



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Division of Medical Assistance**  
600 Washington Street  
Boston, MA 02111

**MassHealth**  
**Pharmacy Bulletin 66**  
**December 2000**

**TO:** Pharmacies Participating in MassHealth  
**FROM:** Wendy E. Warring, Commissioner  
**RE: Suspension of Pharmacy Bulletin 64—PA for Sedative-Hypnotic Sleep Medications**

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***Prior Authorization  
No Longer Required  
for Certain Sleep  
Medications***

The Division of Medical Assistance has suspended, until further notice, MassHealth Pharmacy Bulletin 64 (dated March 2000), which required prior authorization for all medication that is FDA-approved for treatment of insomnia.

Insomnia is a sleep disorder that affects an estimated 60 million Americans a year, according to the National Sleep Foundation. While many patients with insomnia may be treated effectively without the use of drugs, some patients are more effectively treated with sedative, sleep-hypnotic medication. In those instances where sleep-hypnotic therapy is indicated, research findings show that many medications stop working after several weeks of continued use. Use of the medication, therefore, should be limited to a maximum of two to three weeks.

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***List of Drugs***

The following drugs, which were identified in Pharmacy Bulletin 64 as requiring prior authorization, no longer require it.

Amobarbital/Secobarbital (Tuinal)	Quazepam (Doral)
Chloral Hydrate (Noctec)	Secobarbital (Seconal)
Estazolam (ProSom)	Temazepam (Restoril)
Ethchlorvynol (Placidyl)	Triazolam (Halcion)
Flurazepam (Dalmane)	Zaleplon (Sonata)
Pentobarbital (Nembutal)	Zolpidem (Ambien)

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***Reimbursement to  
Members***

Under some circumstances, members may be eligible to receive reimbursement if they paid out-of-pocket to have an insomnia medication filled during the time Pharmacy Bulletin 64 was in effect. The enclosed notice describes the circumstances under which a member may be eligible for reimbursement.

**Please post the enclosed notice in your pharmacy where members can view it easily.**

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***Questions***

If you have any questions about the information in this bulletin, please call the MassHealth Provider Services Department at (617) 628-4141 or 1-800-325-5231.

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## NOTICE TO MASSHEALTH MEMBERS

If you were a MassHealth member from March 1, 2000, through December 1, 2000, and paid for a refill of any of the sleeping medicines listed below because you were told that MassHealth would not cover the refill, you may be able to get your money back. To get your money back, all of the following must apply:

- The medicine is listed below and was medically necessary for you.
- Your doctor gave you a prescription for the medicine.
- You brought the prescription to a pharmacy, or asked for a refill that was allowed on the doctor's prescription.
- Your doctor or pharmacist told you that MassHealth would not pay for the prescription.
- You paid for the prescription yourself.

To get your money back, send your receipt or pharmacy proof of purchase (printout) on or before March 1, 2001, to:

Division of Medical Assistance  
Pharmacy Unit, 5<sup>th</sup> Floor  
600 Washington Street  
Boston, MA 02111

MassHealth will look at your prescription records to make sure that the prescription would otherwise have been covered. Some of the reasons for noncoverage may be: early refill, ingredient duplication, therapeutic duplication, or drug-to-drug interaction. There may be other reasons, too. If your money cannot be returned, you will get a letter explaining why.

### List of Sleep Medicines

Amobarbital/Secobarbital (Tuinal)	Quazepam (Doral)
Chloral Hydrate (Noctec)	Secobarbital (Seconal)
Estazolam (ProSom)	Temazepam (Restoril)
Ethchlorvynol (Placidyl)	Triazolam (Halcion)
Flurazepam (Dalmane)	Zaleplon (Sonata)
Pentobarbital (Nembutal)	Zolpidem (Ambien)

