



Medicare Part D – 2016

Prior Authorization Group Description

BELSOMRA

Covered Uses:

All FDA-approved indications not otherwise excluded from Part D.

Exclusion Criteria:

Required Medical Information:

Age Restrictions:

Prescriber Restrictions:

Coverage Duration:

Length of benefit

Other Criteria:

For patients 65 years of age and older: Failure or clinically significant adverse effects to one of the following: Rozerem, Silenor, trazodone or temazepam. For patients under 65 years of age: Failure or clinically significant adverse effects to zolpidem or zolpidem CR.