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

**For Binge Eating Disorder:**
- Diagnosis of Binge Eating Disorder -AND-
- Prior adequate trial (6 weeks) and failure of 2 formulary Selective Serotonin Reuptake Inhibitors (SSRIs) unless contraindication, intolerance, or allergy -AND-
- Prior adequate trial (7 days) and therapeutic failure or adverse events with dextroamphetamine SR that is not resolved by adjusting the dose or frequency.
-OR-
- Patient is already stable on drug

**For attention-deficit/hyperactivity disorder (ADHD) or attention deficit disorder (ADD) in patients under 21 years of age:**
- Diagnosis of ADHD or ADD -AND-
- Adequate trial (7 days) and therapeutic failure or adverse events with dextroamphetamine ER that is not resolved by adjusting the dose or frequency.
-OR-
- Patient is already stable on drug

**For patients 21 years of age or older not currently taking Vyvanse:**
- Diagnosis of ADHD or ADD -AND-
- Adequate trial** (7 days) of long-acting methylphenidate, unless or allergy to an inactive ingredient, OR past trial and failure of a methylphenidate product (methylphenidate or dexmethylphenidate) regardless of dosage form -AND-
- Adequate trial** (7 days) of long-acting amphetamine salt combo, unless allergy to an inactive ingredient or past trial and failure of short-acting dextroamphetamine -AND-
- Adequate trial** (7 days) of dextroamphetamine ER (Dexedrine Spansules), unless allergy to an inactive ingredient

**For patients 21 years of age or older currently taking Vyvanse:**
- Diagnosis of ADHD or ADD -AND-
- Adequate trial** (7 days) of dextroamphetamine ER (Dexedrine Spansules), unless allergy to an inactive ingredient.
-OR-
- Dose change only: patient meets current criteria and is already taking the drug

** Adequate trial of a short 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
Criteria Based Consultation Prescribing Program
CRITERIA FOR DRUG COVERAGE
lisdexamfetamine (Vyvanse®)

significant side effects related to the dosage form that cannot be resolved by adjusting the dose or timing.