

Key

PA- Prior Authorization Required

QL- Quantity Limit

ST- Step Therapy Required

SEDATIVES & HYPNOTICS			
PREFERRED	Usual Daily Dosage		Comments/Suggestions
<i>estazolam tablet</i> (generic for ProSom)	1–2 mg		melatonin/diphenhydramine: OTC- Covered w/Rx
<i>temazepam capsule</i> (generic for Restoril)	7.5–30 mg		
<i>trazodone tablet</i> (generic for Desyrel)	50–100 mg		
<i>zolpidem tablet</i> (minimum age 18; QL 31/31 days) (generic for Ambien)	10 mg		
<i>melatonin 5mg tablets</i>	0.3-5mg		
<i>nighttime sleep aid*</i> (diphenhydramine)	50mg		
ANTIPSYCHOTICS			
PREFERRED	Initial Dose	Usual Daily Dosage	Comments/Suggestions
Second-Generation (Atypical)			clozapine/FazaClo: A baseline WBC count of 3500/mm ³ or greater and an absolute neutrophil count (ANC) of 2000/mm ³ or greater are required before initiating clozapine risperidone: Also available generically in liquid and orally disintegrating tablets (please reserve for members with swallowing difficulties) olanzapine: Also available generically in orally disintegrating tablets (please reserve for members with swallowing difficulties)
<i>clozapine tablet</i> (minimum age 18) (generic for Clozaril)	12.5mg Daily or BID titrated up to 300-450mg/day in 2-3 divided doses in first 2 weeks	Titration to max 900mg/day in 2-3 divided doses	
<i>clozapine dispersible tablet</i> (minimum age 18; QL 31/31 days) (generic for FazaClo)	12.5 mg Daily or BID titrated up to 300-450 mg/day in 2-3 divided doses in first 2 weeks	Titration to max 900 mg/day in 2-3 divided doses	
<i>risperidone tablet, dispersible tablet</i> (minimum age 5; QL 62/31 days) <i>risperidone oral solution</i> (minimum age 5; QL 496 mL/31 days) (generic for Risperdal)	0.25 mg–1 mg BID (depending on indication)	0.5 mg–6 mg daily or divided BID	
<i>quetiapine tablet</i> (minimum age 10) (generic for Seroquel)	25–50 mg BID (depending on indication)	200–400 mg BID	
<i>olanzapine tablet</i> minimum age 13; QL 31/31 days) (generic for Zyprexa)	5-10 mg Daily (depending on indication)	5–20 mg Daily	

Saphris sublingual tablet (minimum age 10)	5mg Twice Daily	5-10 mg BID	Saphris: Covered with ST (Trial and failure of olanzapine, quetiapine or risperidone)
aripiprazole oral tablet (step therapy)	2-15 mg Daily (Depending on indication)	5-15mg Daily	aripiprazole tablet: Covered with ST (Trial and failure of 2 preferred agents: risperidone, quetiapine, or olanzapine)
Abilify Maintena Intramuscular suspension (PA)	400 mg IM once monthly	400 mg IM once monthly	Abilify Maintena suspension*: Covered with PA for diagnosis and trial with oral aripiprazole, risperidone, quetiapine, or olanzapine. Consider use for non-compliant members or those with swallowing difficulties.
Invega Sustenna Intramuscular suspension (PA)	Initiation: 234 mg IM single dose on day 1 then 156 mg IM as a single dose 1-week later.	Maintenance: 117 mg IM once per month	Invega Sustenna*: Covered with PA for diagnosis and trial with oral ziprasidone, risperidone, quetiapine, or olanzapine. Consider use for non-compliant members or those with swallowing difficulties.
First-Generation (Typical)			
<i>chlorpromazine tablet</i> (minimum age 6 months) (generic for Thorazine)	10–50 mg BID	200 mg BID	
<i>fluphenazine tablet</i> (minimum age 18; QL on liquid) (generic for Prolixin)	2.5–5 mg DAILY	10–20 mg DAILY	
<i>haloperidol tablet</i> (minimum age 3) (generic for Haldol)	5 mg DAILY or divided BID or TID	10–15 mg (divided BID to TID)	*These products are also available through the medical benefit using J-codes
<i>loxapine capsule</i> (minimum age 18) (generic for Loxitane)	10 mg BID	60–100 mg (divided 2 to 4 times/day)	*Zyprexa Relprevv, Risperdal Consta, and Invega Trinza are available through the prior authorization process.
<i>perphenazine tablet</i> (minimum age 12) (generic for Trilafon)	4 mg TID	24 mg (divided BID to TID)	
<i>thioridazine tablet</i> (minimum age 2) (generic for Mellaril)	50–100 mg TID	100–150 mg BID	
<i>thiothixene capsule</i> (minimum age 12) (generic for Navane)	2 mg TID	30 mg DAILY or divided BID to TID	
<i>trifluoperazine tablet</i> (minimum age 6) (generic for Stelazine)	2–5 mg BID	20 mg DAILY or divided BID	
Orap tablet (minimum age 12)	1-2 mg/day in divided doses	10 mg/day or 0.2 mg/kg/day in divided doses	Orap: used in patients with Gilles de la Tourette's syndrome
First-Generation (Typical) – Long-acting Injections			
<i>fluphenazine decanoate</i> (minimum age 12) (generic for Prolixin Decanoate)	12.5–25 mg IM or SQ every 1–4 weeks	50 mg IM or SQ every 1–4 weeks	
<i>haloperidol decanoate</i> (minimum age 18) (generic for Haldol Decanoate)	10–20 times total stable oral dose IM every 4 weeks	10–15 times total stable oral dose IM every 4 weeks	

Other Bipolar Medications			
<i>lithium capsule, tablet, solution</i> (generic for Lithobid)	300 mg	300 mg – 600 mg (TID)	
<i>divalproex sprinkle capsule, divalproex ER 24 hr. tablet</i> (QL: 310/31) except 500mg ER tab (QL: 279/31) <i>divalproex DR tablet</i> (QL: 310/31) except 500mg DR tab (QL: 279/31) (generic for Depakote)	<u>ER</u> : 25 mg/kg/day <u>DR</u> : 750 mg	<u>ER</u> : 25 mg/kg/day - 60 mg/kg/day <u>DR</u> : 750 mg daily in divided doses with max of 60 mg/kg/day	
<i>lamotrigine oral tablet</i> (QL: 310/31 for 25mg) <i>lamotrigine chewable tablet</i> (QL: 310/31) (generic for Lamictal)	25 mg	25 mg – 200mg (Daily)	Lamotrigine daily dosing is variable based on whether treatment is monotherapy or adjunctive therapy.
<i>carbamazepine chewable tablet</i> 100mg (QL: 310/31) <i>carbamazepine oral tablet</i> 200mg (QL: 248/31) <i>carbamazepine suspension</i> 100mg/5mL (QL: 2480/31) (generic for Equetro, Tegretol)	200 mg	200 mg (BID) – 1600 mg (Daily)	
ANTIDEPRESSANTS			
PREFERRED	Initial Dose	Usual Daily Dosage	Comments/Suggestions
SSRIs (Selective Serotonin Reuptake Inhibitors)			
<i>citalopram tablet</i> (generic for Celexa)	20 mg	20–60 mg	Consider use of rating scales to assess severity of illness. Recommended scales include: <ul style="list-style-type: none"> • Patient Health Questionnaire (PHQ-9) • Beck Depression Inventory (BDI) • Yale-Brown Obsessive Compulsive Scale (Y-BOCS)
<i>fluoxetine capsule</i> (generic for Prozac)	10–40 mg	20–80 mg	
<i>paroxetine tablet</i> (generic for Paxil)	10 mg	20–60 mg	
<i>sertraline tablet</i> (generic for Zoloft)	25–50 mg	50–200 mg	
<i>escitalopram tablet</i> (generic for Lexapro)	10 mg	10-20 mg	
<i>fluvoxamine tablet</i> (generic for Luvox)	50 mg	50-300 mg	

SNRIs (Serotonin-Norepinephrine Reuptake Inhibitors)		
<i>venlafaxine tablet</i> (generic for Effexor)	25 mg BID	75–300 mg (divided BID)
<i>venlafaxine ER capsule</i> (QL 31/31 days) (generic for Effexor XR)	37.5–75 mg Daily	75–300 mg Daily
<i>duloxetine capsule (QL 62/31 except for 30 mg: QL 31/31)</i> (generic for Cymbalta)	40 mg Daily	60 mg Daily
Other Antidepressants		
<i>bupropion tablet / bupropion SR tablet</i> (generic for Wellbutrin/ Wellbutrin SR)	150 mg	150–400 mg
<i>bupropion XL tablet</i> (generic for Wellbutrin XL)	150 mg	150–450 mg
<i>mirtazapine tablet</i> (generic for Remeron)	15 mg	15–45 mg
mirtazapine is available generically in an orally disintegrating tablet (please reserve for members with swallowing difficulties)		
Tricyclic Agents		
<i>imipramine tablet</i> (generic for Tofranil)	75 mg	75-200 mg
<i>amitriptyline tablet</i> (generic for Elavil)	75 mg	75-150 mg (divided daily - TID)
<i>amoxapine tablet</i>	50 mg	50 – 100 mg (BID – TID)
<i>clomipramine capsule</i> (generic for Anafranil)	75 mg	75 – 250 mg (divided TID)
<i>desipramine tablet</i> (generic for Norpramin)	100 mg	100 – 300 mg (single or divided)
<i>nortriptyline capsule</i> <i>nortriptyline oral solution</i> (QL: 2325 mL/31 days) (generic for Pamelor)	25mg	25 mg – 150 mg (TID - QID or single dose)
<i>protriptyline tablet</i> (generic for Vivactil)	15 mg	15 mg – 60 mg (divided BID – TID)
<i>doxepin oral capsule, oral solution</i> (generic for Sinequan)	75 mg	75-150 mg

CNS-STIMULANTS			
Attention-Deficit/Hyperactivity Disorder (ADHD) Medications			
PREFERRED	Duration of Action (hrs.)	Usual Daily Dosage	Comments/Suggestions
Short-acting			Recommended Screening Tools <ul style="list-style-type: none"> ADHD Rating Scale-IV Conner's Rating Scales-Revised (CRS-R). Child Behavior Checklist (CBCL) <i>amphetamine-dextroamphetamine ER capsule</i> can be sprinkled for ease of administration in young members Vyvanse is available through the prior authorization process
<i>amphetamine mixed salt</i> (20mg tablet QL 93/31days; 30mg tablet QL 62/31days) (generic for Adderall)	4–6	2.5–40 mg/day	
<i>dextroamphetamine tablet</i> (generic for Dexedrine/Dextrostat)	4–6	2.5–40 mg/day	
<i>dexmethylphenidate tablet</i> (age minimum 6; QL 62/31days) (generic for Focalin)	3–5	2.5-40 mg/day	
<i>methylphenidate tablet</i> (minimum age 6; 20mg tabs QL 93/31days) (generic for Ritalin)	3–5	10–60 mg/day	
<i>methylphenidate chewable tablet</i> (minimum age 6) (generic for Methylin chewable tablet)	3-5	2.5-10 mg/day	
Intermediate-acting			
<i>dextroamphetamine ER capsule</i> (minimum age 6, max age 20; QL 31/31days) (generic for Dexedrine spansules)	6–8	5–40 mg/day	
<i>methylphenidate SR</i> (minimum age 6, max age 20; QL 93/31days) (generic for Ritalin SR)	3–8	10–60 mg/day	
Long-acting			
<i>amphetamine-dextroamphetamine ER capsule</i> (minimum age 6, max age 20; QL 62/31days) (generic for Adderall XR)	8–10	10–30 mg/day	
<i>dexmethylphenidate capsule ER</i> (minimum age 6, max age 20; QL 31/31days) (generic for Focalin XR)	10–12	10–40 mg/day	
<i>methylphenidate ER tablet</i> (minimum age 6,	10–12	10-60 mg/day	

max age 20; (generic for Metadate ER)			
<i>methylphenidate ER tablet</i> (minimum age 6, max age 20; 54 mg tabs QL 31/31days; 18mg, 27mg, 36mg tabs QL 62/31days) (generic for Concerta)	10–12	18–72 mg/day	
CNS- NON-STIMULANTS			
Attention-Deficit/Hyperactivity Disorder (ADHD) Medications			
PREFERRED	Duration of Action (hrs.)	Usual Daily Dosage	Comments/Suggestions
<i>guanfacine hcl tablet immediate-release</i> (generic for Tenex)	4-6	0.5-4 mg/day	Intuniv and Kapvay are both non-preferred and require prior authorization to address medical necessity for use over generic, immediate-release guanfacine and/or generic clonidine
<i>clonidine hcl tablet immediate-release</i> (generic for Catapres)	4-6	0.05-0.4 mg/day	
Medication Assistance Therapies for Substance Use Disorders			
PREFERRED	Initial Dose	Usual Daily Dosage	Comments/Suggestions
<i>acamprosate calcium tablet</i> (QL: 186/31) (generic for Campral)	666 mg	666 mg TID	Zubsolv sublingual tablet requires prior authorization
<i>disulfiram tablet</i> (generic for Antabuse)	125 mg	125–500mg/day	
<i>Zubsolv SL tablet</i> (PA required)	1.4 mg/0.36 mg	11.4 mg/ 2.9 mg	
<i>naltrexone hcl tablet</i> (generic for Revia)	25 mg	25 – 50 mg/day	
<i>buprenorphine SL tablet</i> (PA required) (generic for Subutex)	4 mg	16 mg/day	
<i>Vivitrol IM injection</i> (PA required)	380 mg IM every 4 weeks	380 mg IM every 4 weeks	Vivitrol intramuscular injection requires prior authorization
<i>naloxone solution for injection</i> 0.4 mg/mL vial: QL 5 mL/31 days 1mg/mL prefilled syringe: QL 4 mL/31 days)	0.4 mg	0.4 mg repeated as needed	