

SPECIALTY GUIDELINE MANAGEMENT

NUPLAZID (pimavanserin)

POLICY

I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indication: Nuplazid is indicated for the treatment of hallucinations and delusions associated with Parkinson's disease psychosis.

All other indications are considered experimental/investigational and are not a covered benefit.

II. EXCLUSIONS

Coverage will not be provided for members with dementia-related psychosis that is unrelated to the hallucinations and delusions associated with Parkinson's disease psychosis.

III. CRITERIA FOR INITIAL APPROVAL

Authorization of 12 months may be granted for initial treatment of hallucinations and delusions associated with Parkinson's disease psychosis when all of the following criteria are met:

1. Diagnosis of Parkinson's disease was made prior to the onset of psychotic symptoms
2. Member has mild or no cognitive impairment as determined by physician's clinical diagnosis and/or cognitive impairment screening tests (e.g. Mini-Mental Status Examination [MMSE], Montreal Cognitive Assessment [MOCA])

IV. CONTINUATION OF THERAPY

Authorization of 12 months may be granted for continued treatment of hallucinations and delusions associated with Parkinson's disease psychosis when all of the following criteria are met:

1. Diagnosis of Parkinson's disease was made prior to the onset of psychotic symptoms
2. Member has experienced improvement in psychotic symptoms (hallucinations and/or delusions) since starting therapy

V. REFERENCES

1. Nuplazid [package insert]. San Diego, CA: Acadia Pharmaceuticals, Inc.; April 2016.
2. Cummings J, Isaacson S, Mills R, et al. Pimavanserin for patients with Parkinson's disease psychosis: a randomized, placebo-controlled phase 3 trial. *Lancet*. 2014; 383:533-540.
3. Hoops S, Nazem S, et al. Validity of the MoCA and MMSE in the detection of MCI and dementia in Parkinson disease. *Neurology*. 2009; 73 (21): 1738-1745.