

Priority Health Medicare Prior Authorization Criteria (Part D)

Xyrem® Oral

Products affected

- Xyrem®

Details

Covered uses	All medically accepted indications not otherwise excluded from Part D.
Exclusion criteria	Patient must not be receiving sedative hypnotics with Xyrem. Patient must not suffer from succinic semialdehyde dehydrogenase deficiency.
Required medical information	N/A
Age restrictions	N/A
Prescriber restrictions	Prescriber must be a sleep specialist, neurologist, or pulmonologist.
Coverage duration	One year
Other criteria	N/A