

## Pre - PA Allowance

**Age**            *18 years of age or older*  
                     *6 - 17 years of age no pre-PA allowance*

### Quantity

- Patients are allowed Pre-PA quantities of up to **TWO** triptan medications **only**.

Strength	Quantity
5 mg	72 tablets per 90 days <b>AND/OR</b>
10 mg	36 tablets per 90 days

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## Prior-Approval Requirements

**Age**            6 years of age or older

### Diagnoses

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

1. Migraine, with aura (classic)
2. Migraine, without aura (common)

**AND ALL** of the following:

- a. Patient is currently using migraine prophylactic therapy **OR** the patient has had an inadequate treatment response, intolerance, or contraindication to migraine prophylactic therapy (e.g., divalproex sodium, topiramate, valproate sodium, metoprolol, propranolol, etc.)
- b. **NO** hemiplegic migraine
- c. **NO** basilar migraine
- d. **NO** dual therapy with a calcitonin gene related peptide (CGRP) antagonist for acute migraine treatment (e.g., Nurtec ODT, Ubrovelvy)
- e. **NO** dual therapy with Reyvow (lasmiditan) or Elyxyb (celecoxib)
- f. **NO** other PA on file for any triptan agent

## Prior - Approval Limits

**Age**            *18 years of age or older*

### Quantity

Strength	Quantity
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**MAXALT  
(rizatriptan)**

5 mg	108 tablets per 90 days <b>OR</b>
10 mg	54 tablets per 90 days

**Age** 6 - 17 years of age

**Quantity**

Strength	Weight	Concurrent Propranolol	Quantity
5 mg	< 40 kg	<b>No</b>	18 tablets per 90 days <b>OR</b>
5 mg	≥ 40 kg	<b>No</b>	38 tablets per 90 days <b>OR</b>
10 mg	< 40 kg	<b>No</b>	<b>Excluded</b>
10 mg	≥ 40 kg	<b>No</b>	18 tablets per 90 days
5 mg	< 40 kg	<b>Yes</b>	<b>Excluded</b>
5 mg	≥ 40 kg	<b>Yes</b>	18 tablets per 90 days
10 mg	< 40 kg	<b>Yes</b>	<b>Excluded</b>
10 mg	≥ 40 kg	<b>Yes</b>	<b>Excluded</b>

**Duration** 6 months

## Prior – Approval *Renewal* Requirements

**Age** 6 years of age or older

**Diagnoses**

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

1. Migraine, with aura (classic)
2. Migraine, without aura (common)

**AND ALL** of the following:

- a. **NO** hemiplegic migraine
- b. **NO** basilar migraine
- c. **NO** dual therapy with a calcitonin gene related peptide (CGRP) antagonist for acute migraine treatment (e.g., Nurtec ODT, Ubrelvy)
- d. **NO** dual therapy with Reyvow (lasmiditan) or Elyxyb (celecoxib)
- e. **NO** other PA on file for any triptan agent

## Prior – Approval *Renewal* Limits

Same as above