Market Applicability/Effective Date														
Market	**FL & FHK**	**FL MMA**	**FL LTC**	**GA**	**KS**	**KY**	**LA**	**MD**	**NJ**	**NV**	**NY**	**TN**	**TX**	**WA**
Applicable	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	NA

*FHK- Florida Healthy Kids

Savella (milnacipran)

Override(s)	Approval Duration
Prior Authorization Quantity Limit	1 Year

Medications	Strength	Quantity Limit
Savella (milnacipran HCl)	12.5mg, 25mg tablets 50mg, 100mg tablets Titration pack	Limit of 10 per 30 days Limit of 60 per 30 days Limit of 1 pack per year
Quantity Supply Override: May allow a quantity of 60 tablets per 30 days of the 12.5mg or 25mg strengths if the member has renal function impairment.		

APPROVAL CRITERIA

Requests for Savella (milnacipran) may be approved if the following criteria is met:

I. Individual has a clinical diagnosis of Fibromyalgia(for example, based upon symptoms of widespread pain, typically reported in the muscles and joints, findings of “multiple tender points” in characteristic soft tissue locations, and any disorder that would otherwise explain the pain have been excluded); **AND**

II. Symptoms have been present at a similar level for at least 3 months; **AND**

III. Individual has had a trial (medication samples/coupons/discount cards are excluded from consideration as a trial) of and inadequate response or intolerance to **two** of the following medications that are medically accepted or FDA approved for the treatment of fibromyalgia:
   A. Tricyclic antidepressants (CFCG 2012, EULAR 2016); **OR**
   B. Gabapentin(CFCG 2012); **OR**
   C. Cyclobenzaprine (CFCG 2012, EULAR 2016) ; **OR**
   D. Fluoxetine (CFCG 2012) or alternative selective serotonin reuptake inhibitor (SSRI); **OR**
   E. Cymbalta (duloxetine)*; **OR**
   F. Lyrica*

Market Applicability/Effective Date														
Market	**FL & FHK**	**FL MMA**	**FL LTC**	**GA**	**KS**	**KY**	**LA**	**MD**	**NJ**	**NV**	**NY**	**TN**	**TX**	**WA**
Applicable	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	NA

*FHK- Florida Healthy Kids

Note: Savella (milnacipran) has black box warnings for suicidality and antidepressant drugs. Savella is a SNRI, similar to some drugs used for the treatment of depression and other psychiatric disorders. Antidepressants increased the risk compared to placebo of suicidal thinking and behavior (suicidality) in children, adolescents, and young adults in short-term studies of major depressive disorder (MDD) and other psychiatric disorders. Anyone considering the use of such drugs in an individual under the age of 24, must balance this risk with the clinical need. Individuals of all ages who are started on Savella should be monitored appropriately and observed closely for clinical worsening, suicidality, or unusual changes in behavior. Savella is not approved for use in the treatment of major depressive disorder. Savella is not approved for use in pediatric individuals.

*****Prior authorization may be required

State Specific Mandates		
State name N/A	Date effective N/A	Mandate details (including specific bill if applicable) N/A

Key References:

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