



**To: Jai Medical Providers**  
**From: BioScrip**  
**Date: July 24, 2014**  
**Subject: Prior Authorization Update**

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**The prior authorization criteria for Savella have been updated. Effective immediately, the prior authorization criteria for Savella will be as follows:**

**GENERIC:** MILNACIPRAN

**BRAND:** SAVELLA®

**INDICATION:**

(1) Moderate to severe fibromyalgia

**Criteria:**

(a) Diagnosis of fibromyalgia; **and**

(b) Documented failure or contraindication to:

(1) Pain relievers (e.g. Tramadol); **or**

(2) Muscle Relaxants (e.g. cyclobenzaprine, Baclofen)

The most current formulary, as well as all recent formulary changes are available online at [www.jaimedicalsystems.com/providers/pharmacy/](http://www.jaimedicalsystems.com/providers/pharmacy/).

Providers can contact BioScrip's Prior-Authorization Department at 800-555-8513 for assistance with PA requests or questions regarding clinical guidelines. Our PA Department is available Monday through Friday from 8:30 am-5:30 pm EST. For assistance with PA requests during non-business hours please contact our 24 hour customer service department at 800-213-5640.