

# HealthAlliance**MEDICARE**

## **PURPOSE OF THE POLICY**

To provide prior authorization criteria for Part D coverage of Megace.

## **STATEMENT OF THE POLICY**

Health Alliance will require submitted information for coverage of Megace for Part D.

## **PROCEDURES**

### **1. Criteria**

- 1.1 According to the Centers for Medicare and Medicaid (CMS), megestrol acetate is Part D approved for a diagnosis of AIDS wasting and cachexia when used as medically accepted indications.

### **2. Exclusion Criteria**

- 2.1 Use for weight gain or other cosmetic purpose.