AETNIA DE	TT-D11-41-T110		<b>*</b> ae	etna <sup>®</sup>
AETNA BETTER HEALTH®				
Coverage Policy/Guideline				
Name: Lidocaine Topical Patcl		Patch	Page:	1 of 1
Effective Date: 3/27/2024			Last Review Date:	1/12/2024
Applies to:	□Illinois	□Florida	□Michigan	
	□New Jersey	⊠Maryland	□Florida Kids	
	□Pennsylvania Kids	□Virginia		

#### Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for lidocaine topical patch under the member's prescription drug benefit.

# **Description:**

### Lidoderm

Lidoderm is indicated for relief of pain associated with post-herpetic neuralgia. It should be applied only to **intact skin**.

# **Applicable Drug List:**

Formulary Drug: Lidocaine 5% patch

### Policy/Guideline:

 The requested drug is being prescribed for pain associated with post-herpetic neuralgia

# **AND**

The request is NOT for continuation of therapy

#### AND

 Documentation or Pharmacy claims history supporting trial and failure with topical lidocaine 4% patch

# OR

The request is for continuation of therapy

### AND

 The patient has achieved or maintained a positive clinical response to the requested drug

# **Approval Duration and Quantity Restrictions:**

**Approval:** 12 months

Quantity Level Limit: 90 patches/30 days

### References:

- 1. Lidoderm [package insert]. San Jose, CA: TPU Pharma, Inc.; December 2022.
- 2. ZTLido [package insert]. Palo Alto, CA: Scilex Pharmaceuticals Inc.; April 2021.
- 3. Lexicomp Online, AHFS DI (Adult and Pediatric) Online. Waltham, MA: UpToDate, Inc.; 2023. https://online.lexi.com. Accessed September 7, 2023.
- 4. Micromedex (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: https://www.micromedexsolutions.com/ (cited: 09/07/2023).
- 5. Neurontin [package insert]. New York, NY: Parke-Davis Division of Pfizer Inc; July 2022.
- 6. Lyrica [package insert]. New York, NY: Parke-Davis; June 2020.