

## POLICY AND PROCEDURE

<b>DEPARTMENT:</b> Pharmacy Operations	<b>DOCUMENT NAME:</b> Atypical Antipsychotics 15 Day Limit
<b>PAGE:</b> 1 of	<b>REPLACES DOCUMENT:</b>
<b>APPROVED DATE:</b> 6/2016	<b>RETIRED:</b>
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<b>PRODUCT TYPE:</b> Medicaid	<b>REFERENCE NUMBER:</b> IN.PHAR.08

### SCOPE:

MHS Pharmacy Department, and Envolve Pharmacy Solutions.

### PURPOSE:

Promote prudent use of atypical antipsychotics by limiting initial fills of atypical antipsychotics to a 15 day supply.

### POLICY:

Members will be limited to an initial supply of 15 days for atypical antipsychotics. This is to prevent waste of unused portion of medications for members who are titrated to different dosages of the medication or changed to alternate medications shortly after initiating therapy.

### PROCEDURE:

Envolve Pharmacy Solutions will program a pharmacy edit that will only allow a 15 day supply of atypical antipsychotics if it appears to be the member's first fill of that medication. Claims will be processed without PA if the member has a previous claim for the medication in the previous 4 months, or if the day supply is 15 days or less. Emergency Supply of medication will not count as a positive claim history.

Samples can be considered as a trial of the medication. In the case of a sample, provider would need to call the Envolve PA call center and inform them of the sample and ask for an override. Other exemptions to the 15 day supply include trial of medication in long term care or through another payer source.

Long acting injectable antipsychotics will be excluded from this clinical edit since one injection often is more than a 15 day supply of medication. Subsequent fills after the initial 15 days supply will be process up to the normal plan limits and amounts.

### Atypical Antipsychotics included in the edit:

- Aripiprazole (Abilify)
- Asenapine (Saphris)
- Brexpiprazole (Rexulti)
- Cariprazine (Vraylar)
- Clozapine (Clozaril)
- Iloperidone (Fanapt)
- Olanzapine (Zyprexa)
- Olanzapine/Fluoxetine (Symbyax)
- Paliperidone (Invega)
- Quetiapine (Seroquel)
- Risperidone (Risperdal)
- Ziprasidone (Geodon)

