

Drug Name: zolmitriptan tablet, zolmitriptan ODT

Effective: 10/1/2020 **Reviewed:** 6/2020

Required Medical	The member has trialed and experienced an inadequate
Information:	treatment response or intolerance to two formulary preferred
	triptans (sumatriptan, naratriptan, rizatriptan)
Quantity Limit:	6 tablets per 30 days
Coverage Duration:	12 months
Coding Logic for Step	Zolmitriptan tablet and zolmitriptan ODT will pay if there is at least
Therapy:	one paid claim within the last 365 days of two of the following drugs:
	sumatriptan tablet, naratriptan tablet, rizatriptan tablet, rizatriptan
	ODT