

MEDICATION COVERAGE POLICY

PHARMACY AND THERAPEUTICS ADVISORY COMMITTEE

POLICY:	ADHD Medications	P&T DATE	12/13/2017
CLASS:	Psychiatric Disorders	REVIEW HISTORY	12/16, 9/15, 5/12, 5/10,
LOB:	MCL	(MONTH/YEAR)	3/09

This policy has been developed through review of medical literature, consideration of medical necessity, generally accepted medical practice standards, and approved by the HPSJ Pharmacy and Therapeutic Advisory Committee.

OVERVIEW

Attention-Deficit/Hyperactivity Disorder (ADHD) is a chronic behavioral disorder which includes difficulties with attention, increased activity and difficulties with impulsivity. ADHD mostly manifests during childhood and can continue on to adulthood. According to American Academy of Child and Adolescent Psychiatry, about 11 % of school aged-children and 4% of adults have ADHD. The CDC estimates up to 50% of adults who had ADHD in childhood.¹ If left untreated, ADHD can lead to cognitive, social, and emotional dysfunction. This review will examine the treatment guidelines of ADHD and the currently available drug products and their coverage criteria.

Table 1: Formulary ADHD Agents: (Current as of 9/2017)

Therapeutic Class	Generic Name (Brand Name)	Available Strengths	Formulary Limits	Average Cost/Month	Notes
Stimulants	Dexmethylphenidate (Focalin, Focalin XR)	Dexmethylphenidate IR tablets:			
		2.5 mg	--	\$22.14	
		5 mg	--	\$34.81	
		10 mg	--	\$41.32	
		Dexmethylphenidate ER Capsules:			
		5 mg	--	\$138.84	
		10 mg	--	\$163.69	
		15 mg	--	\$149.11	
		20 mg	--	\$212.79	
		25 mg	--	\$220.04	
		30 mg	--	\$152.52	
		40 mg	--	--	
		50 mg	--	--	
		Focalin XR Capsules:			
		5 mg	NF	\$328.07	
		10 mg	NF	\$355.15	
		20 mg	NF	\$333.91	
		25 mg	NF	\$315.85	

	35 mg	NF	--	
Dextroamphetamine Sulfate (Dexedrine XR, Procentra, Zenzedi)	Dextroamphetamine Sulfate IR Tablets:			
	5 mg	--	\$108.62	
	10 mg	--	\$84.43	
	Zenzedi IR Ttablets:			
	2.5 mg	NF	--	
	5 mg	NF	--	
	7.5 mg	NF	--	
	10 mg	NF	--	
	15 mg	NF	--	
	20 mg	NF	--	
	30 mg	NF	--	
	Dextroamphetamine Sulfate ER Capsules:			
	5 mg	--	--	
	10 mg	--	--	
	15 mg	--	--	
	ProCentra Solution			
	5 mg/ 5ml	NF	--	
Dextroamphetamine/ Amphetamine (Adderall, Adderall XR, Mydayis Therapy Pack)	Dextroamphetamine/ Amphetamine IR Tablets:			
	5 mg	--	\$32.14	
	7.5 mg	--	\$24.21	
	10 mg	--	\$36.81	
	12.5 mg	--	--	
	15 mg	--	\$32.27	
	20 mg	--	\$41.61	
	30 mg	--	\$38.86	
	Dextroamphetamine/ Amphetamine ER Capsules:			
	5 mg	--	--	
	10 mg	--	--	
	15 mg	--	\$131.65	
	20 mg	--	\$153.84	
25 mg	--	\$132.59		

	30 mg	--	\$144.75	
	Mydayis Thearapy Pack Capsule:			
	12.5 mg	NF	--	
	25 mg	NF	--	
	37.5 mg	NF	--	
	50 mg	NF	--	
Lisdexamfetamine (Vyvanse)	Vyvanse Capsules:			
	10 mg	--	\$259.94	
	20 mg	--	\$262.80	
	30 mg	--	\$259.44	
	40 mg	--	\$256.81	
	50 mg	--	\$256.01	
	60 mg	--	\$244.99	
	70 mg	--	\$254.04	
	Vyvanse Chewable Tablets:			
	10 mg	NF	--	
	20 mg	NF	--	
	30 mg	NF	--	
	40 mg	NF	--	
	50 mg	NF	--	
	60 mg	NF	--	
	Methylphenidate (Aptensio XR, Concerta, Cotempla XR-ODT, Metadate CD, Ritalin IR/SR/LA, Methylin, Methylin ER, Quillivant ER, Quillivant XR)	Methylphenidate IR Tablets:		
5 mg		--	\$14.70	
10 mg		--	\$40.32	
20 mg		--	--	
Methylphenidate ER Tablets:				
10 mg		--	\$160.34	
18 mg		--	\$182.01	
20 mg		--	\$188.77	
27 mg		--	\$152.69	
36 mg		--	\$188.48	
54 mg		--	\$186.72	

Methylphenidate Chewable Tablets:			
2.5 mg	--	\$55.33	
5 mg	--	\$169.30	
10 mg	--	\$235.97	
Methylphenidate CD Capsules:			
10 mg	NF	\$117.02	
20 mg	NF	\$145.38	
30 mg	NF	\$119.67	
40 mg	NF	\$165.25	
50 mg	NF	\$203.94	
60 mg	NF	\$178.95	
Methylphenidate ER Capsules:			
10 mg	--	\$130.94	
20 mg	--	\$104.31	
30 mg	--	\$143.22	
40 mg	--	\$110.95	
50 mg	--	--	
60 mg	--	\$203.94	
Methylphenidate LA Capsules:			
20 mg	--	\$102.10	
30 mg	--	\$107.19	
40 mg	--	--	
Ritalin LA Capsules:			
10 mg	--	\$302.95	
Methylphenidate Solution:			
5 mg/5 ml	NF	\$172.30	
10 mg/5 ml	--	--	
Aptensio XR Capsules:			
10 mg	NF	--	
15 mg	NF	--	
20 mg	NF	--	
30 mg	NF	--	

		40 mg	NF	--	
		50 mg	NF	--	
		60 mg	NF	--	
		Cotempla XR-ODT:			
		8.6 mg	NF	--	
		17.3 mg	NF	--	
		25.9 mg	NF	--	
		Quillivant XR Suspension:			
		25 mg/ 5 ml	--	\$260.54	
		QuilliChew ER Tablets:			
		20 mg	--	\$215.56	
		30 mg	NF	\$309.44	
		40 mg	NF	--	
	Methylphenidate (Daytrana)	Daytrana Patches:			
		10mg/9hr	PA	\$305.42	Restricted to patients with documented inability to swallow tablets, capsules, chewables, solutions, or suspensions.
		15mg/9hr	PA	\$618.38	
		20mg/9hr	PA	\$306.41	
		30mg/9hr	PA	\$309.20	
Non-Stimulants	Atomoxetine (Strattera)	Atomoxetine Capsule:			
		10 mg	ST	\$172.69	Step-therapy to stimulants
		18 mg	ST	\$168.68	
		25 mg	ST	\$174.05	
		40 mg	ST	\$173.10	
		60 mg	ST	\$167.45	
		80 mg	ST	\$193.00	
	100mg	ST	\$202.31		
		Strattera Capsules:			
		10 mg	NF	\$349.33	Step-therapy to stimulants
		18 mg	NF	\$388.58	
		25 mg	NF	\$380.16	
		40 mg	NF	\$329.38	
		60 mg	NF	\$426.03	

	80 mg	NF	\$453.95	
	100mg	NF	\$458.12	
Guanfacine (Intuniv)	Guanfacine IR tablets:			
	1 mg	--	--	
	2 mg	--	--	
	ER Tablets:			
	1 mg	ST; QL	\$36.65	Step-therapy to stimulants. Limit 1 tablet per day.
	2 mg	ST; QL	\$32.11	
	3 mg	ST; QL	\$36.50	
	4 mg	ST; QL	\$40.08	
	Intunive ER Tablets:			
	1 mg	NF	\$195.02	
	2 mg	NF	--	
	3 mg	NF	\$294.76	
	4 mg	NF	\$297.25	
	Clonidine (Kapvay)	Guanfacine ER Tablets:		
0.1 mg		NF	\$144.42	Non-formulary.
0.2 mg		NF	--	

NF = Non-Formulary; PA = Prior Authorization Required; QL = Quantity Limit; ST = Step Therapy

EVALUATION CRITERIA FOR APPROVAL/EXCEPTION CONSIDERATION

Below are the coverage criteria and required information for each agent. These coverage criteria have been reviewed approved by the HPSJ Pharmacy & Therapeutics (P&T) Advisory Committee. For conditions not covered under this Coverage Policy, HPSJ will make the determination based on Medical Necessity as described in HSPJ Medical Review Guidelines (UM06).

Stimulants

Dexmethylphenidate IR/XR (Focalin), Dextroamphetamine Sulfate IR/ER (Dexedrine), Dextroamphetamine/Amphetamine IR/ER (Adderall), Lisdexamfetamine (Vyvanse), Methylphenidate IR/ER/SR (Ritalin, Methylin, Quillivant XR/ER)

- Coverage Criteria:** None
- Limits:** None
- Required Information for Approval:** None
- Other Notes:** None
- Non-Formulary:** Brand Focalin, Focalin XR, Methylphenidate 5 mg/5 ml solution

Methylphenidate Patch (Daytrana)

- Coverage Criteria:** Methylphenidate Patch is reserved for patients with documented inability to swallow tablets, capsules, chewables, solutions, or suspensions.
- Limits:** None

- Required Information for Approval:** Clinic notes documenting patient is unable to swallow oral formulations.
- Other Notes:** None

Non-Stimulants

Guanfacine IR, Clonidine IR

- Coverage Criteria:** None
- Limits:** None
- Required Information for Approval:** None
- Other Notes:** None

Atomoxetine (Strattera), Guanfacine ER (Intuniv)*

- Coverage Criteria:** Step therapy to intolerance or treatment failure of stimulants.
- Limits:** Guanfacine ER (Intuniv) limited to 1 tablet per day.
- Required Information for Approval:** Prescription history or clinic notes documenting previous stimulant(s) used.
- Other Notes:** None
- Non-Formulary:** Clonidine ER (Kapvay), Brand name Intuniv, Brand name Strattera

CLINICAL JUSTIFICATION

The 2011 American Academy of Pediatrics (AAP) recommends behavioral modification therapy as first line treatment for children ages 4-5.² For ages 6 and up, the AAP recommends using a combination of behavioral modification therapy and stimulants.² Stimulants have shown better efficacy than non-stimulants (e.g. Atomoxetine, Guanfacine, and Clonidine).^{3, 4} In general, stimulants exhibit comparable efficacy. Between 70-80% of patients with ADHD respond to stimulants.⁵ The choice of stimulant is dependent on mode and frequency of administration. Non-stimulants may be preferred in patients with a past history or family history of substance abuse. Dosing of ADHD medications also tends to not be weight dependent nor have standard dosages based on a child's weight. The typical process is to gradually increase to the child's best tolerated dose.²

REFERENCES

1. Searight HR, Burke HM, Rottnek F. Adult ADHD: evaluation and treatment in family medicine. Am Fam Physician. 2000; 62(9): 2077-2086.
2. ADHD: Clinical Practice Guideline for the Diagnosis, Evaluation, and Treatment of Attention-Deficit/Hyperactivity Disorder in Children and Adolescents. Pediatrics Nov 2011, 128 (5) 1007-1022.
3. Faraone SV, Glatt SJ. A comparison of the efficacy of medications for adult attention-deficit/hyperactivity disorder using meta-analysis of effect sizes. J Clin Psychiatry. 2010; 71(6): 754-763.
4. Bitter I, Angyalosi A, Czobor P. Pharmacological treatment of adult ADHD. Curr Opin Psychiatry. 2010; 25(6): 529-534.
5. Bararesi WJ, Katusic SK, Colligan RC, Weaver AL, Leibson CL, Jacobsen SJ. Long-term stimulant medication treatment of attention-deficit/hyperactivity disorder: results from a population-based study. J Dev Behav Pediatr. 2006; 27(1): 1.

REVIEW & EDIT HISTORY

Document Changes	Reference	Date	P&T Chairman
Creation of Policy	ADHD Stimulant - Class Review (3-09)	3/2009	Allen Shek, PharmD
Updated Policy	Intuniv Monograph 5-18-2010.docx	5/2010	Allen Shek, PharmD
Updated Policy	ADHD review 20120515.docx	5/2012	Allen Shek, PharmD
Updated Policy	HPSJ Coverage Policy – Psychiatric – ADHD 2015-05.doc	5/2015	Jonathan Szkotak, PharmD, BCACP
Updated Policy	HPSJ Coverage Policy – Psychiatric – ADHD 2015-09.docx	9/2015	Johnathan Yeh, PharmD
Updated Policy	HPSJ Coverage Policy – Psychiatric – ADHD 2016-12.docx	12/2016	Johnathan Yeh, PharmD
Updated Policy	HPSJ Coverage Policy – Psychiatric – ADHD 2017-12.docx	12/2017	Johnathan Yeh, PharmD

Note: All changes are approved by the HPSJ P&T Committee before incorporation into the utilization policy