

PRIOR AUTHORIZATION CRITERIA

DRUG CLASS	INSOMNIA AGENTS**
BRAND NAME (generic)	AMBIEN (zolpidem)
	AMBIEN CR (zolpidem extended-release)
	DORAL (quazepam)
	(estazolam)
	(flurazepam)
	HALCION (triazolam)
	LUNESTA (eszopiclone)
	RESTORIL (temazepam)
	ROZEREM (ramelteon)
	SONATA (zaleplon)

Status: CVS Caremark Criteria

Type: Post Limit Prior Authorization

*** Edluar, Intermezzo, ZolpiMist, Belsomra and Dayvigo are not included in these criteria. Refer to Insomnia (Edluar, Intermezzo, ZolpiMist) or Insomnia (Belsomra, Dayvigo) Prior Authorization criteria.*

POLICY

FDA-APPROVED INDICATIONS

Ambien

Ambien (zolpidem tartrate) is indicated for the short-term treatment of insomnia characterized by difficulties with sleep initiation. Ambien has been shown to decrease sleep latency for up to 35 days in controlled clinical studies.

The clinical trials performed in support of efficacy were 4–5 weeks in duration with the final formal assessments of sleep latency performed at the end of treatment.

Ambien CR

Ambien CR (zolpidem tartrate extended-release tablets) is indicated for the treatment of insomnia characterized by difficulties with sleep onset and/or sleep maintenance (as measured by wake time after sleep onset).

The clinical trials performed in support of efficacy were up to 3 weeks (using polysomnography measurement up to 2 weeks in both adult and elderly patients) and 24 weeks (using patient-reported assessment in adult patients only) in duration.

Doral

Doral is indicated for the treatment of insomnia characterized by difficulty in falling asleep, frequent nocturnal awakenings, and/or early morning awakenings. The effectiveness of Doral has been established in placebo-controlled clinical studies of 5 nights duration in acute and chronic insomnia.

The sustained effectiveness of Doral has been established in chronic insomnia in a sleep lab (polysomnographic) study of 28 nights duration. Because insomnia is often transient and intermittent, the prolonged administration of Doral Tablets is generally not necessary or recommended. Since insomnia may be a symptom of several other disorders, the possibility that the complaint may be related to a condition for which there is a more specific treatment should be considered.

Estazolam

Estazolam tablets, USP are indicated for the short-term management of insomnia characterized by difficulty in falling asleep, frequent nocturnal awakenings, and/or early morning awakenings. Both outpatient studies and a sleep laboratory study have shown that estazolam administered at bedtime improved sleep induction and sleep maintenance.

Because insomnia is often transient and intermittent, the prolonged administration of estazolam is generally neither necessary nor recommended. Since insomnia may be a symptom of several other disorders, the possibility that the complaint may be related to a condition for which there is a more specific treatment should be considered.

There is evidence to support the ability of estazolam to enhance the duration and quality of sleep for intervals up to 12 weeks.

Flurazepam

Flurazepam hydrochloride capsules are indicated for the treatment of insomnia characterized by difficulty in falling asleep, frequent nocturnal awakenings, and/or early morning awakenings.

Since insomnia is often transient and intermittent, short-term use is usually sufficient. Prolonged use of hypnotics is usually not indicated and should only be undertaken concomitantly with appropriate evaluation of the patient.

Halcion

Halcion is indicated for the short-term treatment of insomnia (generally 7 to 10 days) in adults.

Lunesta

Lunesta (eszopiclone) is indicated for the treatment of insomnia. In controlled outpatient and sleep laboratory studies, Lunesta administered at bedtime decreased sleep latency and improved sleep maintenance.

The clinical trials performed in support of efficacy were up to 6 months in duration. The final formal assessments of sleep latency and maintenance were performed at 4 weeks in the 6-week study (adults only), at the end of both 2-week studies (elderly only) and at the end of the 6-month study (adults only).

Restoril

Restoril (temazepam) is indicated for the short-term treatment of insomnia (generally 7 to 10 days).

For patients with short-term insomnia, instructions in the prescription should indicate that Restoril (temazepam) should be used for short periods of time (7 to 10 days).

The clinical trials performed in support of efficacy were 2 weeks in duration with the final formal assessment of sleep latency performed at the end of treatment.

Rozerem

Rozerem is indicated for the treatment of insomnia characterized by difficulty with sleep onset.

The clinical trials performed in support of efficacy were up to six months in duration. The final formal assessments of sleep latency were performed after two days of treatment during the crossover study (elderly only), at five weeks in the six-week studies (adults and elderly), and at the end of the six-month study (adults and elderly).

Sonata

Sonata is indicated for the short-term treatment of insomnia. Sonata has been shown to decrease the time to sleep onset for up to 30 days in controlled clinical studies. It has not been shown to increase total sleep time or decrease the number of awakenings.

The clinical trials performed in support of efficacy ranged from a single night to 5 weeks in duration. The final formal assessments of sleep latency were performed at the end of treatment.

COVERAGE CRITERIA

The requested drug will be covered with prior authorization when the following criteria are met:

- The requested drug is being prescribed for insomnia

AND

- Potential causes of sleep disturbances have been addressed or are currently being addressed (e.g., inappropriate sleep hygiene and sleep environment issues or treatable medical/psychological causes of chronic insomnia)

Quantity Limits apply.

POST LIMIT QUANTITY

Limits should accumulate across all drugs and strengths up to highest quantity listed depending on the order the claims are processed. Accumulation does not apply if limit is coded for daily dose.

Drug	1 Month Limit*	3 Month Limit*
Ambien all strengths (zolpidem)	30 tablets/25 days	90 tablets/75 days
Ambien CR all strengths (zolpidem extended-release)	30 tablets/25 days	90 tablets/75 days
Lunesta all strengths (eszopiclone)	30 tablets/25 days	90 tablets/75 days
Rozerem all strengths (ramelteon)	30 tablets/25 days	90 tablets/75 days
Sonata all strengths (zaleplon)	60 capsules /25 days	180 capsules /75 days

**The duration of 25 days is used for a 30-day fill period and 75 days is used for a 90-day fill period to allow time for refill processing.*

REFERENCES

1. Ambien [package insert]. Bridgewater, NJ: sanofi-aventis U.S. LLC; September 2020.
2. Ambien CR [package insert]. Bridgewater, NJ: sanofi-aventis U.S. LLC; September 2020.
3. Doral [package insert]. Atlanta, GA: Galt Pharmaceuticals LLC; October 2020.
4. Estazolam [package insert]. Parsippany, NJ: Actavis Pharma, Inc.; January 2021.
5. Flurazepam [package insert]. Morgantown, WV: Mylan Pharmaceuticals, Inc.; December 2018.
6. Halcion [package insert]. New York, NY: Pharmacia and Upjohn Company; February 2021.
7. Lunesta [package insert]. Marlborough, MA: Sunovion Pharmaceuticals Inc.; August 2019.
8. Restoril [package insert]. Webster Groves, MO: SpecGx LLC; February 2021.
9. Rozerem [package insert]. Deerfield, IL: Takeda Pharmaceuticals America, Inc.; December 2018.
10. Sonata [package insert]. Bristol, TN: King Pharmaceuticals Inc.; December 2019.
11. Micromedex (electronic version). IBM Watson Health, Greenwood Village, Colorado, USA. Available at: <https://www.micromedexsolutions.com>. Accessed February 2021.
12. Lexicomp Online, AHFS DI (Adult and Pediatric) Online, Hudson, Ohio: UpToDate, Inc.; 2021; Accessed February 2021.

13. Sateia MJ, Buysse DJ, Krystal AD, Neubauer DN, Heald JL. Clinical practice guideline for the pharmacologic treatment of chronic insomnia in adults: An American Academy of Sleep Medicine clinical practice guideline. *J Clin Sleep Med*. 2017;13(2):307-349.
14. Qaseem A, Kansagara D, Forcica MA, Cooke M, Denberg TD, Management of chronic insomnia disorder in adults: A clinical practice guideline from the American College of Physicians. *Ann Intern Med*. Epub, 2016. 165(2):125-33. doi: 10.7326/M15-2175. Epub 2016 May 3.
15. Schutte-Rodin S, Broch L, Buysse D, Dorsey C, Sateia M. Clinical guideline for the evaluation and management of chronic insomnia in adults. *J Clin Sleep Med* 2008; 4(5):487-504.