STEP THERAPY POLICY

POLICY: Attention Deficit Hyperactivity Disorder Stimulant Medications Step Therapy Policy

- Adderall XR® (mixed amphetamine salts [dextroamphetamine sulfate, dextroamphetamine saccharate, amphetamine sulfate, amphetamine aspartate] extended-release capsules – Shire, generic)
- Adhansia XR® (methylphenidate extended-release capsule – Purdue)
- Adzenys ER™ (amphetamine extended-release oral suspension – Neos Therapeutics)
- Adzenys XR-ODT™ (amphetamine extended-release orally disintegrating tablets – Neos Therapeutics)
- Aptensio XR® (methylphenidate extended-release capsules – Rhodes, generic)
- Azstarys™ (serdexmethylphenidate and dexmethylphenidate capsules – Corium)
- Concerta® (methylphenidate extended-release tablets – McNeil, generic)
- Cotempla XR-ODT™ (methylphenidate extended-release orally disintegrating tablets – Neos Therapeutics)
- Daytrana® (methylphenidate transdermal system – Noven, generic)
- Dexedrine® Spansules® (dextroamphetamine sustained-release capsules – Amedra, generic)
- Dyanavel® XR (amphetamine extended-release tablets and oral suspension – Tris)
- Focalin® XR (dexmethylphenidate extended-release capsules – Novartis, generic)
- Jornay PM® (methylphenidate hydrochloride extended-release capsules – Ironshore)
- Metadate® CD (methylphenidate extended-release capsules – UCB, generic)
- Metadate® ER (methylphenidate sustained-release tablets – UCB, generic only)
- methylphenidate extended-release capsules (generic to discontinued Methylin™ ER)
- methylphenidate 72 mg extended-release tablets (branded product – Trigen)
- Mydayis® (mixed salts of a single-entity amphetamine product extended-release capsules – Shire)
- QuilliChew ER® (methylphenidate extended-release chewable tablets – Pfizer)
- Quillivant® XR (methylphenidate extended-release oral suspension – NextWave)
- Relexxii® (methylphenidate extended-release tablets – Vertical [branded generic])
- Ritalin® LA (methylphenidate extended-release capsules – Novartis, generic)
- Ritalin-SR® (methylphenidate sustained-release tablets – Novartis, generic)
- Vyvanse® (lisdexamfetamine dimesylate capsules and chewable tablets – Shire)
- Xelstrym™ (dextroamphetamine transdermal system – Noven)

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OVERVIEW

All of the long-acting stimulants are indicated for the treatment of **attention-deficit hyperactivity disorder (ADHD)**.[1-24] Refer to Table 1 for a summary of indications.

- Some products are also indicated for the treatment of **narcolepsy**.
- Vyvanse is the only stimulant medication that is also indicated for the treatment of **binge eating disorder**.[11]

All of these products have abuse potential and are Schedule II controlled substances.[1-24]

Table 1. FDA-Approved Indications for Long-Acting Stimulants.[1-24]

Product	FDA-Approved Indication(s)

Adderall XR® (generic)	• ADHD in children 6 to 12 years of age, adolescents 13 to 17 years of age, and adults
Adhansia XR®	• ADHD in patients ≥ 6 years of age
Adzenys ER™	• ADHD in patients ≥ 6 years of age
Adzenys XR-ODT™	• ADHD in patients ≥ 6 years of age
Aptensio XR® (generic)	• ADHD in patients ≥ 6 years of age
Azstarys™	• ADHD in patients ≥ 6 years of age
Concerta® (generic)	• ADHD in children ≥ 6 years of age, adolescents 13 to 17 years of age, and adults ≤ 65 years of age
Cotempla XR-ODT™	• ADHD in patients 6 to 17 years of age
Daytrana®	• ADHD in children 6 to 12 years of age, and adolescents 13 to 17 years of age
Dexedrine® Spansule® (generic)	• ADHD in children ≥ 6 years of age & adolescents up to 16 years of age • Narcolepsy
Dyanavel® XR	• ADHD in children ≥ 6 years of age & adults
Focalin® XR (generic)	• ADHD in patients ≥ 6 years of age
Jornay PM®	• ADHD in patients ≥ 6 years of age
Metadate® CD (generic)	• ADHD in children 6 to 15 years of age
Metadate® ER (generic, brand product considered generic per FDB)	• ADHD in children ≥ 6 years of age & adults • Narcolepsy
Methylin™ ER (generic only, brand discontinued)	• ADHD in children ≥ 6 years of age & adults • Narcolepsy
Mydayis®	• ADHD in patients ≥ 13 years of age & adults
QuilliChew E®	• ADHD in children ≥ 6 years of age & adults
Quillivant® XR	• ADHD in patients ≥ 6 years of age
Relexxii® (branded generic)	• ADHD in children and adolescents ≥ 6 years of age & adults up to 65 years of age
Ritalin® LA (generic)	• ADHD in children 6 to 12 years of age
Ritalin-SR® (generic)	• ADHD in children ≥ 6 years of age & adults • Narcolepsy
Vyvanse®	• ADHD in children 6 to 12 years of age, adolescents 13 to 17 years of age, and adults • Binge eating disorder in adults
Xelstrym™	• ADHD in children ≥ 6 years of age & adults

ADHD – Attention-deficit hyperactivity disorder.

GUIDELINES

The American Academy of Pediatrics (AAP) clinical practice guideline for the diagnosis, evaluation, and treatment of ADHD in children and adolescents was updated in 2019, and incorporates many of the findings from the Multimodal Treatment Study of Children With ADHD (MTA).[25] The AAP recommendations for treatment of children and youth with ADHD vary depending on the patient's age. For preschool-aged children (4 to 5 years of age), parent- and/or teacher-administered behavior therapy should be prescribed as first-line treatment; methylphenidate may be prescribed if behavior interventions do not provide significant improvement and disturbance of function continues. For elementary school-aged children (6 to 11 years of age), an FDA-approved medication for ADHD (and/or behavior therapy, but preferably both) should be prescribed. Evidence is particularly strong for stimulant medications, and sufficient but less strong for atomoxetine, guanfacine extended-release (ER) tablets, and clonidine ER tablets (in that order). For adolescents (12 to 18 years of age), an FDA-approved medication for ADHD (and/or behavior therapy, but preferably both) should be prescribed with the assent of the adolescent. The dose of medication should be titrated to achieve maximum benefit with minimum adverse events (AEs). The findings from the MTA study suggested that more than 70% of children and youth with ADHD respond to one of the stimulant medications at an optimal dose when a systematic trial is used. Titration to maximum doses that control symptoms without AEs is recommended instead of titration strictly on a mg-per-kg basis.

Methylphenidate and amphetamine formulations have similar effects and AEs, and remain the first choice of medication treatment.[25] Some patients will respond better to or display more AEs with one compound vs. another; however, these effects cannot be predetermined. Therefore, if a trial with one group is unsuccessful (poor efficacy or AEs), a trial on a medication from the other group should be undertaken. At least half of the patients whose symptoms fail to respond to one stimulant medication may have a positive response to the alternative medication.

The AAP clinical practice guideline on the identification and management of eating disorders in children and adolescents (2021) notes that research on the treatment of binge eating disorder lags behind that for other eating disorders and has been focused primarily on adults.[26] Vyvanse was approved by the FDA in 2015 for the treatment of moderate to severe binge-eating disorder in adults. Vyvanse has demonstrated efficacy in reducing the frequency of binge-eating episodes. As with the use of other central nervous system stimulants, there is a potential for abuse and dependence as well as serious cardiovascular reactions. Topiramate has been shown to reduce binge eating and help with weight loss; however, the rates of adverse effects are relatively high. Selective serotonin reuptake inhibitors have rarely differed from placebo in their effect on binge-eating disorder and have not shown better outcome than behavioral therapy alone.

DOSING AND DOSAGE FORMS

The choice of formulation depends on factors such as the efficacy of each agent for a given child/adolescent, the preferred length of coverage time, whether a child can swallow tablets or capsules, and expense.[25] The extended-release (ER) formulations may be preferred over immediate-release (IR) formulations because they provide benefits of consistent and sustained coverage with fewer administrations per day. Long-acting formulations usually preclude the need for school-based administration of ADHD medications. Better coverage with fewer administrations leads to greater convenience for the family and, therefore, might also lead to better adherence to the medication management plan. Some patients, particularly adolescents, might require more than 12 hours of coverage to ensure adequate focus and concentration during evening study time and driving; in these cases, a short-acting (IR) preparation might be used in addition to a long-acting (ER) preparation.

Many of the generic ER stimulant medications for the treatment of ADHD are available as capsules: generic amphetamine/dextroamphetamine ER capsules (generics to Adderall XR), generic dexmethylphenidate ER capsules (generics to Focalin XR), and generic methylphenidate ER capsules (generics to Metadate CD, Ritalin LA, Adhansia XR, Aptensio XR). According to the prescribing information, the capsules may be taken whole, or opened and the entire contents sprinkled on applesauce.[1,5,6,9,13,21] Patients should take the applesauce with sprinkled beads in its entirety without chewing.

POLICY STATEMENT

This program has been developed to encourage the use of a Step 1 Product prior to the use of a Step 2 Product. If the Step Therapy rule is not met for a Step 2 Product at the point of service, coverage will be determined by the Step Therapy criteria below. All approvals are provided for 1 year in duration.

Automation: A patient with a of one Step 1 Product within the 130-day look-back period is excluded from Step Therapy.

Step 1: Generic amphetamine/dextroamphetamine extended-release capsules (generics to Adderall XR), generic dexmethylphenidate extended-release capsules (generics to Focalin XR), generic dextroamphetamine extended-release capsules (generics to Dexedrine Spansules), generic methylphenidate extended-release capsules (generics to Metadate CD and Ritalin LA), Metadate ER (generic according to First Data Bank [FDB]), generic methylphenidate sustained-release tablets (generics to Ritalin SR), generic methylphenidate extended-release tablets (generics to Concerta)

Step 2: Adderall XR, Adhansia XR, Adzenys ER, Adzenys XR-ODT, Aptensio XR (brand and generic), Azstarys, Concerta, Cotempla XR-ODT, Daytrana (brand and generic methylphenidate transdermal system), Dexedrine Spansules, Dyanavel XR (tablets and oral solution), Focalin XR, Jornay PM, Metadate CD, Methylphenidate 72 mg extended-release tablets (branded product), Mydayis, QuilliChew ER, Quillivant XR, Relexxii, Ritalin LA, Ritalin SR, Vyvanse capsules and chewable tablets, Xelstrym

CRITERIA

1. If the patient has tried one Step 1 Product, approve a Step 2 Product.

2. If the patient is being treated for binge eating disorder, approve Vyvanse.

3. No other exceptions are recommended.

REFERENCES

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2. Concerta® extended-release tablets [prescribing information]. Titusville, NJ: Janssen; June 2021.
3. Daytrana® transdermal system [prescribing information]. Miami, FL: Noven; June 2021.
4. Dexedrine® Spansule® sustained-release capsule [prescribing information]. Bridgewater, NJ: Amneal; January 2022.
5. Focalin XR® extended-release capsules [prescribing information]. East Hanover, NJ: Novartis; June 2021.
6. Metadate CD® extended-release capsules [prescribing information]. Philadelphia, PA: Lannett; April 2022.
7. Metadate® ER extended-release tablet [prescribing information]. Philadelphia, PA: Lannett; June 2021.
8. Methylin™ tablets and Methylin™ ER extended-release tablets [prescribing information]. Hazelwood, MO: Mallinckrodt; June 2021.
9. Ritalin LA® extended-release capsules [prescribing information]. East Hanover, NJ: Novartis; June 2021.
10. Ritalin® tablets and Ritalin SR® sustained-release tablets [prescribing information]. East Hanover, NJ: Novartis; November 2019.
11. Vyvanse® capsules [prescribing information]. Lexington, MA: Takeda; January 2022.
12. Quillivant® XR extended-release oral suspension [prescribing information]. Monmouth Junction, NJ: NextWave; June 2021.
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20. Jornay PM® extended-release capsules [prescribing information]. Cherry Hill, NJ: Ironshore; June 2021.
21. Adhansia XR® extended-release capsules [prescribing information]. Stamford, CT: Adlon; June 2021.
22. Relexxii® extended-release tablets [prescribing information]. Bridgewater, NJ: Vertical; November 2021.
23. Azstarys™ capsules [prescribing information]. Grand Rapids, MI: Corium; March 2021.
24. Xelstrym™ transdermal system [prescribing information. Miami, FL: Noven; March 2022.

25. Wolraich ML, Hagan JF Jr, Allan C, et al. Clinical practice guideline for the diagnosis, evaluation, and treatment of attention-deficit/hyperactivity disorder in children and adolescents. *Pediatrics*. 2019;144(4):e20192528.
26. Hornberger LL, Lane MA; AAP the Committee on Adolescence. Identification and management of eating disorders in children and adolescents. *Pediatrics.* 2021;147(1):e2020040279.