Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE Lisdexamfetamine (Vyvanse)

Notes:

- 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.
- **Adequate trial of a short acting agent is further defined as wearing off that is not resolved by
 increasing the dose and the frequency to a minimum of twice daily OR clinically significant side
 effects related to the short-acting dosage form that cannot be resolved by adjusting the dose or
 timing.
- * Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

<u>Initiation (new start) criteria</u>: Non-formulary **lisdexamfetamine (Vyvanse)** will be covered on the prescription drug benefit when the following criteria are met:

- Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD)
- Patient has failed an adequate trial ^ of a long-acting amphetamine product (Adderall XR, etc), unless allergy to an inactive ingredient
- Patient has failed an adequate trial ^ of a long-acting dextroamphetamine ER (Dexedrine Spansule), unless allergy to an inactive ingredient
- Patient has failed an adequate trial[^] of a methylphenidate ER (Concerta, Metadate CD, Ritalin LA) or dexmethylphenidate ER (Focalin XR), unless allergy to an inactive ingredient

- OR -

 Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD) and past diagnosis or treatment for substance use disorder

<u>Criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously</u>: Non-formulary **lisdexamfetamine (Vyvanse)** will be covered on the prescription drug benefit when the following criteria are met:

- Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD)
- Patient has failed an adequate trial ^ of a long-acting amphetamine product (Adderall XR, etc), unless allergy to an inactive ingredient
- Patient has failed an adequate trial ^ of a long-acting dextroamphetamine ER (Dexedrine Spansule), unless allergy to an inactive ingredient
- Patient has failed an adequate trial[^] of a methylphenidate ER (Concerta, Metadate CD, Ritalin LA) or dexmethylphenidate ER (Focalin XR), unless allergy to an inactive ingredient

kp.org

Revised: 06/12/2025 Effective: 08/07/2025 All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest



Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE Lisdexamfetamine (Vyvanse)

- OR -

 Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD) and past diagnosis or treatment for substance use disorder

<u>Criteria for new members entering Kaiser Permanente already taking the</u>
<u>medication who have not been reviewed previously</u>: Non-formulary **lisdexamfetamine (Vyvanse)** will be covered on the prescription drug benefit when the following criteria are met:

- Patient is over 21 year of age
- Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD)
- Patient has failed an adequate trial ^ of a long-acting amphetamine product (Adderall XR, etc), unless allergy to an inactive ingredient
- Patient has failed an adequate trial ^ of a long-acting dextroamphetamine ER (Dexedrine Spansule), unless allergy to an inactive ingredient
- OR -
- Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD) and past diagnosis or treatment for substance use disorder
- OR -
- Diagnosis of Attention Deficit and Hyperactivity Disorder (ADHD) and patient is age
 6 to 20 years old and stable on medication

Non-formulary **lisdexamfetamine (Vyvanse)** will be covered on the prescription drug benefit when the following criteria are met:

- Diagnosis of Binge Eating Disorder
- Prior adequate trial (6 weeks) and failure of 2 formulary Selective Serotonin Reuptake Inhibitors (SSRIs) unless contraindication, intolerance, or allergy
- Adequate trial** (7 days) of dextroamphetamine ER (Dexedrine Spansules), unless allergy to an inactive ingredient or history of substance use disorder
- OR -
- Patient is already stable on drug

kp.org

Revised: 06/12/2025 Effective: 08/07/2025



