

Criteria Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

amphetamine (Dyanavel XR®)

Non-formulary **amphetamine (Dyanavel XR®)** will be covered on the prescription drug benefit when the following criteria are met:

- Diagnosis of ADHD or ADD **-AND-**

1) For patients under 21 years of age:

- Patient has documented intolerance or contraindication to sprinkle formulations and is unable to swallow whole tablets
- OR-**
- Patient is already stable on the drug

2) For patients 21 years of age or older:

- There is a documented diagnosis of ADHD or ADD on the patient's problem list
- AND-**
- Adequate trial** (7 days) of amphetamine salt combo XR (Adderall XR), **unless** allergy to inactive ingredient
- AND-**
- Adequate trial** (7 days) of dextroamphetamine ER (Dexedrine Spansule), **unless** allergy to inactive ingredient
- AND-**
- Adequate trial** (7 days) of lisdexamfetamine (Vyvanse), **unless** allergy to inactive ingredient
- OR-**
- Dose change only: patient meets current criteria and is already taking the drug

** Adequate trial of a long acting agent is further defined as wearing off that is not resolved by increasing the dose, AND adding a short-acting agent OR increasing frequency to twice daily OR clinically significant side effects related to the dosage form that cannot be resolved by adjusting the dose or timing.