Dalfampridine

Goal(s):

• To ensure appropriate drug use and limit to patient populations in which the drug has been shown to be effective and safe.

Length of Authorization:

Up to 12 months

Requires PA:

• Dalfampridine

Covered Alternatives:

- Current PMPDP preferred drug list per OAR 410-121-0030 at www.orpdl.org
- Searchable site for Oregon FFS Drug Class listed at <u>www.orpdl.org/drugs/</u>

Approval Criteria				
1.	What diagnosis is being treated?	Record ICD10 code		
2.	Does the patient have a diagnosis of Multiple Sclerosis?	Yes: Go to #3	No: Pass to RPh. Deny; medical appropriateness	
3.	Is the medication being prescribed by or in consultation with a neurologist?	Yes: Go to #4	No: Pass to RPh. Deny; medical appropriateness	
4.	Is the request for continuation of therapy previously approved by the FFS program (patient has completed 2-month trial)?	Yes: Go to Renewal Criteria	No: Go to #5	
5.	Does the patient have a history of seizures?	Yes: Pass to RPh. Deny; medical appropriateness	No: Go to #6	
6.	Is a documented estimated glomerular filtration rate (eGFR) showing the product is not contraindicated? Note: Dalfampridine is contraindicated in patients with moderate or severe renal impairment (CrCl ≤ 50 mL/min)	Yes: Go to # 7	No: Pass to RPh. Deny; medical appropriateness	
7.	Is the patient ambulatory with a walking disability requiring use of a walking aid OR ; have moderate ambulatory dysfunction and does not require a walking aid AND able to complete the baseline timed 25-foot walk test between 8 and 45 seconds?	Yes: Approve initial fill for 2-month trial.	No: Pass to RPh. Deny; medical appropriateness	

Renewal Criteria			
 Has the patient been taking dalfampridine for ≥2 months with documented improvement in walking speed while on dalfampridine (≥20% improvement in timed 25-foot walk test)? 	Yes: Approve for 12 months	No: Pass to RPh. Deny; medical appropriateness	

Clinical Notes:

- Because fewer than 50% of MS patients respond to therapy and therapy has risks, a trial of therapy should be used prior to beginning ongoing therapy.
- The patient should be evaluated prior to therapy and then 4 weeks to determine whether objective improvements which justify continued therapy are present (i.e. at least a 20% improvement from baseline in timed walking speed).
- Dalfampridine is contraindicated in patients with moderate to severe renal impairment.
- Dalfampridine can increase the risk of seizures; caution should be exercised when using concomitant drug therapies known to lower the seizure threshold.

P&T Review: 10/22 (DM); 6/21(DM); 8/20 (DM); 6/20; 11/17; 5/16; 3/12

Implementation: 1/1/23, 8/16, 9/1/13