**Basic Letter of Medical Necessity [Template]**

**for** **NUEDEXTA® (dextromethorphan hydrobromide and quinidine sulfate)**

***[Physician/Practice Letterhead]***

**[THIS IS A TEMPLATE LETTER FOR YOUR REFERENCE ONLY. YOU ARE RESPONSIBLE TO ENSURE EACH STATEMENT TRUTHFULLY REFLECTS YOUR MEDICAL OPINION AND YOUR PATIENT’S CONDITION. AVANIR MAKES NO REPRESENTATION AS TO THE TRUTHFULNESS OF THE INFORMATION OR STATEMENTS IN THIS LETTER, OR WHETHER TREATMENT WILL BE APPROVED.]**

**[Date]**

**[Payer Name]** RE: Coverage of NUEDEXTA® (dextromethorphan hydrobromide and quinidine sulfate)

**[Payer Representative] [Patient Name]**

**[Payer Address] [Policy Number]**

**[City, State ZIP Code] [Group Number]**

**[Payer Fax Number] [Patient DOB]**

 **[Patient Age]**

 **[Patient Sex]**

Attention: **[Prior Authorizations Department]**

Dear **[Representative Title if Known, Medical/Pharmacy Director]**

I am writing to document the medical necessity for treatment with NUEDEXTA(dextromethorphan hydrobromide and quinidine sulfate), which I have prescribed for my patient **[Patient Name], [Policy Number].**

I request that you approve the coverage of NUEDEXTA for the treatment of pseudobulbar affect (PBA) with an ICD-10-CM diagnosis code F48.2.

Listed below is a summary of the relevant clinical history. **[Relevant information may include the severity of the patient’s symptoms].**

In my clinical opinion, **[Patient Name]** should receive NUEDEXTA for the following reasons:

**[Provide clinical rationale for treatment with NUEDEXTA]**

The full Prescribing Information for NUEDEXTA can be found at <https://www.nuedextahcp.com/sites/default/files/content/Prescribing_Information.pdf>

In summary, it is my professional judgment that NUEDEXTA is medically necessary and reasonable for **[Patient Name]**’s medical condition. Please contact me at **[office phone number]** if any additional information is required to ensure the prompt approval of this course of treatment.

Sincerely,

**[Physician signature]**

**Enclosures:**

**[ List enclosures as appropriate: Examples of enclosures include excerpt(s) and summary from patient's medical record, explanation of benefits (EOB), journal articles, copies of medical correspondence, specific information about the recommended drug or procedure (package Insert, FDA approval letter, treatment guidelines compiled by professional physician organizations). Be sure to include all the listed documents with the letter when you send it to your patient’s insurance provider]**

***Note: Do not return any of this information to your AVANIR® Sales Representative.***

**INDICATION AND USAGE**

NUEDEXTA® (dextromethorphan HBr and quinidine sulfate) is indicated for the treatment of pseudobulbar affect (PBA). PBA occurs secondary to a variety of otherwise unrelated neurologic conditions or brain injury, and is characterized by involuntary, sudden, and frequent episodes of laughing and/or crying. PBA episodes typically occur out of proportion or incongruent to the underlying emotional state. PBA is a specific condition, distinct from other types of emotional lability that may occur in patients with neurologic disease or injury.

**IMPORTANT SAFETY INFORMATION**

**CONTRAINDICATIONS**

**Quinidine and Related Drugs:** NUEDEXTA contains quinidine, and should not be used concomitantly with other drugs containing quinidine, quinine, or mefloquine.

**Hypersensitivity:** NUEDEXTA is contraindicated in patients with a history of NUEDEXTA-, quinine-, mefloquine-, or quinidine-induced thrombocytopenia, hepatitis, bone-marrow depression, lupus-like syndrome, or known hypersensitivity to dextromethorphan (eg, rash, hives).

**MAOIs:** NUEDEXTA is contraindicated in patients taking monoamine oxidase inhibitors (MAOIs), or in patients who have taken MAOIs within the preceding 14 days, due to the risk of serious and possibly fatal drug interactions, including serotonin syndrome. Allow at least 14 days after stopping NUEDEXTA before starting an MAOI.

**Cardiovascular:** NUEDEXTA is contraindicated in patients with a prolonged QT interval, congenital long QT syndrome, history suggestive of torsades de pointes, heart failure, patients receiving drugs that both prolong QT interval and are metabolized by CYP2D6 (eg, thioridazine and pimozide), patients with complete atrioventricular (AV) block without implanted pacemaker, or at high risk of complete AV block.

**WARNINGS AND PRECAUTIONS**

**Thrombocytopenia and Other Hypersensitivity Reactions:** Quinidine can cause immune-mediated thrombocytopenia that can be severe or fatal. Non-specific symptoms, such as lightheadedness, chills, fever, nausea, and vomiting, can precede or occur with thrombocytopenia. NUEDEXTA should be discontinued immediately if thrombocytopenia occurs.

**Hepatotoxicity:** Hepatitis, including granulomatous hepatitis, has been reported in patients receiving quinidine, generally during the first few weeks of therapy. Discontinue immediately if this occurs.

**Cardiac Effects:** NUEDEXTA causes dose-dependent QTc prolongation. QT prolongation can cause torsades de pointes–type ventricular tachycardia, with the risk increasing as the degree of prolongation increases. When initiating NUEDEXTA in patients at risk for QT prolongation and torsades de pointes, electrocardiographic (ECG) evaluation of QT interval should be conducted at baseline and 3 to 4 hours after the first dose. Some risk factors include use with CYP3A4 inhibitors or drugs that prolong QT interval, electrolyte abnormalities, bradycardia, or left ventricular hypertrophy or dysfunction. If patients taking NUEDEXTA experience symptoms that could indicate the occurrence of cardiac arrhythmias (eg, syncope or palpitations), NUEDEXTA should be discontinued, and the patient further evaluated.

**Concomitant Use of CYP2D6 Substrates:** NUEDEXTA inhibits CYP2D6 and may interact with other drugs metabolized by CYP2D6. Adjust dose of CYP2D6 substrates as needed.

**Dizziness:** NUEDEXTA may cause dizziness. Take precautions to reduce the risk of falls.

**Serotonin Syndrome:** Use of NUEDEXTA with selective serotonin reuptake inhibitors (SSRIs) or tricyclic antidepressants increases the risk of “serotonin syndrome.”

**Anticholinergic Effects of Quinidine:** Monitor for worsening in myasthenia gravis.

**ADVERSE REACTIONS**

The most common adverse reactions (incidence of ≥3% and two-fold greater than placebo) in patients taking NUEDEXTA are diarrhea, dizziness, cough, vomiting, asthenia, peripheral edema, urinary tract infection, influenza, increased gamma-glutamyltransferase, and flatulence.

**These are not all the risks from use of NUEDEXTA. Please see full Prescribing Information at** <https://www.nuedextahcp.com/sites/default/files/content/Prescribing_Information.pdf>

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