



## PROCEDURE

### Initial Authorization Criteria:

*Must meet all of the criteria listed under the respective age header:*

#### **1. For members under 4 years of age:**

- Must have one of the following diagnoses:
  - Attention deficit hyperactivity disorder (ADHD)
  - Brain injury
  - Autism
- Must be prescribed by a pediatric neurologist, child and adolescent psychiatrist, or a child development pediatrician
- Must have chart documented evidence of a comprehensive evaluation by the prescriber or in consultation with the prescriber
- Must have previously tried and failed two generic formulary stimulants for diagnosis

#### **2. For members age 4 and older with a diagnosis other than Binge Eating Disorder:**

- Must have previously tried and failed two generic formulary stimulants for diagnosis

#### **3. For a diagnosis of Moderate to severe binge eating disorder (BED)**

- Must have chart documentation of a diagnosis of moderate to severe BED with all of the following:
  - 4 or more binge eating episodes per week for the past 3 months
  - Comprehensive behavioral assessment to support a diagnosis of moderate to severe BED, indicating binge eating episodes are associated with a sense of lack of control over eating during episodes OR presence of marked distress regarding binge eating (e.g., feeling disgusted with oneself, depressed, or very guilty afterward)
  - Additional features may include: eating much more rapidly than normal, eating until feeling uncomfortably full, eating large amounts of food when not feeling physically hungry, eating alone because of feeling embarrassed by how much one is eating



- The member must not have a diagnosis of bulimia nervosa or anorexia nervosa
- Must have chart documentation showing enrollment in formal behavioral or mental health counseling
- Must meet one of the following requirements:
  - Must previously have had an inadequate response or intolerance to at least 2 different selective serotonin reuptake inhibitors (i.e., sertraline, citalopram, escitalopram) for the treatment of BED
  - Must previously have had an inadequate response or intolerance to at least 1 selective serotonin reuptake inhibitor (i.e., sertraline, citalopram, escitalopram) AND either a tricyclic antidepressant (i.e., imipramine) or topiramate for the treatment of BED

**Reauthorization Criteria:**

All prior authorization renewals for BED are reviewed on a 3 month basis to determine the Medical Necessity for continuation of therapy. Authorization may be extended at 3-month intervals based upon chart documentation of the following from the provider:

- Decrease in the number of binge eating episode
- Member’s condition has improved based upon the prescriber’s assessment while on therapy.

**Limitations:**

Length of Authorization (if above criteria met)	
Initial Authorization	<ul style="list-style-type: none"><li>• BED: up to 3 months</li><li>• All other diagnoses: duration of member’s membership with plan</li></ul>
Reauthorization	Same as initial
Quantity Level Limit	
Vyvanse	30 capsules per 30 days

If the established criteria are not met, the request is referred to a Medical Director for review.

**REFERENCES**

1. Vyvanse [prescribing information]. Wayne, PA: Shire US Inc.; January 2015.



2. American Psychiatric Association: *Diagnostic and statistical manual of mental disorders, Fourth Edition, Text Revision*. Washington, DC, American Psychiatric Association, 2000.
3. American Psychiatric Association: *Diagnostic and statistical manual of mental disorders, Fifth Edition*. Washington, DC, American Psychiatric Association, 2014.
4. Yager J, Devlin MJ, Halmi KA, et. al. Guideline watch (2012): practice guideline for the treatment of patients with eating disorders, 3rd ed. American Psychiatric Association. [http://www.psychiatry.org/File%20Library/Practice/ED\\_PG\\_Watch\\_August\\_2012.pdf](http://www.psychiatry.org/File%20Library/Practice/ED_PG_Watch_August_2012.pdf). Accessed 3 March 2015.
5. Yager J, Devlin MJ, Halmi KA, et. al. Practice guideline for the treatment of patients with eating disorders, 3rd ed. 2006. American Psychiatric Association. [http://psychiatryonline.org/pb/assets/raw/sitewide/practice\\_guidelines/guidelines/eatingdisorders.pdf](http://psychiatryonline.org/pb/assets/raw/sitewide/practice_guidelines/guidelines/eatingdisorders.pdf). Accessed 3 March 2015.
6. Aigner M, Treasure J, Kaye W, & Kasper S. WFSBP Task Force on Eating Disorders: World Federation of Societies of Biological Psychiatry (WFSBP) guidelines for the pharmacological treatment of eating disorders. *World Journal of Biological Psychiatry* 2011; 12:400–443.
7. McElroy SL, Hudson JI, Malhotra S, et al. Citalopram in the treatment of binge-eating disorder: a placebo-controlled trial. *J Clin Psychiatry*. 2003;64(7):807–13.
8. Guerdjikova AI, McElroy SL, Kotwal R, et al. High-dose escitalopram in the treatment of binge eating disorder with obesity: a placebo-controlled monotherapy trial. *Hum Psychopharmacol*. 2008;23(1):1–11.
9. McElroy SL, Casuto LS, Nelson EB, et al. Placebo-controlled trial of sertraline in the treatment of binge eating disorder. *Am J Psychiatry*. 2000;157(6):1004–6.
10. Leombruni P, Piero A, Lavagnino L, et al. A randomized, double-blind trial comparing sertraline and fluoxetine 6-month treatment in obese patients with binge eating disorder. *Prog Neuropsychopharmacol Biol Psychiatry*. 2008;32(6):1599–605.
11. Laederach-Hofmann K, Graf C, Horber F, et al. Imipramine and diet counseling with psychological support in the treatment of obese binge eaters: a randomized, placebo-controlled doubleblind study. *Int J Eat Disord*. 1999;26(3):231–44.
12. McElroy SL, Arnold LM, Shapira NA, et al. Topiramate in the treatment of binge eating disorder associated with obesity: a randomized, placebo-controlled trial. *Am J Psychiatry*. 2003;160(2):255–61.
13. McElroy SL, Hudson JI, Capece JA, et al. Topiramate for the treatment of binge eating disorder associated with obesity: a placebo-controlled study. *Biol Psychiatry*. 2007;61(9):1039–48.
14. Brambilla F, Samek L, Company M, et al. Multivariate therapeutic approach to binge-eating disorder: combined nutritional, psychological and pharmacological treatment. *Int Clin Psychopharmacol*. 2009;24(6):312–7.
15. Claudino AM, de Oliveira IR, Appolinario JC, et al. Doubleblind, randomized, placebo-controlled trial of topiramate plus cognitive-behavior therapy in binge-eating disorder. *J Clin Psychiatry*. 2007;68(9):1324–32.
16. Brownley KA, Peat CM, La Via M, et al. Pharmacological Approaches to the management of binge eating disorder. *Drugs*. 2015;75:9-32.
17. Vocks S, Tuschen-Caffier B, Pietrowsky R, et al. Meta-Analysis of the Effectiveness of Psychological and Pharmacological Treatments for Binge Eating Disorder. *Int J Eat Disord* 2010;43:205–217.

## **RECORD RETENTION**

Records Retention for Evolent Health documents, regardless of medium, are provided within the Evolent Health records retention policy and as indicated in CORP.028.E Records Retention Policy and Procedure.



Vyvanse (*lisdexamfetamine*)  
POLICY NUMBER: RX.PA.403.E  
REVISION DATE: 1/18  
PAGE NUMBER: 5 of 5

## REVIEW HISTORY

DESCRIPTION OF REVIEW / REVISION	DATE APPROVED
<i>Annual review</i>	<i>02/16, 02/17</i>
<i>Criteria Update</i>	<i>01/18</i>

