

Proposed PA Criteria

Savella® (milnacipran)

1. Coverage and Limitations

a. Fibromyalgia

- 1) If an ICD-9 code 729.1, Myalgia and Myositis, unspecified is documented on the prescription, OR
- 2) Completion of a Generic Nevada Medicaid Request for Prior Authorization documenting a diagnosis of Fibromyalgia, and/or Myalgia and Myositis, unspecified.

PA Form: Generic Nevada Medicaid Requests for Prior Authorization Form. PA forms are available at <http://nevada.fhsc.com>.