

Prior authorization notice

Summary: The Mental Health Medication Advisory Committee and the Kansas Drug Utilization Review Board reviewed and approved prior authorization (PA) criteria for members receiving multiple antidepressants concurrently. Effective August 29, 2016, members receiving three or more different antidepressants concurrently for greater than 60 days will require PA. The PA criteria for multiple, concurrent antidepressants may be found on the Kansas Department of Health and Environment website at www.kdheks.gov/hcf/pharmacy/pa_criteria.htm.

★ **What this means to you:** Effective August 29, 2016, you will need to obtain PA for members prescribed to three or more antidepressants used concurrently for greater than 60 days. Peer-to-peer consult with a health plan psychiatrist, medical director or pharmacy director is required for approval. The length of approval is 12 months. The following drugs will require PA:

Amoxapine	Desvenlafaxine (Pristiq®)	Isocarboxazid (Marplan®)	Paroxetine (Paxil®, Paxil CR®, Pexeva®)	Tranlycypromine sulfate (Parnate®)
Bupropion (Forfivo® XL, Wellbutrin®, Wellbutrin® SR, Wellbutrin® XL)	Duloxetine (Cymbalta®)	Levomilnacipran (Fetzima®)	Phenelzine Sulfate (Nardil®)	Trimipramine maleate (Surmontil®)
Citalopram (Celexa®)	Escitalopram (Lexapro®)	Maprotiline HCl	Protriptyline HCl (Vivactil®)	Venlafaxine (Effexor®, Effexor XR®)
Clomipramine HCl (Anafranil®)	Fluoxetine (Prozac®)	Milnacipran (Savella®)	Selegiline	Vilazodone (Viibryd®)
Desipramine HCl (Norpramin®)	Fluvoxamine (Luvox®)	Nefazodone HCl	Sertraline (Zoloft®)	Vortioxetine (Brintellix®)

What if a member is currently established on three or more antidepressants concurrently?

To facilitate continuity of care, members currently established on three or more different antidepressants used concurrently for greater than 60 days prior to August 29, 2016, will **not** be subject to this PA requirement for 12 months.

What if I need assistance?

To initiate a PA request, please call our Pharmacy PA department at 1-855-201-7170 and follow the voice prompts for pharmacy PA. You may also fax the request and supporting documents to 1-800-601-4829.

If you need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.