



AETNA BETTER HEALTH®  
Coverage Policy/Guideline

Name: Daxxify (daxibotulinumtoxinA-lanm) Page: 1 of 1

Effective Date: 12/26/2023 Last Review Date: 9/29/2023

|             |  |  |   |
|-------------|--|--|---|
| Applies to: | <input checked="" type="checkbox"/> Illinois | <input type="checkbox"/> Florida                 | <input type="checkbox"/> New Jersey                   |
|             | <input checked="" type="checkbox"/> Maryland | <input checked="" type="checkbox"/> Florida Kids | <input checked="" type="checkbox"/> Pennsylvania Kids |
|             | <input type="checkbox"/> Michigan            | <input checked="" type="checkbox"/> Virginia     | <input checked="" type="checkbox"/> Kentucky PRMD     |

### Intent:

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

### Description:

#### FDA-Approved Indication

The treatment of cervical dystonia in adult patients.

All other indications are considered experimental/investigational and not medically necessary.

### Applicable Drug List:

Daxxify

### Policy/Guideline:

#### Criteria for Initial Approval:

##### A. Cervical Dystonia

Authorization may be granted for the treatment of adult patients with cervical dystonia (e.g., torticollis) when ALL the following criteria are met:

1. Member is 18 years of age or older
2. The medication is prescribed by, or in consultation with EITHER a neurologist, orthopedist or physiatrist
3. There is abnormal placement of the head with limited range of motion in the neck
4. Coverage is not for cosmetic use.

#### Criteria for Continuation of Therapy

##### A. Cervical Dystonia

All members, including new members, requesting authorization for continuation of therapy must meet ALL initial authorization criteria AND be experiencing benefit from therapy.

### Approval Duration and Quantity Restrictions:

**Approval:** 12 months

**Quantity Level Limit:** Reference Formulary for drug specific quantity level limits

### References:

1. Daxxify [package insert]. Newark, CA: Revance Therapeutics, Inc; August 2023.