

Applicable Drugs: Neupro (rotigotine transdermal system)

Preferred: N/A

Non-preferred: N/A

Date of Origin: 3/18/2019

Date Last Reviewed / Revised: 3/26/2026

PRIOR AUTHORIZATION CRITERIA

(May be considered medically necessary when criteria I through IV are met)

- I. Documented diagnosis of one of the following conditions A through B AND must meet criteria under applicable diagnosis:
 - A. Idiopathic Parkinson's disease
 1. Documented treatment failure, intolerance, or contraindication to at least three of the following:
 - a) Levodopa
 - b) Selegiline OR rasagiline
 - c) Pramipexole
 - d) Ropinirole
 - B. Moderate-to-severe primary restless legs syndrome
 1. Documented treatment failure, intolerance, or contraindication to at least three of the following:
 - a) Gabapentin OR pregabalin
 - b) Oral or IV iron supplementation (see Appendix)
 - c) Pramipexole
 - d) Ropinirole
- II. Minimum age requirement: 18 years old
- III. Request is for a medication with the appropriate FDA labeling, or its use is supported by current clinical practice guidelines.
- IV. Refer to plan document for the list of preferred products. If requested agent is not listed as a preferred product, must have a documented failure, intolerance, or contraindication to a preferred product(s).

EXCLUSION CRITERIA

- N/A

OTHER CRITERIA

- N/A

QUANTITY / DAYS SUPPLY RESTRICTIONS

- 30 patches per 30 days
- Maximum dose:
 - Idiopathic Parkinson's disease: 8 mg/24 hours
 - Restless legs syndrome: 3 mg/24 hours

APPROVAL LENGTH

- **Authorization:** 1 year.
- **Re-Authorization:** 1 year. An updated letter of medical necessity or progress notes confirming the current medical necessity criteria are met and that the medication is effective.

APPENDIX

- Oral or IV iron should be initiated in adults with RLS if serum ferritin ≤ 75 ng/mL or transferrin saturation $< 20\%$.
- Only IV iron should be initiated if serum ferritin is between 75 and 100 ng/mL.

REFERENCES

1. Neupro. Prescribing information. UCB Inc.; 2021. Accessed March 17, 2026. <https://www.neupro.com/neupro-prescribing-information.pdf>
2. Pringsheim T, Day GS, Smith DB, et al. Dopaminergic Therapy for Motor Symptoms in Early Parkinson Disease Practice Guideline Summary. *Neurology*. 2021;97(20):942-957. doi:10.1212/wnl.00000000000012868
3. Winkelman JW, Berkowski JA, DelRosso LM, et al. Treatment of restless legs syndrome and periodic limb movement disorder: an American Academy of Sleep Medicine clinical practice guideline. *Journal of Clinical Sleep Medicine*. 2025;21(1):137-152. doi.org/10.5664/jcsm.11390

DISCLAIMER: Medication Policies are developed to help ensure safe, effective and appropriate use of selected medications. They offer a guide to coverage and are not intended to dictate to providers how to practice medicine. Refer to Plan for individual adoption of specific Medication Policies. Providers are expected to exercise their medical judgement in providing the most appropriate care for their patients.