



DATE: March 9, 2026

TO: Commonwealth of Kentucky Medicaid Provider Network

FROM: MedImpact Healthcare Systems

Subject: CGRP Prior Authorizations

Status: Effective April 15th, 2026, the Commonwealth of Kentucky Department of Medicaid Services (DMS) will allow each member to use only **one Calcitonin Gene-Related Peptide (CGRP) Inhibitor for acute migraine treatment and one for preventative migraine treatment at a time.**

If a member currently has an approved Prior Authorization (PA) for both treatment categories and their prescriber submits a new PA request to switch to a different formulation, the existing PA will be updated to the new formulation, provided the member meets the approval criteria. Renewal requests for the same formulation will follow the standard renewal criteria.

For **Nurtec ODT**, which may be used for both acute and preventative therapy, if a member is prescribed a second CGRP inhibitor (either acute or preventative), a **soft edit** will prompt the pharmacist to confirm that Nurtec ODT and the second CGRP inhibitor are not being used for the same purpose. Use of Nurtec ODT in combination with two or more CGRP inhibitors of any type will no longer be approved.

Providers may reference the table below to identify migraine therapies on the Medicaid Preferred Drug List (PDL):

Preferred Drug Category	Preferred Agents	Preferred with PA	Non-Preferred
ANTIMIGRAINE AGENTS, CALCITONIN GENE-RELATED PEPTIDE (CGRP) INHIBITORS AND OTHER AGENTS: ACUTE TREATMENT		Nurtec ODT Ubrelvy tablet	Reyvow tablet (manufacturer discontinued) Zavzpret spray
ANTIMIGRAINE AGENTS, CALCITONIN GENE-RELATED PEPTIDE (CGRP) INHIBITORS AND OTHER AGENTS: PROPHYLAXIS, INJECTABLE		Aimovig autoinjector Ajovy autoinjector Ajovy syringe Emgality pen	Emgality 100 mg/mL syringe
ANTIMIGRAINE AGENTS, CALCITONIN GENE-RELATED PEPTIDE (CGRP) INHIBITORS AND OTHER AGENTS: PROPHYLAXIS, ORAL		Nurtec ODT Qulipta tablet	



To access the Kentucky Medicaid PDL, please refer to the MedImpact Provider Portal at: <https://kyportal.medimpact.com/provider-documents/drug-information>. For any additional information or questions that you may have, please contact the Kentucky MedImpact team at KYMFFS@medimpact.com for Fee for-Service members or at KYMCOPBM@medimpact.com for Managed Care Organization (MCO) members.

KY MCO Contact Information

Program Questions	KYMCOPBM@MedImpact.com
Pharmacy Help Desk	(800) 210-7628 [24 hours per day/ 7 days per week]
Prior Authorizations	Phone (844) 336-2676 [8:00AM - 7:00PM EST/ 7 days per week]; Fax (858) 357-2612
Pharmacy Portal	https://kyportal.medimpact.com/
BIN: 023880 / PCN: KYPROD1 / GROUP: KYM01	

KY FFS Contact Information

Program Questions	KYMFFS@MedImpact.com
Pharmacy Help Desk	(877) 403-6034 [24 hours per day/ 7 days per week]
Prior Authorizations	Phone (877) 403-6034 [8:00AM - 7:00PM EST/ 7 days per week] Fax (858) 357-2612
Pharmacy Portal	https://kyportal.medimpact.com/
BIN: 026309 / PCN: KYPROD1 / GROUP: KYF01	