

Clinical Pharmacy Program Guidelines for ADHD Products- ARIZONA

Program	ADHD Products
Medication	ADHD Products (Stimulants and Non-Stimulants)

1. Background:

The intent of the criteria is to ensure the appropriate utilization of ADHD agents within the appropriate FDA approved age limits, labeled indications, and consistent with current evidence in the literature.

A. Formulary Status

<p>Preferred Brand Products: Adderall XR (amphetamine/dextroamphetamine salts extended release) capsule Adderall (amphetamine/dextroamphetamine salts) tablet Aptensio XR (methylphenidate) capsule 24hr Daytrana (methylphenidate) patch Focalin (dexmethylphenidate) tablet Focalin XR (dexmethylphenidate extended release) capsule Kapvay (clonidine) extended release tablet Methylin (methylphenidate) solution Quillichew ER (methylphenidate extended release) chewable tablet Quillivant XR (methylphenidate) suspension Ritalin LA 10mg (methylphenidate ER) capsule Strattera (atomoxetine) capsule Vyvanse (lisdexamfetamine) capsule</p>
<p>Preferred Generic Products: Amphetamine-dextroamphetamine tablets Clonidine tablet Dextroamphetamine extended release capsule Dextroamphetamine tablet Guanfacine extended release tablet Guanfacine tablet Methylphenidate chewable tablet Methylphenidate controlled release/ 24 hr tablet Methylphenidate extended release capsule (generic Metadate CD) Methylphenidate extended release tablet (generic Metadate ER) Methylphenidate tablet</p>
<p>Non-preferred Brand Products: Adzenys XR (amphetamine) ER ODT Concerta (methylphenidate) ER tablet Cotempla XR (methylphenidate) ODT Desoxyn (methamphetamine) tablet Dexedrine (dextroamphetamine) spansule/ tablet Dyanavel XR (amphetamine) suspension Evekeo (amphetamine) tablet Intuniv (guanfacine) tablet</p>

Metadate CD (methylphenidate extended release) capsule
 Metadate (methylphenidate) ER tablet
 Methylin (methylphenidate) chew
 Mydayis (mixed amphetamine salts) ER capsule
 Procentra (dextroamphetamine) solution
 Ritalin (methylphenidate) tablet
 Ritalin LA 20, 30,40,60 mg (methylphenidate ER) capsule
 Ritalin SR (methylphenidate) tablet
 Vyvanse (lisdexamfetamine) chewable tablet
 Zenzedi (dextroamphetamine) tablet

Non-preferred Generic Products:

Amphetamine-dextroamphetamine XR capsules (generic Adderall XR)
 Atomoxetine capsule (generic Strattera)
 Dexmethylphenidate 24hr capsule (generic Focalin XR)
 Dexmethylphenidate tablet (generic Focalin)
 Dextroamphetamine solution (generic Procentra)
 Dextroamphetamine tablet (generic Zenzedi)
 Methamphetamine tablet (generic Desoxyn)
 Methylphenidate ER tablet (generic Concerta/Ritalin SR)
 Methylphenidate ER capsule (generic Ritalin LA)
 Methylphenidate solution (generic Methylin)

i.

Off-labeled Use:

Drug therapies must be utilized in accordance with FDA approved indications OR the uses found within the compendia of literature[†] AND the drug is being prescribed for a medically accepted indication that is recognized as a covered benefit by the applicable health plans' program. Authorization for off-labeled use of medication will be evaluated on an individual basis. Review of an off-labeled request by the UnitedHealthcare Community & State Medical Staff will be predicated on the appropriateness of treatment, scientific evidence and full consideration of medical necessity.

[†]-compendia of current literature: • American Hospital Formulary Service Drug Information • National Comprehensive Cancer Network Drugs and Biologics Compendium • Thomson Micromedex DrugDex • Clinical Pharmacology

2. Coverage Criteria:

A. ADHD Medications for Use in Children Under 6 Years Old

NOTE: This section applies to stimulant and non-stimulant products

All of the following:

1. The requesting clinician has documented that the child has a diagnosis of ADHD

-AND-

2. The requesting clinician has documented that psychosocial issues have been evaluated before request for ADHD medications.

-AND-

3. The requesting clinician has documented non-medication alternatives that have been attempted before request for ADHD medications.

-AND-

4. The requested dose does NOT exceed the FDA recommended maximum daily dosage unless the provider has submitted clinical justification for the dose exceeding the FDA maximum.

Authorization of therapy will be issued for 12 months.

B. Non-preferred Stimulants/ Non-Stimulants

1. If the request is for a non-preferred product, the patient has a history of failure, contraindication, or intolerance to a trial of at least three preferred products
Authorization of therapy will be issued for 12 months

3. References:

1. Adderall[®] Prescribing Information. Pamona, NY: Barr Laboratories, March 2007.
2. Adderall XR[®] Prescribing Information. Wayne, PA: Shire, August 2011.
3. Concerta[®] Prescribing Information. Titusville, NJ: Ortho-McNeil-Janssen Pharmaceuticals, November 2010.
4. Dexedrine[®] Prescribing Information. Pamona, NY: Barr Laboratories, March 2000.
5. Dexedrine Spansule[®] Prescribing Information. Research Triangle Park, NC: GlaxoSmithKline, September 2009.
6. Intuniv[®] Prescribing Information. Wayne, PA: Shire, June 2011.
7. Metadate ER[®] Prescribing Information. Rochester, NY: Medeva Pharmaceuticals, July 1999.
8. Ritalin[®] Prescribing Information. East Hanover, NJ: Novartis Pharmaceuticals, December 2010.
9. Ritalin SR[®] Prescribing Information. East Hanover, NJ: Novartis Pharmaceuticals, December 2010.
10. Strattera[®] Prescribing Information. Indianapolis, IN: Eli Lilly, August 2011.
11. American Academy of Pediatrics: Clinical Practice Guideline: ADHD: Clinical Practice Guideline for the Diagnosis, Evaluation, and Treatment of Attention-Deficit/Hyperactivity Disorder in Children and Adolescents Subcommittee on Attention-Deficit/Hyperactivity Disorder, Steering Committee on Quality Improvement and Management. *Pediatrics*. 2011; 128:5 1007-1022; published ahead of print October 16, 2011, doi:10.1542/peds.2011-2654.

12. Greenhill L, Kollins S, Abikoff H, et al. Efficacy and Safety of Immediate-Release Methylphenidate Treatment for Preschoolers With ADHD. *J Am Acad Child Adolesc Psychiatry*. 2006; 45(11): 1284-93.
13. Vyvanse Prescribing Information. Wayne, PA: Shire, January 2015.

Program	Program type – ADHD Products
Change Control	
Date	Change
August 2017	New policy specific to Arizona
January 2018	Updated medications in background section. Removed Intuniv section. Added review for non-preferred non-stimulant products.