

## Pharmacy Services (800) 522-0114, option 4

August 9, 2017

## RE: ADHD & Narcolepsy Medication Prior Authorization Category Update – Effective August 23, 2017

Dear SoonerCare Provider,

The purpose of this fax is to provide updates regarding ADHD and Narcolepsy medications coverage.

## Effective August 23, 2017, the following changes will be made to the ADHD & Narcolepsy category:

- 1. Vyvanse® (lisdexamfetamine chewable tablets) will be placed in Tier-1 of the ADHD & Narcolepsy Medication Prior Authorization category. Tier-1 ADHD medications do not require prior authorization for members under 21 and over 5 years of age. For all other members, prior authorization is required with current Tier-1 criteria.
- 2. Strattera® (atomoxetine) will become brand preferred. Claims for the generic formulation will require prior authorization and reasoning why the brand formulation cannot be used.
- 3. The following ADHD medications will move from Tier-2 to Tier-1:
  - a. Aptensio XR™ (methylphenidate ER capsules), generic Metadate CD® (methylphenidate ER capsules), and generic Ritalin LA® (methylphenidate ER capsules)
    - i. Metadate CD® and Ritalin LA® will no longer be brand preferred
  - b. Current Tier-1 criteria will apply.
- 4. The following ADHD medications will move from Tier-3 to Tier-2:
  - a. Quillivant XR® (methylphenidate ER suspension) and QuilliChew ER™ (methylphenidate ER chewable tablets)
    - i. Quillivant XR® and QuilliChew ER™ will have an age restriction of ten years and younger. Members older than ten years of age will require a patient-specific, clinically significant reason why a special formulation product is needed.
  - b. Current Tier-2 criteria will apply.
- 5. The following ADHD medications will move from Tier-1 to Tier-3:
  - a. Generic Metadate ER® (methylphenidate ER tablets), generic Methylin ER® (methylphenidate ER tablets), and generic Ritalin SR® (methylphenidate ER tablets)
  - b. Current Tier-3 criteria will apply.
- 6. Addition of a previously failed trial of Nuvigil® (armodafinil), within the last 180 days, will be required for authorization of Provigil® (modafinil)
  - a. All other current Narcolepsy criteria will apply.

If a member is currently on therapy an ADHD or Narcolepsy medication, the medication will be "grandfathered." If a member requires an ADHD or Narcolepsy medication, prior authorization requests can be submitted for consideration to SoonerCare Pharmacy Services.

Updated versions of prior authorization criteria for ADHD or Narcolepsy medications can be downloaded from <a href="https://www.okhca.org/rx-pa">www.okhca.org/rx-pa</a>, then clicking "Central Nervous System/Behavioral Health".

Prior authorization request forms can be found online at www.okhca.org/forms (PHARM-04).

Thank you for the services you provide to Oklahomans insured by SoonerCare!