

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Tasimelteon (Hetlio^z)

Initiation (new start) criteria: Non-formulary **tasimelteon (Hetlio^z)** will be covered for 3 months on the prescription drug benefit when the following criteria are met:

- Prescriber is a Sleep Specialist
 - Diagnosis of Non-24-Hour Sleep-Wake Disorder
 - Patient has tried oral melatonin for at least 2 months
 - Patient has tried oral ramelteon for at least 2 months
 - Patient has used non-pharmacologic sleep entrainment (*alignment of the internal biological clock rhythm to external time cues, such as the natural dark-light cycles*) including: bright light therapy (in patients with light perception) and/or optimizing sleep hygiene
- OR-**
- Patient is already stable on the drug

Continued use criteria (3 months after initiation): Non-formulary **tasimelteon (Hetlio^z)** will continue to be covered for 12 months on the prescription drug benefit when the following criteria are met:

- Documentation of positive clinical response of at least a 45-minute gain in nighttime sleep
- A 45-minute decrease in daytime sleep (napping) during the worst part of the cycle.