

11/07/2020

Iowa P&T Committee:

I am a headache specialist working in a general neurology practice. I have been working in neurology and headache medicine for over 6 years and am certified in headache medicine through the National Headache Foundation. I am truly passionate about migraine care and believe that it is my responsibility to advocate for Iowa's migraine patient population in order to improve access to safe and effective acute migraine treatments.

Since the addition of Gepants to the Iowa Medicaid formulary, my patients have been able to access these medications with minimal difficulty. This has made a remarkable difference in patient outcomes. Patients that haven't had a migraine free day in years are now able to use an acute treatment that can provide them with migraine freedom and decreased migraine-related disability quickly and with minimal side effects.

Each of these novel products has their own benefits related to delivery and/or mechanism of action. Ubrovelvy gives patients the opportunity to re-dose after 2 hours if initially dosing is not effective and this is quite helpful for many patients. Nurtec ODT provides more sustained relief from migraines for patients who deal with recurrent migraines within 24-48 hours after resolution of the initial attack. I find that response to these medications is very individual and when one doesn't work, I often find better efficacy with switching to the other product. Due to this, I propose both Ubrovelvy and Nurtec be available for migraine patients on Iowa Medicaid after failure with 2 triptans or contraindication for use of triptans.

I also ask that Medicaid remove any restrictions to these medications related to the type of preventative medication they are on or the type of provider that orders. CGRP monoclonal antibodies and acute CGRP medications are often being lumped into one category and considered "duplicate therapy" if ordering both. This is a great dis-service to the migraine patients, as many require both acute and preventative therapy (similar to treatment of Asthma, as an example). I also ask that the medications have no restrictions for prescribing by PCPs or other types of providers due to the low number of specialists available to patients, especially in Iowa's rural areas.

Thank you for your time and consideration in this matter, if you have any additional questions, please feel free to contact me using the contact information below.

Sincerely,