

## PREFERRED SPECIALTY MANAGEMENT POLICY

**POLICY:** Multiple Sclerosis – Dalfampridine Preferred Specialty Management Policy

- Ampyra® (dalfampridine extended-release tablets – Acorda, generic)

**REVIEW DATE:** 11/08/2023

---

### OVERVIEW

Dalfampridine is a potassium channel blocker that is indicated to improve walking in adults with multiple sclerosis.<sup>1</sup> This was demonstrated by an increase in walking speed.

### POLICY STATEMENT

This Preferred Specialty Management program has been developed to encourage the use of the Preferred Product. For all medications (Preferred and Non-Preferred), the patient is required to meet the respective standard *Prior Authorization Policy* criteria. This program also directs the patient to try the Preferred Product prior to approval of a Non-Preferred Product. Requests for the Non-Preferred Product will also be reviewed using the exception criteria (below). All approvals are provided for 1 year in duration. If the patient meets the standard *Multiple Sclerosis – Dalfampridine Prior Authorization Policy* criteria but has not tried the Preferred Product, approval for a Preferred Product will be authorized.

**Documentation:** Documentation is required where noted in the criteria as **[documentation required]**. Documentation may include, but is not limited to, chart notes, prescription claims records, and/or other information.

**Automation:** None.

**Preferred Product:** generic dalfampridine  
**Non-Preferred Product:** Ampyra

**RECOMMENDED EXCEPTION CRITERIA**

**REFERENCES**

1. Ampyra® extended-release tablets [prescribing information]. Pearl River, NY: Acorda; June 2022.