  - C. Trial or contraindication to BOTH cyclobenzaprine AND a tricyclic antidepressant within the past 180 days

Note: For a tender point to be considered “positive” the patient must state that the palpation was painful. “Tender” is not considered painful.

**If deemed an emergency situation and the prescriber is NOT available, WellPoint Pharmacy Management Prior Authorization of Benefits Center can authorize an override for 72 hours or until the next full business day following a holiday weekend upon request from the dispensing pharmacist.**