

**Texas Prior Authorization Program  
Clinical Criteria**

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**Drug/Drug Class**

## **Binge Eating Disorder (BED) Agents**

**Clinical Criteria Information Included in this Document**

**Vyvanse (lisdexamfetamine)**

- **Drugs requiring prior authorization:** the list of drugs requiring prior authorization for this clinical criteria
- **Prior authorization criteria logic:** a description of how the prior authorization request will be evaluated against the clinical criteria rules
- **Logic diagram:** a visual depiction of the clinical criteria logic
- **Supporting tables:** a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes)
- **References:** clinical publications and sources relevant to this clinical criteria

**Revision Notes**

Initial publication and presentation to DUR Board



## Vyvanse (Lisdexamfetamine)

### Drugs Requiring Prior Authorization

The listed GCNS may not be an indication of TX Medicaid Formulary coverage. To learn the current formulary coverage, visit [TxVendorDrug.com/formulary/formulary-search](http://TxVendorDrug.com/formulary/formulary-search).

Drugs Requiring Prior Authorization	
Label Name	GCN
VYVANSE 10MG CAPSULE	37674
VYVANSE 10MG CHEWABLE TABLET	42969
VYVANSE 20MG CAPSULE	99366
VYVANSE 20MG CHEWABLE TABLET	43058
VYVANSE 30MG CAPSULE	98071
VYVANSE 30MG CHEWABLE TABLET	43059
VYVANSE 40MG CAPSULE	99367
VYVANSE 40MG CHEWABLE TABLET	43063
VYVANSE 50MG CAPSULE	98072
VYVANSE 50MG CHEWABLE TABLET	43064
VYVANSE 60MG CAPSULE	99368
VYVANSE 60MG CHEWABLE TABLET	43065
VYVANSE 70MG CAPSULE	98073



## Vyvanse (Lisdexamfetamine)

### Clinical Criteria Logic

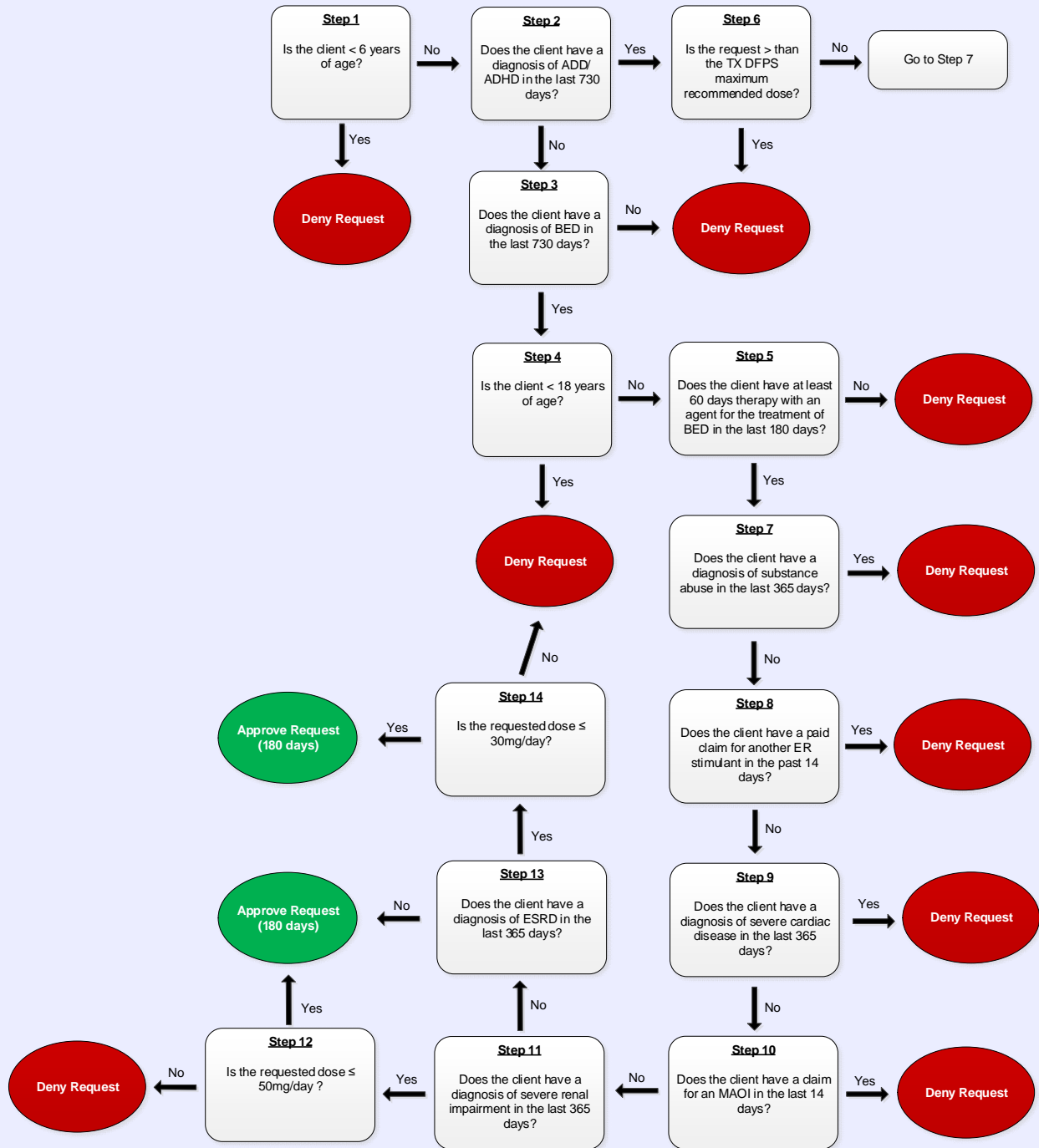
1. Is the client less than (<) 6 years of age?  
 Yes – Deny  
 No – Go to #2
2. Does the client have a **diagnosis of ADD/ADHD** in the last 730 days?  
 Yes – Go to #6  
 No – Go to #3
3. Does the client have a **diagnosis of binge eating disorder (BED)** in the last 730 days?  
 Yes – Go to #4  
 No – Deny
4. Is the client less than (<) 18 years of age?  
 Yes – Deny  
 No – Go to #5
5. Does the client have at least 60 days therapy with an **agent for the treatment of BED** in the last 180 days?  
 Yes – Go to #7  
 No - Deny
6. Is the request for greater than (>) the **Texas Department of Family and Protective Services (DFPS)** maximum recommended dose?  
 Yes – Deny  
 No – Go to #7
7. Does the client have a **history of substance abuse** in the last 365 days?  
 Yes – Deny  
 No – Go to #8
8. Does the client have a paid claim for another **ER stimulant** in the past 14 days?  
 Yes – Deny  
 No – Go to #9
9. Does the client have a diagnosis of **severe cardiac disease** in the last 365 days?  
 Yes – Deny  
 No – Go to #10
10. Does the client have a claim for a **monoamine oxidase (MAO) inhibitor** in the last 14 days?  
 Yes – Deny  
 No – Go to #11

11. Does the client have a diagnosis of **severe renal impairment** in the last 365 days?  
 Yes - Go to #12  
 No - Go to #13
12. Is the requested dose less than or equal to ( $\leq$ ) 50 mg per day?  
 Yes - Approve (180 days)  
 No - Deny
13. Does the client have a diagnosis of **end stage renal disease (ESRD)** in the last 365 days?  
 Yes - Go to #14  
 No - Approve (180 days)
14. Is the requested dose less than or equal to ( $\leq$ ) 30 mg per day?  
 Yes - Approve (180 days)  
 No - Deny



# Vyvanse (Lisdexamfetamine)

## Clinical Criteria Logic Diagram





## Vyvanse (Lisdexamfetamine)

### Clinical Criteria Supporting Tables

<b>Step 2 (diagnosis of ADD or ADHD)</b> <b>Required quantity: 1</b> <b>Look back timeframe: 730 days</b>	
<b>ADD/ADHD Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F900	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, PREDOMINANTLY INATTENTIVE TYPE
F901	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, PREDOMINANTLY HYPERACTIVE TYPE
F902	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, COMBINED TYPE
F908	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, OTHER TYPE
F909	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, UNSPECIFIED TYPE

<b>Step 3 (diagnosis of BED)</b> <b>Required quantity: 1</b> <b>Look back timeframe: 730 days</b>	
<b>ADD/ADHD Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F5081	BINGE EATING DISORDER

<b>Step 5 (alternate therapy for BED)</b> <b>Required days supply: 60</b> <b>Look back timeframe: 180 days</b>	
<b>GCN</b>	<b>Label Name</b>
16345	CELEXA 10MG TABLET
16342	CELEXA 20MG TABLET
16343	CELEXA 40MG TABLET
16345	CITALOPRAM 10MG TABLET
16344	CITALOPRAM 10MG/5ML SOLUTION
16342	CITALOPRAM 20MG TABLET
16343	CITALOPRAM 40MG TABLET
17851	ESCITALOPRAM 10MG TABLET
17987	ESCITALOPRAM 20MG TABLET
18975	ESCITALOPRAM 5MG TABLET

<b>Step 5 (alternate therapy for BED)</b>	
<b>Required days supply: 60</b>	
<b>Look back timeframe: 180 days</b>	
19035	ESCITALOPRAM 5MG/5ML SOLUTION
16353	FLUOXETINE 10MG CAPSULE
16356	FLUOXETINE 10MG TABLET
16354	FLUOXETINE 20MG CAPSULE
16359	FLUOXETINE 20MG TABLET
16357	FLUOXETINE 20MG/5ML SOLUTION
16355	FLUOXETINE 40MG CAPSULE
30817	FLUOXETINE 60MG TABLET
12929	FLUOXETINE DR 90MG CAPSULE
16349	FLUVOXAMINE 100MG TABLET
16347	FLUVOXAMINE 25MG TABLET
16348	FLUVOXAMINE 50MG TABLET
99481	FLUVOXAMINE ER 100MG CAPSULE
99482	FLUVOXAMINE ER 150MG CAPSULE
17851	LEXAPRO 10MG TABLET
17987	LEXAPRO 20MG TABLET
18975	LEXAPRO 5 MG TABLET
20870	OLANZAPINE-FLUOXETINE 12-25MG
20872	OLANZAPINE-FLUOXETINE 12-50MG
98648	OLANZAPINE-FLUOXETINE 3-25MG
20868	OLANZAPINE-FLUOXETINE 6-25MG
20869	OLANZAPINE-FLUOXETINE 6-50MG
16364	PAROXETINE 10MG TABLET
16366	PAROXETINE 20MG TABLET
16367	PAROXETINE 30MG TABLET
16368	PAROXETINE 40MG TABLET
17078	PAROXETINE CR 12.5MG TABLET
17077	PAROXETINE CR 25MG TABLET
17079	PAROXETINE CR 37.5MG TABLET
34876	PAROXETINE MESYLATE 7.5MG CAP
16364	PAXIL 10MG TABLET
16369	PAXIL 10MG/5ML SUSPENSION
16366	PAXIL 20MG TABLET
16367	PAXIL 30MG TABLET
16368	PAXIL 40MG TABLET
17078	PAXIL CR 12.5MG TABLET
17077	PAXIL CR 25MG TABLET
17079	PAXIL CR 37.5MG TABLET

<b>Step 5 (alternate therapy for BED)</b>	
<b>Required days supply: 60</b>	
<b>Look back timeframe: 180 days</b>	
16353	PROZAC 10MG PULVULE
16354	PROZAC 20MG PULVULE
16355	PROZAC 40MG PULVULE
36233	QUDEXY XR 100 MG CAPSULE
36234	QUDEXY XR 150 MG CAPSULE
36235	QUDEXY XR 200 MG CAPSULE
36229	QUDEXY XR 25 MG CAPSULE
36232	QUDEXY XR 50 MG CAPSULE
16375	SERTRALINE 100MG TABLET
16376	SERTRALINE 20MG/ML ORAL CONCENTRATE
16373	SERTRALINE 25MG TABLET
16374	SERTRALINE 50MG TABLET
36551	TOPAMAX 100 MG TABLET
36556	TOPAMAX 15 MG SPRINKLE CAP
36552	TOPAMAX 200 MG TABLET
36557	TOPAMAX 25 MG SPRINKLE CAP
36553	TOPAMAX 25 MG TABLET
36550	TOPAMAX 50 MG TABLET
36551	TOPIRAMATE 100 MG TABLET
36556	TOPIRAMATE 15 MG SPRINKLE CAP
36552	TOPIRAMATE 200 MG TABLET
36557	TOPIRAMATE 25 MG SPRINKLE CAP
36553	TOPIRAMATE 25 MG TABLET
36550	TOPIRAMATE 50 MG TABLET
36233	TOPIRAMATE ER 100 MG CAPSULE
36234	TOPIRAMATE ER 150 MG CAPSULE
36235	TOPIRAMATE ER 200 MG CAPSULE
36229	TOPIRAMATE ER 25 MG CAPSULE
36232	TOPIRAMATE ER 50 MG CAPSULE
35106	TROKENDI XR 100 MG CAPSULE
35107	TROKENDI XR 200 MG CAPSULE
35103	TROKENDI XR 25 MG CAPSULE
35104	TROKENDI XR 50 MG CAPSULE
16375	ZOLOFT 100MG TABLET
16373	ZOLOFT 25MG TABLET
16374	ZOLOFT 50MG TABLET



<b>Step 6 (Texas DFPS maximum recommended dose)</b>				
<b>Required quantity: 1</b>				
<b>TX DFPS Recommended Dosage</b>				
<b>Active Ingredient</b>	<b>Drug (brand)</b>	<b>Initial Dosage</b>	<b>Literature Based Maximum Dosage</b>	<b>FDA Approved Maximum Dosage for Children and Adolescents</b>
LISDEXAMFETAMINE	VYVANSE® capsule VYVANSE® chewable tablet	Age ≥ 6 years: 30mg/day	Age ≥ 6 years: 70mg/day	Approved for children 6 years and older: 70mg/day

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F1010	ALCOHOL ABUSE UNCOMPLICATED
F10120	ALCOHOL ABUSE WITH INTOXICATION UNCOMPLICATED
F10121	ALCOHOL ABUSE WITH INTOXICATION DELIRIUM
F10129	ALCOHOL ABUSE WITH INTOXICATION UNSPECIFIED
F1014	ALCOHOL ABUSE WITH ALCOHOL-INDUCED MOOD DISORDER
F10150	ALCOHOL ABUSE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F10151	ALCOHOL ABUSE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F10159	ALCOHOL ABUSE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F10180	ALCOHOL ABUSE WITH ALCOHOL-INDUCED ANXIETY DISORDER
F10181	ALCOHOL ABUSE WITH ALCOHOL-INDUCED SEXUAL DYSFUNCTION
F10182	ALCOHOL ABUSE WITH ALCOHOL-INDUCED SLEEP DISORDER
F10188	ALCOHOL ABUSE WITH OTHER ALCOHOL-INDUCED DISORDER
F1019	ALCOHOL ABUSE WITH UNSPECIFIED ALCOHOL-INDUCED DISORDER
F1020	ALCOHOL DEPENDENCE UNCOMPLICATED
F10220	ALCOHOL DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F10221	ALCOHOL DEPENDENCE WITH INTOXICATION DELIRIUM
F10229	ALCOHOL DEPENDENCE WITH INTOXICATION UNSPECIFIED
F10230	ALCOHOL DEPENDENCE WITH WITHDRAWAL UNCOMPLICATED
F10231	ALCOHOL DEPENDENCE WITH WITHDRAWAL DELIRIUM
F10232	ALCOHOL DEPENDENCE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F10239	ALCOHOL DEPENDENCE WITH WITHDRAWAL UNSPECIFIED
F1024	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED MOOD DISORDER
F10250	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F10251	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F10259	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1026	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PERSISTING AMNESTIC DISORDER
F1027	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PERSISTING DEMENTIA
F10280	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED ANXIETY DISORDER

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F10281	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED SEXUAL DYSFUNCTION
F10282	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED SLEEP DISORDER
F10288	ALCOHOL DEPENDENCE WITH OTHER ALCOHOL-INDUCED DISORDER
F1029	ALCOHOL DEPENDENCE WITH UNSPECIFIED ALCOHOL-INDUCED DISORDER
F1110	OPIOID ABUSE UNCOMPLICATED
F11120	OPIOID ABUSE WITH INTOXICATION UNCOMPLICATED
F11121	OPIOID ABUSE WITH INTOXICATION DELIRIUM
F11122	OPIOID ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F11129	OPIOID ABUSE WITH INTOXICATION UNSPECIFIED
F1114	OPIOID ABUSE WITH OPIOID-INDUCED MOOD DISORDER
F11150	OPIOID ABUSE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F11151	OPIOID ABUSE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F11159	OPIOID ABUSE WITH OPIOID-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F11181	OPIOID ABUSE WITH OPIOID-INDUCED SEXUAL DYSFUNCTION
F11182	OPIOID ABUSE WITH OPIOID-INDUCED SLEEP DISORDER
F11188	OPIOID ABUSE WITH OTHER OPIOID-INDUCED DISORDER
F1119	OPIOID ABUSE WITH UNSPECIFIED OPIOID-INDUCED DISORDER
F1120	OPIOID DEPENDENCE, UNCOMPLICATED
F1121	OPIOID DEPENDENCE, IN REMISSION
F11220	OPIOID DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F11221	OPIOID DEPENDENCE WITH INTOXICATION DELIRIUM
F11222	OPIOID DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F11229	OPIOID DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1123	OPIOID DEPENDENCE WITH WITHDRAWAL
F1124	OPIOID DEPENDENCE WITH OPIOID-INDUCED MOOD DISORDER
F11250	OPIOID DEPENDENCE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F11251	OPIOID DEPENDENCE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F11259	OPIOID DEPENDENCE WITH OPIOID-INDUCED PSYCHOTIC DISORDER UNSPECIFIED

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F11281	OPIOID DEPENDENCE WITH OPIOID-INDUCED SEXUAL DYSFUNCTION
F11282	OPIOID DEPENDENCE WITH OPIOID-INDUCED SLEEP DISORDER
F11288	OPIOID DEPENDENCE WITH OTHER OPIOID-INDUCED DISORDER
F1129	OPIOID DEPENDENCE WITH UNSPECIFIED OPIOID-INDUCED DISORDER
F1210	CANNABIS ABUSE UNCOMPLICATED
F12120	CANNABIS ABUSE WITH INTOXICATION UNCOMPLICATED
F12121	CANNABIS ABUSE WITH INTOXICATION DELIRIUM
F12122	CANNABIS ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F12129	CANNABIS ABUSE WITH INTOXICATION UNSPECIFIED
F12150	CANNABIS ABUSE WITH PSYCHOTIC DISORDER WITH DELUSIONS
F12151	CANNABIS ABUSE WITH PSYCHOTIC DISORDER WITH HALLUCINATIONS
F12159	CANNABIS ABUSE WITH PSYCHOTIC DISORDER UNSPECIFIED
F12180	CANNABIS ABUSE WITH CANNABIS-INDUCED ANXIETY DISORDER
F12188	CANNABIS ABUSE WITH OTHER CANNABIS-INDUCED DISORDER
F1219	CANNABIS ABUSE WITH UNSPECIFIED CANNABIS-INDUCED DISORDER
F1220	CANNABIS DEPENDENCE, UNCOMPLICATED
F1221	CANNABIS DEPENDENCE, IN REMISSION
F12220	CANNABIS DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F12221	CANNABIS DEPENDENCE WITH INTOXICATION DELIRIUM
F12222	CANNABIS DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F12229	CANNABIS DEPENDENCE WITH INTOXICATION UNSPECIFIED
F12250	CANNABIS DEPENDENCE WITH PSYCHOTIC DISORDER WITH DELUSIONS
F12251	CANNABIS DEPENDENCE WITH PSYCHOTIC DISORDER WITH HALLUCINATIONS
F12259	CANNABIS DEPENDENCE WITH PSYCHOTIC DISORDER UNSPECIFIED
F12280	CANNABIS DEPENDENCE WITH CANNABIS-INDUCED ANXIETY DISORDER
F12288	CANNABIS DEPENDENCE WITH OTHER CANNABIS-INDUCED DISORDER
F1229	CANNABIS DEPENDENCE WITH UNSPECIFIED CANNABIS-INDUCED DISORDER
F1310	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE, UNCOMPLICATED

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F13120	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH INTOXICATION UNCOMPLICATED
F13121	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH INTOXICATION DELIRIUM
F13129	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH INTOXICATION UNSPECIFIED
F1314	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED MOOD DISORDER
F13150	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F13151	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F13159	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F13180	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED ANXIETY DISORDER
F13181	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SEXUAL DYSFUNCTION
F13182	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SLEEP DISORDER
F13188	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH OTHER SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1319	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH UNSPECIFIED SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1320	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE UNCOMPLICATED
F1321	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE IN REMISSION
F13220	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F13221	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH INTOXICATION DELIRIUM
F13229	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH INTOXICATION, UNSPECIFIED
F13230	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL UNCOMPLICATED
F13231	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL DELIRIUM
F13232	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F13239	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL UNSPECIFIED

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F1324	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED MOOD DISORDER
F13250	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER UNCOMPLICATED
F13251	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F13259	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER, UNSPECIFIED
F1326	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PERSISTING AMNESTIC DISORDER
F1327	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PERSISTING DEMENTIA
F13280	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED ANXIETY DISORDER
F13281	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SEXUAL DYSFUNCTION
F13282	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SLEEP DISORDER
F13288	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH OTHER SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1329	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH UNSPECIFIED SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1410	COCAINE ABUSE UNCOMPLICATED
F14120	COCAINE ABUSE WITH INTOXICATION UNCOMPLICATED
F14121	COCAINE ABUSE WITH INTOXICATION WITH DELIRIUM
F14122	COCAINE ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F14129	COCAINE ABUSE WITH INTOXICATION UNSPECIFIED
F1414	COCAINE ABUSE WITH COCAINE-INDUCED MOOD DISORDER
F14150	COCAINE ABUSE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F14151	COCAINE ABUSE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F14159	COCAINE ABUSE WITH COCAINE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F14180	COCAINE ABUSE WITH COCAINE-INDUCED ANXIETY DISORDER
F14181	COCAINE ABUSE WITH COCAINE-INDUCED SEXUAL DYSFUNCTION

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F14182	COCAINE ABUSE WITH COCAINE-INDUCED SLEEP DISORDER
F14188	COCAINE ABUSE WITH OTHER COCAINE-INDUCED DISORDER
F1419	COCAINE ABUSE WITH UNSPECIFIED COCAINE-INDUCED DISORDER
F1420	COCAINE DEPENDENCE UNCOMPLICATED
F14220	COCAINE DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F14221	COCAINE DEPENDENCE WITH INTOXICATION DELIRIUM
F14222	COCAINE DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F14229	COCAINE DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1423	COCAINE DEPENDENCE WITH WITHDRAWAL
F1424	COCAINE DEPENDENCE WITH COCAINE-INDUCED MOOD DISORDER
F14250	COCAINE DEPENDENCE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F14251	COCAINE DEPENDENCE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F14259	COCAINE DEPENDENCE WITH COCAINE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F14280	COCAINE DEPENDENCE WITH COCAINE-INDUCED ANXIETY DISORDER
F14281	COCAINE DEPENDENCE WITH COCAINE-INDUCED SEXUAL DYSFUNCTION
F14282	COCAINE DEPENDENCE WITH COCAINE-INDUCED SLEEP DISORDER
F14288	COCAINE DEPENDENCE WITH OTHER COCAINE-INDUCED DISORDER
F1429	COCAINE DEPENDENCE WITH UNSPECIFIED COCAINE-INDUCED DISORDER
F1510	OTHER STIMULANT ABUSE UNCOMPLICATED
F15120	OTHER STIMULANT ABUSE WITH INTOXICATION UNCOMPLICATED
F15121	OTHER STIMULANT ABUSE WITH INTOXICATION DELIRIUM
F15122	OTHER STIMULANT ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F15129	OTHER STIMULANT ABUSE WITH INTOXICATION UNSPECIFIED
F1514	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED MOOD DISORDER
F15150	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F15151	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F15159	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F15180	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED ANXIETY DISORDER

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F15181	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED SEXUAL DYSFUNCTION
F15182	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED SLEEP DISORDER
F15188	OTHER STIMULANT ABUSE WITH OTHER STIMULANT-INDUCED DISORDER
F1519	OTHER STIMULANT ABUSE WITH UNSPECIFIED STIMULANT-INDUCED DISORDER
F1520	OTHER STIMULANT DEPENDENCE UNCOMPLICATED
F15220	OTHER STIMULANT DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F15221	OTHER STIMULANT DEPENDENCE WITH INTOXICATION DELIRIUM
F15222	OTHER STIMULANT DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F15229	OTHER STIMULANT DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1523	OTHER STIMULANT DEPENDENCE WITH WITHDRAWAL
F1524	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED MOOD DISORDER
F15250	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F15251	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F15259	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F15280	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED ANXIETY DISORDER
F15281	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED SEXUAL DYSFUNCTION
F15282	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED SLEEP DISORDER
F15288	OTHER STIMULANT DEPENDENCE WITH OTHER STIMULANT-INDUCED DISORDER
F1529	OTHER STIMULANT DEPENDENCE WITH UNSPECIFIED STIMULANT-INDUCED DISORDER
F1610	HALLUCINOGEN ABUSE UNCOMPLICATED
F16120	HALLUCINOGEN ABUSE WITH INTOXICATION UNCOMPLICATED
F16121	HALLUCINOGEN ABUSE WITH INTOXICATION WITH DELIRIUM
F16122	HALLUCINOGEN ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F16129	HALLUCINOGEN ABUSE WITH INTOXICATION UNSPECIFIED



<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F1614	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED MOOD DISORDER
F16150	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F16151	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F16159	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F16180	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED ANXIETY DISORDER
F16183	HALLUCINOGEN ABUSE WITH HALLUCINOGEN PERSISTING PERCEPTION DISORDER (FLASHBACKS)
F16188	HALLUCINOGEN ABUSE WITH OTHER HALLUCINOGEN-INDUCED DISORDER
F1619	HALLUCINOGEN ABUSE WITH UNSPECIFIED HALLUCINOGEN-INDUCED DISORDER
F1620	HALLUCINOGEN DEPENDENCE UNCOMPLICATED
F16220	HALLUCINOGEN DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F16221	HALLUCINOGEN DEPENDENCE WITH INTOXICATION WITH DELIRIUM
F16229	HALLUCINOGEN DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1624	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED MOOD DISORDER
F16250	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F16251	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F16259	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F16280	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED ANXIETY DISORDER
F16283	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN PERSISTING PERCEPTION DISORDER (FLASHBACKS)
F16288	HALLUCINOGEN DEPENDENCE WITH OTHER HALLUCINOGEN-INDUCED DISORDER
F1629	HALLUCINOGEN DEPENDENCE WITH UNSPECIFIED HALLUCINOGEN-INDUCED DISORDER
F1810	INHALANT ABUSE UNCOMPLICATED
F18120	INHALANT ABUSE WITH INTOXICATION UNCOMPLICATED
F18121	INHALANT ABUSE WITH INTOXICATION DELIRIUM
F18129	INHALANT ABUSE WITH INTOXICATION UNSPECIFIED
F1814	INHALANT ABUSE WITH INHALANT-INDUCED MOOD DISORDER

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F18150	INHALANT ABUSE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F18151	INHALANT ABUSE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F18159	INHALANT ABUSE WITH INHALANT-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1817	INHALANT ABUSE WITH INHALANT-INDUCED DEMENTIA
F18180	INHALANT ABUSE WITH INHALANT-INDUCED ANXIETY DISORDER
F18188	INHALANT ABUSE WITH OTHER INHALANT-INDUCED DISORDER
F1819	INHALANT ABUSE WITH UNSPECIFIED INHALANT-INDUCED DISORDER
F1820	INHALANT DEPENDENCE, UNCOMPLICATED
F18220	INHALANT DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F18221	INHALANT DEPENDENCE WITH INTOXICATION DELIRIUM
F18229	INHALANT DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1824	INHALANT DEPENDENCE WITH INHALANT-INDUCED MOOD DISORDER
F18250	INHALANT DEPENDENCE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F18251	INHALANT DEPENDENCE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F18259	INHALANT DEPENDENCE WITH INHALANT-INDUCED PSYCHOTIC DISORDER, UNSPECIFIED
F1827	INHALANT DEPENDENCE WITH INHALANT-INDUCED DEMENTIA
F18280	INHALANT DEPENDENCE WITH INHALANT-INDUCED ANXIETY DISORDER
F18288	INHALANT DEPENDENCE WITH OTHER INHALANT-INDUCED DISORDER
F1829	INHALANT DEPENDENCE WITH UNSPECIFIED INHALANT-INDUCED DISORDER
F1910	OTHER PSYCHOACTIVE SUBSTANCE ABUSE UNCOMPLICATED
F19120	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION UNCOMPLICATED
F19121	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION DELIRIUM
F19122	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCES
F19129	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION UNSPECIFIED
F1914	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED MOOD DISORDER
F19150	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F19151	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F19159	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1916	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING AMNESTIC DISORDER
F1917	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING DEMENTIA
F19180	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED ANXIETY DISORDER
F19181	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SEXUAL DYSFUNCTION
F19182	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SLEEP DISORDER
F19188	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH OTHER PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1919	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH UNSPECIFIED PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1920	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE UNCOMPLICATED
F19220	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION, UNCOMPLICATED
F19221	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION DELIRIUM
F19222	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F19229	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION UNSPECIFIED
F19230	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL UNCOMPLICATED
F19231	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL DELIRIUM
F19232	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F19239	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL UNSPECIFIED
F1924	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED MOOD DISORDER
F19250	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F19251	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS

<b>Step 7 (history of substance abuse)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
F19259	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1926	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING AMNESTIC DISORDER
F1927	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING DEMENTIA
F19280	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED ANXIETY DISORDER
F19281	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SEXUAL DYSFUNCTION
F19282	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SLEEP DISORDER
F19288	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH OTHER PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1929	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH UNSPECIFIED PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER

<b>Step 8 (paid claim for another ER stimulant)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 14 days</b>	
<b>ER Stimulants</b>	
<b>Label Name</b>	<b>GCN</b>
ADDERALL XR 10MG CAPSULE	14635
ADDERALL XR 15MG CAPSULE	17468
ADDERALL XR 20MG CAPSULE	14636
ADDERALL XR 25MG CAPSULE	17469
ADDERALL XR 30MG CAPSULE	14637
ADDERALL XR 5MG CAPSULE	17459
ADHANSIA XR 25MG CAPSULE	44356
ADHANSIA XR 35MG CAPSULE	44358
ADHANSIA XR 45MG CAPSULE	44362
ADHANSIA XR 55MG CAPSULE	44363
ADHANSIA XR 70MG CAPSULE	44364
ADHANSIA XR 85MG CAPSULE	44365
ADZENYS ER 1.25 MG/ML SUSP	43864
ADZENYS XR-ODT 18.8MG TABLET	40654

<b>Step 8 (paid claim for another ER stimulant)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 14 days</b>	
<b>ER Stimulants</b>	
<b>Label Name</b>	<b>GCN</b>
ADZENYS XR-ODT 3.1MG TABLET	40647
ADZENYS XR-ODT 6.3MG TABLET	40648
ADZENYS XR-ODT 9.4MG TABLET	40649
ADZENYS XR-ODT 12.5MG TABLET	40650
ADZENYS XR-ODT 15.7MG TABLET	40653
ADZENYS XR-ODT 18.8MG TABLET	40654
AMPHETAMINE/DEXTROAMPHETAMINE SALTS 10MG EXTENDED-RELEASE CAPSULE	14635
AMPHETAMINE/DEXTROAMPHETAMINE SALTS 15MG EXTENDED-RELEASE CAPSULE	17468
AMPHETAMINE/DEXTROAMPHETAMINE SALTS 20MG EXTENDED-RELEASE CAPSULE	14636
AMPHETAMINE/DEXTROAMPHETAMINE SALTS 25MG EXTENDED-RELEASE CAPSULE	17469
AMPHETAMINE/DEXTROAMPHETAMINE SALTS 30MG EXTENDED-RELEASE CAPSULE	14637
AMPHETAMINE/DEXTROAMPHETAMINE SALTS 5MG EXTENDED-RELEASE CAPSULE	17459
APTENSIO XR 10MG CAPSULE	97234
APTENSIO XR 15MG CAPSULE	97235
APTENSIO XR 20MG CAPSULE	97236
APTENSIO XR 30MG CAPSULE	97237
APTENSIO XR 40MG CAPSULE	97238
APTENSIO XR 50MG CAPSULE	97239
APTENSIO XR 60MG CAPSULE	97240
CONCERTA ER 18MG TABLET	12567
CONCERTA ER 27MG TABLET	17123
CONCERTA ER 36MG TABLET	12568
CONCERTA ER 54MG TABLET	12248
COTEMPLA XR-ODT 17.3MG TABLET	43535
COTEMPLA XR-ODT 25.9MG TABLET	43536
COTEMPLA XR-ODT 8.6MG TABLET	43534
DAYTRANA 10MG/9HR PATCH	26801
DAYTRANA 15MG/9HR PATCH	26802
DAYTRANA 20MG/9HR PATCH	26803
DAYTRANA 30MG/9HR PATCH	26804
DEXEDRINE SPANSULE 10MG	19850
DEXEDRINE SPANSULE 15MG	19851

<b>Step 8 (paid claim for another ER stimulant)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 14 days</b>	
<b>ER Stimulants</b>	
<b>Label Name</b>	<b>GCN</b>
DEXEDRINE SPANSULE 5MG	19852
DEXMETHYLPHENIDATE 10MG EXTENDED RELEASE CAPSULE	24734
DEXMETHYLPHENIDATE 15MG EXTENDED RELEASE CAPSULE	97111
DEXMETHYLPHENIDATE 20MG EXTENDED RELEASE CAPSULE	24735
DEXMETHYLPHENIDATE 25MG EXTENDED RELEASE CAPSULE	30305
DEXMETHYLPHENIDATE 30MG EXTENDED RELEASE CAPSULE	28035
DEXMETHYLPHENIDATE 35MG EXTENDED RELEASE CAPSULE	30306
DEXMETHYLPHENIDATE 40MG EXTENDED RELEASE CAPSULE	28933
DEXMETHYLPHENIDATE 5MG EXTENDED RELEASE CAPSULE	24733
DEXTROAMPHETAMINE 10MG EXTENDED-RELEASE CAPSULE	19850
DEXTROAMPHETAMINE 15MG EXTENDED-RELEASE CAPSULE	19851
DEXTROAMPHETAMINE 5MG EXTENDED-RELEASE CAPSULE	19852
DYANAVEL 2.5MG/ML SUSP	39686
FOCALIN XR 10MG CAPSULE	24734
FOCALIN XR 15MG CAPSULE	97111
FOCALIN XR 20MG CAPSULE	24735
FOCALIN XR 25MG CAPSULE	30305
FOCALIN XR 30MG CAPSULE	28035
FOCALIN XR 35MG CAPSULE	30306
FOCALIN XR 40MG CAPSULE	28933
FOCALIN XR 5MG CAPSULE	24733
JORNAY PM 100 MG CAPSULE	45110
JORNAY PM 20 MG CAPSULE	45106
JORNAY PM 40 MG CAPSULE	45107
JORNAY PM 60 MG CAPSULE	45108
JORNAY PM 80 MG CAPSULE	45109
METHYLPHENIDATE 10MG EXTENDED-RELEASE CAPSULE	21763
METHYLPHENIDATE 18MG EXTENDED-RELEASE TABLET	12567

<b>Step 8 (paid claim for another ER stimulant)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 14 days</b>	
<b>ER Stimulants</b>	
<b>Label Name</b>	<b>GCN</b>
METHYLPHENIDATE 20MG EXTENDED-RELEASE CAPSULE	20387
METHYLPHENDIATE 20MG EXTENDED-RELEASE TABLET	16180
METHYLPHENIDATE 27MG EXTENDED-RELEASE TABLET	17123
METHYLPHENIDATE 30MG EXTENDED-RELEASE CAPSULE	20388
METHYLPHENIDATE 36MG EXTENDED-RELEASE TABLET	12568
METHYLPHENIDATE 40MG EXTENDED-RELEASE CAPSULE	20391
METHYLPHENIDATE 54MG EXTENDED-RELEASE TABLET	12248
METHYLPHENIDATE 60MG EXTENDED-RELEASE CAPSULE	36195
METHYLPHENIDATE 72 MG EXTENDED-RELEASE TABLET	44239
METHYLPHENIDATE CD 10MG EXTENDED-RELEASE CAPSULE	20384
METHYLPHENIDATE CD 20MG EXTENDED-RELEASE CAPSULE	20385
METHYLPHENIDATE CD 30MG EXTENDED-RELEASE CAPSULE	20386
METHYLPHENIDATE CD 40MG EXTENDED-RELEASE CAPSULE	26734
METHYLPHENIDATE CD 50MG EXTENDED-RELEASE CAPSULE	26735
METHYLPHENIDATE CD 60MG EXTENDED-RELEASE CAPSULE	26736
METHYLPHENIDATE ER 10 MG TAB	93075
MYDAYIS ER 12.5 MG CAPSULE	43538
MYDAYIS ER 25 MG CAPSULE	43539
MYDAYIS ER 37.5 MG CAPSULE	43542
MYDAYIS ER 50 MG CAPSULE	43543
QUILLICHEW ER 20MG CHEW TAB	40289
QUILLICHEW ER 30MG CHEW TAB	40292
QUILLICHEW ER 40MG CHEW TAB	40293
QUILLIVANT XR 25MG/5ML SUSP	33887
RITALIN LA 10MG CAPSULE	21763
RITALIN LA 20MG CAPSULE	20387
RITALIN LA 30MG CAPSULE	20388

<b>Step 8 (paid claim for another ER stimulant)</b>	
<b>Required quantity: 1</b>	
<b>Look back timeframe: 14 days</b>	
<b>ER Stimulants</b>	
<b>Label Name</b>	<b>GCN</b>
RITALIN LA 40MG CAPSULE	20391
VYVANSE 10MG CAPSULE	37674
VYVANSE 10MG CHEWABLE TABLET	42969
VYVANSE 20MG CAPSULE	99366
VYVANSE 20MG CHEWABLE TABLET	43058
VYVANSE 30MG CAPSULE	98071
VYVANSE 30MG CHEWABLE TABLET	43059
VYVANSE 40MG CAPSULE	99367
VYVANSE 40MG CHEWABLE TABLET	43063
VYVANSE 50MG CAPSULE	98072
VYVANSE 50MG CHEWABLE TABLET	43064
VYVANSE 60MG CAPSULE	99368
VYVANSE 60MG CHEWABLE TABLET	43065
VYVANSE 70MG CAPSULE	98073

<b>Step 9 (diagnosis of severe cardiac disease)</b>	
<b>Required diagnoses: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
I200	UNSTABLE ANGINA
I2101	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT MAIN CORONARY ARTERY
I2102	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT ANTERIOR DESCENDING CORONARY ARTERY
I2109	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER CORONARY ARTERY OF ANTERIOR WALL
I2111	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING RIGHT CORONARY ARTERY
I2119	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER CORONARY ARTERY OF INFERIOR WALL
I2121	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT CIRCUMFLEX CORONARY ARTERY
I2129	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER SITES
I213	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE
I214	NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION



<b>Step 9 (diagnosis of severe cardiac disease)</b>	
<b>Required diagnoses: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
I220	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF ANTERIOR WALL
I221	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF INFERIOR WALL
I222	SUBSEQUENT NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION
I228	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF OTHER SITES
I229	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE
I240	ACUTE CORONARY THROMBOSIS NOT RESULTING IN MYOCARDIAL INFARCTION
I241	DRESSLER'S SYNDROME
I248	OTHER FORMS OF ACUTE ISCHEMIC HEART DISEASE
I249	ACUTE ISCHEMIC HEART DISEASE, UNSPECIFIED
I25110	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITH UNSTABLE ANGINA PECTORIS
I25700	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH UNSTABLE ANGINA PECTORIS
I25701	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH UNSTABLE ANGINA PECTORIS WITH DOCUMENTED SPASM
I25708	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH OTHER FORMS OF ANGINA PECTORIS
I25709	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH UNSPECIFIED ANGINA PECTORIS
I25710	ATHEROSCLEROSIS OF AUTOLOGOUS VEIN CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I25720	ATHEROSCLEROSIS OF AUTOLOGOUS ARTERY CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I25730	ATHEROSCLEROSIS OF NONAUTOLOGOUS BIOLOGICAL CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I25750	ATHEROSCLEROSIS OF NATIVE CORONARY ARTERY OF TRANSPLANTED HEART WITH UNSTABLE ANGINA
I25760	ATHEROSCLEROSIS OF BYPASS GRAFT OF CORONARY ARTERY OF TRANSPLANTED HEART WITH UNSTABLE ANGINA
I25790	ATHEROSCLEROSIS OF OTHER CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I462	CARDIAC ARREST DUE TO UNDERLYING CARDIAC CONDITION
I468	CARDIAC ARREST DUE TO OTHER UNDERLYING CONDITION
I469	CARDIAC ARREST, CAUSE UNSPECIFIED

<b>Step 9 (diagnosis of severe cardiac disease)</b>	
<b>Required diagnoses: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
I470	RE-ENTRY VENTRICULAR ARRHYTHMIA
I471	SUPRAVENTRICULAR TACHYCARDIA
I472	VENTRICULAR TACHYCARDIA
I479	PAROXYSMAL TACHYCARDIA, UNSPECIFIED
I480	PAROXYSMAL ATRIAL FIBRILLATION
I481	PERSISTENT ATRIAL FIBRILLATION
I482	CHRONIC ATRIAL FIBRILLATION
I483	TYPICAL ATRIAL FLUTTER
I484	ATYPICAL ATRIAL FLUTTER
I4891	UNSPECIFIED ATRIAL FIBRILLATION
I4892	UNSPECIFIED ATRIAL FLUTTER
I4901	VENTRICULAR FIBRILLATION
I4902	VENTRICULAR FLUTTER
I491	ATRIAL PREMATURE DEPOLARIZATION
I492	JUNCTIONAL PREMATURE DEPOLARIZATION
I493	VENTRICULAR PREMATURE DEPOLARIZATION
I4940	UNSPECIFIED PREMATURE DEPOLARIZATION
I4949	OTHER PREMATURE DEPOLARIZATION
I495	SICK SINUS SYNDROME
I498	OTHER SPECIFIED CARDIAC ARRHYTHMIAS
I499	CARDIAC ARRHYTHMIA, UNSPECIFIED
I501	LEFT VENTRICULAR FAILURE
I5020	UNSPECIFIED SYSTOLIC (CONGESTIVE) HEART FAILURE
I5021	ACUTE SYSTOLIC (CONGESTIVE) HEART FAILURE
I5022	CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE
I5023	ACUTE ON CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE
I5030	UNSPECIFIED DIASTOLIC (CONGESTIVE) HEART FAILURE
I5031	ACUTE DIASTOLIC (CONGESTIVE) HEART FAILURE
I5032	CHRONIC DIASTOLIC (CONGESTIVE) HEART FAILURE
I5033	ACUTE ON CHRONIC DIASTOLIC (CONGESTIVE) HEART FAILURE
I5040	UNSPECIFIED COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I5041	ACUTE COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I5042	CHRONIC COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE

<b>Step 9 (diagnosis of severe cardiac disease)</b>	
<b>Required diagnoses: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>History of Substance Abuse Diagnoses</b>	
<b>ICD-10 Code</b>	<b>Description</b>
I5043	ACUTE ON CHRONIC COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I509	HEART FAILURE, UNSPECIFIED

<b>Step 10 (claim for an MAOI)</b>	
<b>Required claims: 1</b>	
<b>Look back timeframe: 14 days</b>	
<b>GCN</b>	<b>Label Name</b>
27081	AZILECT 0.5MG TABLET
24654	AZILECT 1MG TABLET
26614	EMSAM 12MG/24 HOURS PATCH
26612	EMSAM 6MG/24 HOURS PATCH
26613	EMSAM 9MG/24 HOURS PATCH
26870	LINEZOLID 600MG TABLET
26873	LINEZOLID 600MG/300ML IV SOLN
16416	MARPLAN 10MG TABLET
16417	NARDIL 15MG TABLET
16418	PARNATE 10MG TABLET
16417	PHENELZINE SULFATE 15MG TABLET
24654	RASAGILINE MESYLATE 1 MG TAB
27081	RASAGILINE MESYLATE 0.5MG TAB
15603	SELEGILINE HCL 5MG CAPSULE
15600	SELEGILINE HCL 5MG TABLET
16418	TRANLYCYPROMINE 10MG TABLET
22783	ZELAPAR 1.25 MG ODT TABLET
26871	ZYVOX 100MG/5ML SUSPENSION
26870	ZYVOX 600MG TABLET
26873	ZYVOX 600MG/300ML IV SOLN

<b>Step 11 (diagnosis of severe renal impairment)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 365 days</b>	
<b>ICD-10 Code</b>	<b>Description</b>
N184	CHRONIC KIDNEY DISEASE, STAGE 4 (SEVERE)

**Step 11 (diagnosis of severe renal impairment)****Required diagnosis: 1****Look back timeframe: 365 days**

N185	CHRONIC KIDNEY DISEASE, STAGE 5
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**Step 13 (diagnosis of ESRD)****Required diagnosis: 1****Look back timeframe: 365 days**

<b>ICD-10 Code</b>	<b>Description</b>
N186	END STAGE RENAL DISEASE



## Attention Deficit Disorder (ADD) / Attention Deficit Hyperactivity Disorder (ADHD)

### Clinical Criteria References

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4. Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. The DAWN Report: Emergency department visits involving attention deficit/hyperactivity disorder stimulant medications. Rockville, MD. January 24, 2013.
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6. 2020 ICD-10-CM Diagnosis Codes. 2020. Available at [www.icd10data.com](http://www.icd10data.com). Accessed on October 23, 2020.
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## Publication History

The Publication History records the publication iterations and revisions to this document. Notes for the *most current revision* are also provided in the **Revision Notes** on the first page of this document.

<b>Publication Date</b>	<b>Notes</b>
10/23/2020	Initial publication and presentation to DUR Board