



Montana Healthcare Programs
Drug Prior Authorization Coverage Criteria

Xywav™ (calcium, magnesium, potassium and sodium oxybates)

Review Criteria

Member must meet all the following criteria for diagnosis:

Narcolepsy with cataplexy or excessive daytime somnolence

- Member must be at least 7 years of age or older.
- Member must have a diagnosis of narcolepsy with either cataplexy or excessive daytime sleepiness.
- Diagnosis must be made using ICSD-3 or DSM-5 diagnostic criteria.
- Approval granted for 1 year

Idiopathic Hypersomnia in Adults

- Member must be at least 18 years of age or older.
- Member must have a diagnosis idiopathic hypersomnia in adults.
- Diagnosis must be made using ICSD-3 or DSM-5 diagnostic criteria.
- Approval granted for 1 year

Limitations:

- Maximum daily approved dose is 9gm per night