



Zelapar (selegiline) ODT
Effective 04/17/2019

Plan	<input checked="" type="checkbox"/> MassHealth <input type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization
Benefit	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit (NLX)		<input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Specialty Limitations	N/A		
Contact Information	Specialty Medications		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	Non-Specialty Medications		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	Medical Specialty Medications (NLX)		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
Exceptions	N/A		

Overview

Zelapar is FDA indicated as adjunct therapy in the management of patients with Parkinson disease being treated with levodopa/carbidopa who exhibit deterioration in the quality of their response to this therapy

Coverage Guidelines

Authorization may be granted when the following criteria are met, and documentation has been submitted:

1. Member has been started and stabilized on Zelapar within the past 180 days (Note: Physician samples are not considered adequate justification for started & stabilized) **AND**
 2. Member is currently taking carbidopa/levodopa
- OR**
1. Member is unable to swallow pills or use a conventional dosage form **AND**
 2. Member is not currently receiving other oral solid dosage forms

Limitations

1. Approvals are granted for 12 months.

References

1. Zelapar (selegiline) [prescribing information]. Bridgewater, NJ: Valeant Pharmaceuticals North America LLC; August 2016

Review History

04/23/07 – Reviewed
09/21/09 – Updated
09/27/10 – Reviewed



12/15/10 – Updated disclaimer

09/19/11 – Reviewed

09/24/12 – Reviewed

09/23/13 – Reviewed

09/22/14 – Reviewed

09/21/15 – Reviewed

09/19/16 – Reviewed

09/18/17 – Reviewed

04/17/19 – Reviewed

11/16/2022 – Reviewed for Nov P&T. Separated out MH vs Comm/Exch. No clinical changes

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