

APOMORPHINE

Apokyn (apomorphine) subcutaneous injection,

Kynmobi (apomorphine) sublingual film

Onapgo* (apomorphine) subcutaneous injection

*This medication is currently pending tier determination and may not be available at this time

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

Parkinson's disease experiencing "off" episodes

AND ALL of the following:

1. Used in combination with carbidopa/levodopa (unless the medications are contraindicated, or patient is intolerant)
2. Inadequate control of Parkinson's off episodes on maximum tolerated doses of carbidopa/levodopa therapy and adjunctive therapy (e.g., dopamine agonist, COMT inhibitor, etc.)
3. **NOT** used in combination with a 5HT3 antagonist (e.g., ondansetron, granisetron, dolasetron, palonosetron, alosetron)
4. Prescriber agrees to monitor for QTc prolongation

Prior - Approval Limits

Duration 6 months

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

Parkinson's disease experiencing "off" episodes

AND ALL of the following:



**BlueCross
BlueShield**

Federal Employee Program.

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1. Improvement in Parkinson's symptoms (e.g., reduction in daily off time, improvement in motor function post-administration)
2. Used in combination with carbidopa/levodopa (unless the medications are contraindicated, or patient is intolerant)
3. **NOT** used in combination with a 5HT3 antagonist (e.g., ondansetron, granisetron, dolasetron, palonosetron, alosetron)
4. Prescriber agrees to monitor for QTc prolongation

Prior - Approval *Renewal* Limits

Duration 12 months