

ADD/ADHD – Stimulants and Related Agents

Point-of-Sale (POS) edits are safety limitations that are automatically verified through computer programming at the time that a prescription claim is submitted at the pharmacy. These edits can be applied to *any* medication, whether or not it is listed in the Preferred Drug List / Non-Preferred Drug List (PDL/NPDL). The first section of this document is organized to follow the order of the therapeutic classes in the PDL/NPDL and explains the POS edits for those medications.

POS Abbreviations

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|---|--|---|--|
| AL – Age Limit | DD – Drug-Drug Interaction | MD – Maximum Dose Limit | TD - Therapeutic Duplication |
| BH – Behavioral Health Clinical Authorization for Children Younger than 7 Years of Age | DS – Maximum Days’ Supply Allowed | PR – Enrollment in a Physician-Supervised Program Required | UN – Drug Use Not Warranted |
| BY – Diagnosis Codes Bypass Some Requirements | DT – Duration of Therapy Limit | PU – Prior Use of Other Medication is Required | X – Prescriber Must Have ‘X’ DEA Number |
| CL – Additional Clinical Information is Required | DX – Diagnosis Code Requirement | QL – Quantity Limit | YQ – Yearly Quantity Limit |
| CU – Concurrent Use with Other Medication is Restricted | ER – Early Refill | RX – Specific Prescription Requirement | |

Pharmacy Prior Authorization Phone Numbers for MCOs and FFS

Aetna Better Health of Louisiana **1-855-242-0802**

AmeriHealth Caritas Louisiana **1-800-684-5502**

Fee-for-Service (FFS) Louisiana Legacy Medicaid **1-866-730-4357**

Healthy Blue **1-844-521-6942**

Louisiana Healthcare Connections **1-888-929-3790**

UnitedHealthcare **1-800-310-6826**

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| POS Edits |
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| <p>AL – Armodafinil and modafinil are limited to use in recipients who are at least 17 years of age. Pitolisant and solriamfetol are limited to use in recipients who are at least 18 years of age.</p> |
| <p>BH – Additional behavioral-health related clinical information (trial of behavioral therapy, etc.) is required for all agents when requested for recipients who are younger than 7 years of age.</p> |
| <p>CU – Armodafinil, modafinil, pitolisant and solriamfetol are monitored at the pharmacy POS for concurrent use with sedative hypnotics.</p> |
| <p>DX – Pharmacy claims for all agents must be submitted with an appropriate diagnosis code found at THIS LINK.</p> <ul style="list-style-type: none"> - Because some agents used for ADHD are also commonly used for hypertension/heart conditions (<i>clonidine immediate-release tablet, clonidine patch, guanfacine immediate-release tablet</i>), these agents <i>do not require a diagnosis at the pharmacy POS if the recipient is 21 years of age or older.</i> |
| <p>TD – These agents are monitored at the pharmacy POS for duplication of therapy.</p> <ul style="list-style-type: none"> - Armodafinil, modafinil, pitolisant and solriamfetol with each other. - Armodafinil, modafinil, pitolisant and solriamfetol with any other stimulant or related agent. - Short-acting ADHD agents with other short-acting ADHD agents. - Long-acting ADHD agents with other long-acting ADHD agents. - <u>ADHD agents written by TWO different prescribers.</u> - <u>Atomoxetine (Strattera®) with viloxazine (Qelbree™).</u> |

| Revision / Date | Implementation Date |
|---|---------------------|
| Created POS Document | February 2020 |
| Added pitolisant / November 2019 | March 2020 |
| Added solriamfetol / November 2019 | March 2020 |
| Modified to apply new age requirement for behavioral health clinical authorization / September 2020 | January 2021 |
| <u>Added viloxazine / May 2021</u> | |