



Medicare Part D – 2016

Prior Authorization Group Description

CIALIS

Covered Uses:

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

Exclusion Criteria:

Patients taking nitrates (e.g., Nitrodur, Nitrobid, Nitrostat, Isordil, Ismo)

Required Medical Information:

Age Restrictions:

Prescriber Restrictions:

Coverage Duration:

Length of Benefit.

Other Criteria:

Failure or clinically significant adverse effects to ONE alpha blocker (e.g. terazosin, doxazosin, tamsulosin, alfuzosin, Rapaflo®) and ONE 5-alpha reductase inhibitor (finasteride, Jalyn® or Avodart®)