



Medi-Cal Rx

Prior Authorization Request Requirement for Reyvow® (Lasmiditan Succinate)

January 3, 2024

Background

The purpose of this alert is to inform pharmacy providers and prescribers about a change in prior authorization (PA) request requirements for Reyvow® (lasmiditan succinate) and alternatives that can be prescribed without PA request requirements.

What Pharmacy Providers and Prescribers Need to Know

Effective February 1, 2024, Reyvow will require a PA request. Pharmacy providers and prescribers will need to submit a PA request for new prescriptions as well as for renewing prescriptions for patients maintained on Reyvow.

Alternatives not requiring a PA request are listed on the [Medi-Cal Rx Contract Drugs List](#) (CDL) and include the following:

Alternatives Not Requiring a PA	
Product Name	Product Dosage
Imitrex® (sumatriptan)	<ul style="list-style-type: none">• 5 mg and 20 mg nasal spray• 4 mg and 6 mg injection• 25 mg, 50 mg, and 100 mg tablets
Amerge® (naratriptan)	<ul style="list-style-type: none">• 1 mg and 2.5 mg tablets
Maxalt® and Maxalt-MLT (rizatriptan)	<ul style="list-style-type: none">• 5 mg and 10 mg tablets• 5 mg and 10 mg oral disintegrating tablets
Nurtec® ODT (rimegepant)	<ul style="list-style-type: none">• 75 mg oral disintegrating tablets
Ubrelvy™ (ubrogepant)	<ul style="list-style-type: none">• 50 mg and 100 mg tablets
Ergotamine/caffeine	<ul style="list-style-type: none">• 1 mg-100 mg tablets• 2 mg-100 mg suppositories

Resources

- [Medi-Cal Rx Provider Manual](#)
- [Medi-Cal Rx Contract Drugs List](#)
- [Reminder: Establishing Medical Necessity](#)

Contact Information

You can call the Medi-Cal Rx Customer Service Center (CSC) at 1-800-977-2273, which is available 24 hours a day, 7 days a week, 365 days per year.

For other questions, email Medi-Cal Rx Education & Outreach at MediCalRxEducationOutreach@primetherapeutics.com.