

Custom Criteria for
BlueCross Blue Shield of Rhode Island Commercial



GRALISE® (gabapentin)

GPI CODING:

6254003000****

DESCRIPTION:

Gralise is indicated for postherpetic neuralgia in patients 18 years of age and older. The purpose of this document is to provide guidelines for Medical Exception for Gralise. Claims submitted without obtaining Medical Exception will reject on the pharmacy claim system.

APPROVAL DURATION:

Approval duration: 24 months

CRITERIA FOR GRALISE

- I. Patient has the diagnosis of postherpetic neuralgia **AND**
- II. Patient experienced an inadequate treatment response or intolerance to generic gabapentin