## bupropion hydrochloride, extended release (FORFIVO XL)

## Diagnosis Considered for Coverage:

Major depressive disorder (MDD)

## **Coverage Criteria:**

## For diagnosis above:

- Dose does not exceed FDA maximum of 450 mg per day, and
- Patient is currently taking bupropion extended-release (Wellbutrin XL/SR) and request to reduce pill burden.

Coverage Duration: one year

Effective Date: 1/31/2024