

## Pre - PA Allowance

None

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## Prior-Approval Requirements

**Age** 20 years of age or younger

### Diagnosis

Patient must have **ALL** of the following:

1. Duchenne muscular dystrophy
  - a. Confirmed mutation of the DMD gene that is amenable to exon 51 skipping
  - b. Prescribed by or in consultation with a neurologist specializing in DMD
  - c. Patient will be advised to monitor for hypersensitivity reactions
  - d. Obtain a baseline muscle strength score from **ONE** of the following:
    - i. 6-minute walk test (6MWT)
    - ii. North Star ambulatory assessment (NSAA)
    - iii. Motor Function Measure (MFM)
  - e. **NO** concurrent therapy with another exon skipping therapy for DMD (see Appendix 1)

## Prior - Approval Limits

**Duration** 12 months

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## Prior – Approval *Renewal* Requirements

**Age** 20 years of age or younger

### Diagnosis

Patient must have **ALL** of the following:

1. Duchenne muscular dystrophy
  - a. Patient has had an improvement from baseline in **ONE** of the following:
    - i. 6-minute walk test (6MWT)
    - ii. North Star ambulatory assessment (NSAA)
    - iii. Motor Function Measure (MFM)
  - b. Patient will be advised to monitor for hypersensitivity reactions

- c. **NO** concurrent therapy with another exon skipping therapy for DMD  
(see Appendix 1)

## **Prior - Approval *Renewal* Limits**

**Duration**     24 months

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### **Appendix 1 - List of Exon Skipping Therapies for Duchenne Muscular Dystrophy (DMD)**

<b>Generic Name</b>	<b>Brand Name</b>
casimersen	Amondys 45
eteplirsen	Exondys 51
golodirsen	Vyondys 53
viltolarsen	Viltepso