

Montana Healthcare Programs Drug Prior Authorization Coverage Criteria

Tiglutic™ (riluzole suspension)

Review Criteria

Member must meet all the following criteria for specific diagnosis:

- Member must have a diagnosis of ALS (amytrophic lateral sclerosis) or Huntington's Chorea (off-label indication)
- Member must have swallowing difficulties that prevent use of generic riluzole

Limitations:

Maximum daily dose is 20mg