STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR MEDICAL SERVICES

Office of Pharmacy Service
Prior Authorization Criteria

Lucemyra™ (lofexidene)
Effective 11/15/2018

Prior Authorization Request Form

LUCEMYRA *is a central alpha-2 adrenergic agonist indicated for mitigation of opioid withdrawal symptoms to facilitate abrupt opioid discontinuation in adults.*

Prior authorization requests for Lucemyra may be approved if the following criteria are met:

1. Diagnosis of opioid dependence or opioid use disorder; **AND**

2. Prescribed by or in consultation with a physician specializing in pain management or addiction treatment; **AND**

3. The patient must be within the age range as recommended by the FDA label and indication; **AND**

4. The patient is currently undergoing or is scheduled to undergo abrupt opioid discontinuation; **AND**

5. For a scheduled withdrawal*, patient must also have a clinically documented failure (including the reason for failure) on clonidine in the last 6 months; **AND**

6. Documentation must be submitted showing that the patient has a normal QT interval.

***NOTE: Requests to use Lucemyra for scheduled withdrawal from buprenorphine or methadone medication assisted therapy for opioid abuse/dependence will be denied.**

Initial approval of Lucemyra will be for 7 days. An additional 7 days of therapy may be approved with documentation of satisfactory patient response.

References

1.) Lucemyra package insert (5/2018)
2.) LexiComp clinical monograph for Lucemyra (reviewed 11/9/2018)
3.) LexiComp clinical monograph for clonidine (reviewed 11/9/2018)
4.) UpToDate clinical article: Medically supervised opioid withdrawal during treatment for addiction (last update 6/2018)