

UnitedHealthcare Pharmacy  
Clinical Pharmacy Programs

Program Number	2024 P 2156-6
Program	Prior Authorization/Medical Necessity
Medication	Lucemyra <sup>®</sup> (lofexidine)
P&T Approval Date	11/2018, 11/2019, 1/2021, 2/2022, 2/2023, 2/2024
Effective Date	5/1/2024

**1. Background:**

Lucemyra is a central alpha-2 adrenergic agonist indicated for mitigation of opioid withdrawal symptoms to facilitate abrupt opioid discontinuation in adults.

**2. Coverage Criteria<sup>a</sup>:**

<p><b>A. Lucemyra</b> will be approved based on the following criteria:</p> <p>1. <b>All</b> of the following:</p> <p>a. For symptoms of abrupt opioid withdrawal.<sup>b</sup></p> <p style="text-align: center;"><b>-AND-</b></p> <p>b. Opioids have been discontinued.<sup>b</sup></p> <p style="text-align: center;"><b>-AND-</b></p> <p>c. <b>One</b> of the following:</p> <p>(1) History of failure, contraindication, or intolerance to clonidine.</p> <p style="text-align: center;"><b>-OR-</b></p> <p>(2) Lucemyra was initiated in the inpatient setting.</p> <p style="text-align: center;"><b>Authorization will be issued for 14 days of therapy. If Lucemyra was initiated in the inpatient setting, the total course of therapy should not exceed 14 days.</b></p> <p><sup>a</sup> State mandates may apply. Any federal regulatory requirements and the member specific benefit plan coverage may also impact coverage criteria. Other policies and utilization management programs may apply.</p> <p><sup>b</sup> Plans situated in Nevada are not subject to clinical criteria. Only step therapy may be required.</p>
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**3. Additional Clinical Rules:**

- Notwithstanding Coverage Criteria, UnitedHealthcare may approve initial and re-authorization based solely on previous claim/medication history, diagnosis codes (ICD-10) and/or claim logic. Use of automated approval and re-approval processes varies by program and/or therapeutic class.
- Supply limits may also apply.

**4. References:**

1. Lucemyra [prescribing information]. Louisville, KY: WorldMeds, LLC; October 2023.  
Gowing L, Farrell M, Ali R, White J. Alpha2-adrenergic agonists for the management of opioid withdrawal. Cochrane Database of Systemic Reviews 2016, Issue 5.

Program	Prior Authorization/Medical Necessity – Lucemyra
<b>Change Control</b>	
Date	Change
11/2018	New program.
11/2019	Annual review. No changes to criteria.
1/2021	Annual review. No changes to criteria.
2/2022	Annual review. Updated references.
2/2023	Annual review. No changes.
2/2024	Annual review. Nevada footnote added. Updated references.