

To whom it may concern,

I am a neurologist and headache specialist. I am writing today to request that ubrogepant, name brand Ubrelvy, be added to the state Medicaid formulary.

Ubrogepant is a member of a new class of migraine abortive therapies, the small molecule CGRP antagonists. As such, it quickly scavenges the CGRP that is elevated during a migraine attack. I have had several occasions to prescribe it since it was FDA approved earlier this year. Thus far, my impression is that it is highly effective and very well-tolerated. As you know, we have not had any new migraine abortive agents come to market for 2 decades, and just 60% of migraine patients respond to oral triptans. In addition, patients with cardiovascular risk factors or history of ischemic events cannot take triptans. Thus, Ubrelvy is meeting a well established need in migraine abortive therapeutics.

Although ubrogepant could be taken first-line, because of its high cost, I think it is reasonable to require 2 oral triptan failures or a triptan contraindication. I also think that #10 tablets a month is a reasonable limit.

Thank you for your consideration,