SmartPA Criteria Proposal

Drug/Drug Class:	ADHD, Non-Stimulants PDL Edit
First Implementation Date:	January 10, 2019
Proposed Date:	October 17, 2023
Prepared For:	MO HealthNet
Prepared By:	MO HealthNet/Conduent
Criteria Status:	☒ Existing Criteria ☐ Revision of Existing Criteria ☐ New Criteria

Executive Summary

Purpose: The MO HealthNet Pharmacy Program will implement a state-specific preferred drug list.

Why Issue Selected: Attention deficit hyperactivity disorder (ADHD) is a neuropsychiatric disorder with symptoms that affect cognitive, academic, occupational, behavioral, emotional, and social functioning. Although typically thought of as a childhood disease, many patients will require treatment into adulthood. Treatment recommendations for patients with ADHD vary based on age and include behavioral changes, cognitive therapy, and pharmacotherapy. Pharmacotherapy options include stimulants, such as methylphenidate and amphetamine, and nonstimulant medications.

Total program savings for the PDL classes will be regularly reviewed.

Program-Specific Information:

Preferred Agents	Non-Preferred Agents
• Atomoxetine • Clonidine ER 0.1 mg tabs (gen Kapvay™) • Guanfacine ER	• Intuniv® • Qelbree® • Strattera®

Type of Criteria:
☐ **Increased risk of ADE**
☒ **Appropriate Indications**
☒ **Preferred Drug List**
☐ **Clinical Edit**

Data Sources:
☐ **Only Administrative Databases**
☒ **Databases + Prescriber-Supplied**

Setting & Population

- Drug class for review: ADHD, Non-Stimulants
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- Dosage within approved dosage limitations **AND**
- Participant demonstrates compliance to prescribed therapy **OR**
- Failure to achieve desired therapeutic outcomes with trial on 2 or more preferred agents

    - Documented trial period for preferred agents (90 out of 120 days) **OR**
    - Documented ADE/ADR to preferred agents
- For Qelbree: documented therapeutic trial of generic Strattera (atomoxetine) (90 out of 120 days)
- Participant aged < 6 years:
    - Compliance authorization piece is removed (requires a yearly evaluation at minimum)
    - Confirmed diagnosis of ADHD with signs/symptoms in 2 or more settings using a standardized rating scale:
        - Conners' Rating Scale-Revised
        - Vanderbilt ADHD Diagnostic Teacher Rating Scale-Bright Futures
        - Vanderbilt ADHD Diagnostic Teacher Rating Scale-UOHSC
        - Vanderbilt ADHD Diagnostic Parent Rating Scale
        - ADHD-RS
        - Additional Resources

Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if all approval criteria are not met

Required Documentation

Laboratory Results:		Progress Notes:	X
MedWatch Form:		Other:	X

Disposition of Edit

Denial: Exception Code “0160” (Preferred Drug List)
Rule Type: PDL

Default Approval Period

3 months

References

- Evidence-Based Medicine Analysis: “Attention Deficit Hyperactivity Disorder (ADHD)”, UMKC-DIC; June 2023.
- Evidence-Based Medicine and Fiscal Analysis: “ADHD, Non-stimulants – Therapeutic Class Review” – Gainwell Technologies; last updated August 28, 2023.
- Psychology Prior Authorization Advisory Committee Meeting. "Evidence-Based Practice Discussion – ADHD and Stimulant Therapy". MO HealthNet Division. November 2007.
- Drug Prior Authorization Sub-Committee Meeting. “ADHD Adult Therapy.” Department of Mental Health/Division of Medical Services. March/April/June 2005.American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders (5th ed.), Washington, DC; 2013.Lippincott, Williams, Wilkins.
- Drug Effectiveness Review Project – Drug Class Review: Pharmacologic Treatments for Attention Deficit Hyperactivity Disorder. Center for Evidence-Based Policy, Oregon Health & Science University; September 2005/Updated July 2015; Preliminary Scan Report June 2016.
- USPDI, Micromedex; 2023.
- Facts and Comparisons eAnswers (online); 2023 Clinical Drug Information, LLC.