

## IMMEDIATE RELEASE STIMULANT AGENTS

amphetamine (EVEKEO)

Evekeo ODT (amphetamine, oral-dissolving tablet)

methamphetamine (Desoxyn),

dextroamphetamine (Dexedrine),

methylphenidate oral solution (Methylin),

Procentra (dexamphetamine, oral solution),

Zenzedi (dexamphetamine)

### Diagnoses Considered for Coverage:

- Attention Deficit Hyperactivity Disorder (ADHD)
- Narcolepsy

### Coverage Criteria:

#### FOR COMMERCIAL PLUS

##### 2. For methamphetamine (Desoxyn), dextroamphetamine (Dexedrine), methylphenidate oral solution (Methylin):

- For diagnosis listed above, **and**
- Dose does not exceed FDA label maximum, **and**
- Inadequate response, intolerable side effect, or contraindication to one preferred immediate-release ADHD alternative including: amphetamine/dexamphetamine (generic Adderall), dexmethylphenidate (generic Focalin), methylphenidate chewable (generic Methylin) and methylphenidate (generic Ritalin), **and**
- **For patient 18 years of age or older:** If being used for attention deficit hyperactivity disorder (ADHD) then confirmed by psychiatrist after age 18 years old, **OR** If being used for narcolepsy then confirmed by a positive sleep study (polysomnography).

##### 3. For Evekeo ODT, Procentra or Zenzedi:

- For diagnosis listed above, **and**
- Dose does not exceed FDA label maximum, **and**
- Inadequate response, intolerable side effect, or contraindication to one preferred immediate-release ADHD alternative including: amphetamine/dexamphetamine (generic Adderall), dexmethylphenidate (generic Focalin), methylphenidate chewable (generic Methylin), methylphenidate (generic Ritalin), methamphetamine (generic Desoxyn), dextroamphetamine (generic Dexedrine), and methylphenidate oral solution (generic Methylin), **and**
- **For patient 18 years of age or older:** If being used for attention deficit hyperactivity disorder (ADHD) then confirmed by psychiatrist after age 18 years old, **OR** If being used for narcolepsy then confirmed by a positive sleep study (polysomnography).

#### FOR COMMERCIAL STANDARD

##### 4. For Evekeo ODT, Procentra or Zenzedi:

- For diagnosis listed above, **and**
- Dose does not exceed FDA label maximum, **and**
- Inadequate response, intolerable side effect, or contraindication to one preferred immediate-release ADHD alternative including: amphetamine/dexamphetamine (generic Adderall), dexmethylphenidate (generic Focalin), methylphenidate chewable (generic Methylin), methylphenidate (generic Ritalin), methamphetamine (generic Desoxyn), dextroamphetamine (generic Dexedrine),

- and methylphenidate oral solution (generic Methylin) , **and**
- ***For patient 18 years of age or older:*** If being used for attention deficit hyperactivity disorder (ADHD) then confirmed by psychiatrist after age 18 years old, **OR** If being used for narcolepsy then confirmed by a positive sleep study (polysomnography).

**FOR BRAND NAME DRUG WHEN GENERIC AVAILABLE**

**5. For brand-name Desoxyn, Dexedrine, Evekeo, Methylin:**

- For diagnosis listed above, **and**
- Meets coverage criteria for generic formulation, **and**
- Allergic or intolerable side effect to the generic formulation.

**Coverage Duration:** Length of benefit

Effective: 8/20/2019GF