

Antidepressant Step Therapy Program Summary

POLICY REVIEW CYCLE

Effective Date

3/1/2023

Date of Origin

FDA APPROVED INDICATIONS AND DOSAGE

Agent(s)	FDA Indication(s)	Notes	Ref#
Aplenzin® (bupropion extended release) Tablets	Treatment of: - Major Depressive Disorder (MDD) - Seasonal Affective Disorder (SAFD)		22
Auvelity® (dextromethorphan hbr-bupropion hcl tab er) Tablets	Treatment of: - Major Depressive Disorder (MDD) in adults		44
Celexa® (citalopram) Tablets Oral solution	Treatment of: - Depression	Generic equivalent available	1, 2
Citalopram Capsules	Treatment of: - Major Depressive Disorder		43
Cymbalta® (duloxetine delayed release) Capsules	Treatment of: - Major Depressive Disorder (MDD) - Generalized Anxiety Disorder (GAD) in adults and pediatric patients 7 years of age and older - Diabetic Peripheral Neuropathic Pain (DPNP) in adults - Fibromyalgia (FM) in adults and pediatric patients 13 years of age and older - Chronic Musculoskeletal Pain (CMP) in adults	Generic equivalent available	13
Desvenlafaxine ER	Treatment of: - Major Depressive Disorder (MDD)		18

Agent(s)	FDA Indication(s)	Notes	Ref#
Tablets			
Drizalma Sprinkle™ (duloxetine delayed release) Sprinkle capsules	Treatment of: - Major Depressive Disorder (MDD) - Generalized Anxiety Disorder (GAD) in adults and pediatric patients ages 7 years to 17 years old - Diabetic Peripheral Neuropathic Pain (DPNP) in adults - Chronic Musculoskeletal Pain (CMP) in adults - Fibromyalgia (FM) in adults		14
duloxetine delayed release Capsules	Treatment of: - Major Depressive Disorder (MDD) - Panic Disorder - Diabetic peripheral neuropathic pain (DPNP) - Chronic musculoskeletal pain (CMP)		19
Effexor XR® (venlafaxine extended release) Capsules	Treatment of: - Major Depressive Disorder (MDD) - Panic Disorder (MDD) - Generalized Anxiety Disorder (GAD) - Social Anxiety Disorder (SAD)	Generic equivalent available	16
Fetzima® (levomilnacipran ER) Capsules	Treatment of: - Major Depressive Disorder (MDD)		17
Fluoxetine 60 mg Tablets	Treatment of: - Major Depressive Disorder (MDD) - Obsessive Compulsive Disorder (OCD) - Bulimia Nervosa - Panic Disorder (PD), with or without agoraphobia	Generic equivalent available	3
Fluoxetine Delayed Release Capsules	Treatment of: - Acute and maintenance treatment of Major Depressive Disorder (MDD)		10
Prozac®	Treatment of:	Generic equivalent available	11

Agent(s)	FDA Indication(s)	Notes	Ref#
(fluoxetine) Tablets Capsules Oral solution	<ul style="list-style-type: none"> - Acute and maintenance treatment of Major Depressive Disorder (MDD) - Acute and maintenance treatment of Obsessive Compulsive Disorder (OCD) - Acute and maintenance treatment of Bulimia Nervosa - Acute treatment of Panic Disorder (PD), with or without agoraphobia 		
Forfivo XL [®] (bupropion extended release) Tablets	<p>Treatment of:</p> <ul style="list-style-type: none"> - Major Depressive Disorder (MDD) 		23
Lexapro [®] (escitalopram) Tablets Oral Suspension	<p>Treatment of:</p> <ul style="list-style-type: none"> - Acute and maintenance treatment of Major Depressive Disorder (MDD) in adults and adolescents aged 12-17 years - Acute Treatment of Generalized Anxiety Disorder (GAD) in adults 	Generic equivalent available	6
Maprotiline Tablets	<p>Treatment of:</p> <ul style="list-style-type: none"> - Major Depressive Disorder (MDD) 		24
Paxil [®] (paroxetine) Tablets Oral Suspension	<p>Treatment of:</p> <ul style="list-style-type: none"> - Treatment of Major Depressive Disorder (MDD) - Obsessive Compulsive Disorder - Panic Disorder (PD) - Generalized Anxiety Disorder - Social Anxiety Disorder (SAD) - Post-Traumatic Stress Disorder (PTSD) 	Generic equivalent available	7
Paxil CR [®] (paroxetine extended release) Tablets	<p>Treatment of:</p> <ul style="list-style-type: none"> - Major Depressive Disorder (MDD) - Panic Disorder (PD) - Social Anxiety Disorder (SAD) - Premenstrual Dysphoric Disorder (PMDD) 	Generic equivalent available	8
Pexeva [®]	<p>Treatment of:</p> <ul style="list-style-type: none"> - Major Depressive Disorder (MDD) 		9

Agent(s)	FDA Indication(s)	Notes	Ref#
(paroxetine mesylate) Tablets	- Obsessive Compulsive Disorder (OCD) - Panic Disorder - Generalized Anxiety Disorder (GAD)		
Pristiq® (desvenlafaxine succinate extended release) Tablets	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	20
Remeron SolTab® (mirtazapine ODT) Orally Disintegrating Tablets	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	25
Remeron® (mirtazapine) Tablets	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	25
Sertraline Capsules	Treatment of: - Major depressive disorder (MDD) in adults - Obsessive-compulsive disorder (OCD) in adults and pediatric patients 6 years and older		42
Trintellix® (vortioxetine) Tablets	Treatment of: - Major Depressive Disorder (MDD)		27
Effexor® (venlafaxine) Tablets	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	15
Venlafaxine ER Tablets	Treatment of: - Major Depressive Disorder - Social Anxiety Disorder		21
Viibryd® (vilazodone)	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	28

Agent(s)	FDA Indication(s)	Notes	Ref#
Tablets			
Wellbutrin® (bupropion)	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	29
Tablets			
Wellbutrin SR® (bupropion sustained release)	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	30
Tablets			
Wellbutrin XL® (bupropion extended release)	Treatment of: - Major Depressive Disorder (MDD) - Seasonal Affective Disorder (SAFD)	Generic equivalent available	31
Tablets			
Zoloft® (sertraline)	Treatment of: - Major Depressive Disorder (MDD)	Generic equivalent available	12
Tablets	- Obsessive Compulsive Disorder (OCD)		
Oral concentrate	- Panic disorder (PD) - Post-traumatic stress disorder (PTSD) - Social anxiety disorder (SAD) - Premenstrual dysphoric disorder (PMDD)		

See package insert for FDA prescribing information: <https://dailymed.nlm.nih.gov/dailymed/index.cfm>

CLINICAL RATIONALE

Depression	No antidepressant has been clearly shown to be superior to another. All FDA-approved antidepressant medications should be considered potentially appropriate for first-line treatment. Selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs), bupropion, mirtazapine, and several newer agents are typically used as first-line medications because their safety and tolerability may be preferable to patients and clinicians compared to those of tricyclic antidepressants (TCAs) and monoamine oxidase (MAO) inhibitors(32). Many clinical features and medication characteristics influence the choice of a first-line antidepressant. There are no absolutes, and relative differences between medications are small, hence, selecting an antidepressant involves an individualized needs assessment for each patient(33).
Anxiety Disorders	Guidelines for treatment of anxiety include several anxiety-related conditions: generalized anxiety disorder (GAD), panic disorder (PD), obsessive compulsive disorder (OCD), post-traumatic stress disorder (PTSD), and social anxiety disorder (SAD). SSRIs are generally considered first-line therapy for GAD and PD. In the treatment of PD, TCAs are as effective as SSRIs, but adverse effects may limit the use

	<p>of TCAs in some patients. Extended-release venlafaxine is effective and well tolerated for GAD and PD, whereas duloxetine has been adequately evaluated only for GAD. Due to the typical delay in onset of action, medications should not be considered ineffective until they are titrated to the high end of the dose range and continued for at least four weeks. Once symptoms have improved, medications should be used for 12 months before tapering to limit relapse. Some patients will require longer treatment(34). OCD has a highly selective response to serotonergic medications. SSRIs are preferred for initial therapy. There is insufficient evidence to show that one SSRI is superior, and the choice should be individualized, taking into account potential drug interactions and tolerability. Dosage should be increased over four to six weeks until maximum dose is achieved. Trial of therapy should continue for eight to 12 weeks, with at least four to six weeks at the maximum tolerable dosage. It usually takes at least four to six weeks for patients to note any significant improvement in symptoms; it may take 10 weeks or longer for some. If successful, medication should be continued for at least one to two years, if not indefinitely(35). Among adult patients with PTSD, fluoxetine, paroxetine, sertraline, and venlafaxine are appropriate choices, with none showing improved efficacy over the others(36). For SAD, SSRIs and SNRIs venlafaxine are the clear first-line pharmacotherapy treatment based on demonstrated efficacy in randomized controlled trials and meta-analyses. Medications in these classes that have been FDA-approved in the U.S. are paroxetine (immediate-release and controlled release), sertraline, fluvoxamine controlled release, and venlafaxine extended release. Other medications in these classes with evidence of efficacy from randomized controlled trials include citalopram, escitalopram, and vilazodone. Fluoxetine has had mixed results in randomized controlled trials. SNRIs should be used with caution in patients at risk for suicide due to greater toxicity in overdose. No individual medication within this class has been consistently shown to be superior to another in this class(37).</p>
Neuropathic Pain	<p>First-line treatment for neuropathic pain include TCAs, gabapentin, pregabalin, and SNRI antidepressants (duloxetine [most studied], venlafaxine) as first-line therapies.(38) For patients with diabetic neuropathy, only two medications, pregabalin and duloxetine, have been approved by the FDA. However, in addition to those two medications, gabapentin and amitriptyline are considered first-line therapy. SNRIs such as venlafaxine and desvenlafaxine are considered second-line therapy. SSRIs such as citalopram, paroxetine, and escitalopram are considered third-line therapy(39).</p>
Fibromyalgia	<p>Pharmaceutical therapy recommendations depend on the source of the guideline. Guidelines are available from the European League Against Rheumatism (EULAR-2016), the Canadian Pain Society (2012) and the Association of the Scientific Medical Societies in Germany (AWMF-2012). Recommendations from these guidelines include amitriptyline, pregabalin, gabapentin, SNRIs (including duloxetine and milnacipran), and SSRIs. Amitriptyline, pregabalin, and duloxetine are used most commonly(40).</p>
Chronic Musculoskeletal Pain	<p>Antidepressants are options for the treatment of chronic pain. Meta-analyses of randomized controlled trials indicate that TCAs and SNRIs provide effective pain relief for a variety of chronic pain etiologies(41). Duloxetine is FDA approved for chronic musculoskeletal pain(13).</p>
Adverse Effects	<p>All of the above listed agents have had a black box warning issued by the FDA. The warning concerns suicidal thoughts and behaviors. Since there are small differences between the warnings, they are not listed here. Please see the respective agent's prescribing information for the warning.</p>

REFERENCES

Number	Reference
1	Celexa prescribing information. Allergan USA, Inc. September 2021.
2	Citalopram solution prescribing information. Aurobindo Pharma Limited. September 2021.
3	Fluoxetine 60 mg tablet prescribing information. Nivagen Pharmaceuticals, Inc. June 2021.
4	Fluvoxamine extended-release capsules prescribing information. Actavis Pharma, Inc. September 2021.

Number	Reference
5	Fluvoxamine tablet prescribing information. ANI Pharmaceuticals, Inc. September 2021.
6	Lexapro prescribing information. Allergan USA, Inc. September 2021.
7	Paxil prescribing information. GlaxoSmithKline. September 2021.
8	Paxil CR prescribing information. Apotex Corp. September 2021.
9	Pexeva prescribing information. Sebela Pharmaceuticals, Inc. September 2021.
10	Fluoxetine delayed release capsule prescribing information. Dr. Reddy's Laboratories Limited. September 2021.
11	Prozac prescribing information. Eli Lilly and Company. October 2021.
12	Zoloft prescribing information. Pfizer, Inc. September 2021.
13	Cymbalta prescribing information. Eli Lilly and Company. September 2021.
14	Drizalma Sprinkle prescribing information. Sun Pharmaceutical Industries Limited. July 2021.
15	Venlafaxine tablets prescribing information. Aurobindo Pharma Limited. February 2019.
16	Effexor XR prescribing information. Pfizer, Inc. November 2021.
17	Fetzima prescribing information. Allergan USA, Inc. September 2021.
18	Khedeza prescribing information. Pernix Therapeutics, LLC. September 2021.
19	Irenka prescribing information. Lupin Pharma. May 2015.
20	Pristiq prescribing information. Pfizer, Inc. November 2021.
21	Venlafaxine ER tablets prescribing information. Nivagen Pharmaceuticals, Inc. February 2019.
22	Aplenzin prescribing information. Valeant Pharmaceuticals North America, LLC. July 2021.
23	Forfivo prescribing information. Almatica Pharma, Inc. December 2019.
24	Maprotiline prescribing information. Mylan Pharmaceuticals, Inc. December 2014.
25	Remeron prescribing information. Merck & Co, Inc. November 2021.
26	Remeron SolTab prescribing information. Merck & Co, Inc. November 2021.
27	Trintellix prescribing information. Takeda Pharmaceuticals America, Inc. September 2021.
28	Viibryd prescribing information. Allergan, Inc. September 2021.
29	Bupropion prescribing information. Cipla USA, Inc. October 2020.
30	Wellbutrin SR prescribing information. GlaxoSmithKline, LLC. October 2020.
31	Wellbutrin XL prescribing information. Bausch Health Companies, Inc. July 2021.
32	Halverson J, Beevers C, Kamholz B. Clinical Practice Review for Major Depressive Disorder. Anxiety and Depression Association of America, February 2, 2016. Available at: https://adaa.org/resources-professionals/practice-guidelines-mdd
33	Kennedy SH, Lam RW, McIntyre RS, et. al. Canadian Network for Mood and Anxiety Treatments (CANMAT) 2016 Clinical Guidelines for the Management of Adults with Major Depressive Disorder. Canadian Journal Psychiatry. 2016, Vol. 61(9)540-560. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4994790/pdf/10.1177_0706743716659417.pdf
34	Locke AB, Kirst N, Shultz CG. Diagnosis and Management of Generalized Anxiety Disorder and Panic Disorder in Adults. Am Fam Physician. 2015 May 1;91(9):617-624. Available at: https://www.aafp.org/afp/2015/0501/p617.html
35	Fenske JN, Petersen K. Obsessive-Compulsive Disorder: Diagnosis and Management. Am Fam Physician. 2015 Nov 15;92(10):896-903. Available at: https://www.aafp.org/afp/2015/1115/p896.html
36	Courtois CA, Sonis J, Brown LS, et. al. Clinical Practice Guideline for the Treatment of Posttraumatic Stress Disorder (PTSD) in Adults. American Psychological Association. Available at: https://www.apa.org/ptsd-guideline/ptsd.pdf
37	van Amerigen M, Heimberg RG, Schneier F, et. al. Clinical Practice Review for Social Anxiety Disorder. Anxiety and Depression Association of America. September 15, 2015. Available at: https://adaa.org/resources-professionals/clinical-practice-review-social-anxiety

Number	Reference
38	Gilron I, Baron R, Jensen T. Neuropathic Pain: Principles of Diagnosis and Treatment. Mayo Clinic Proceedings, April 2015. Available at: https://www.mayoclinicproceedings.org/article/S0025-6196(15)00105-6/fulltext#sec6
39	Snyder MJ, Gibbs LM, Lindsay TJ. Treating Painful Diabetic Peripheral Neuropathy: An Update. American Family Physician. 2016 Aug 1;94(3):227-234. Available at: https://www.aafp.org/afp/2016/0801/p227.html
40	Kia S, Choy E. Update on Treatment Guideline in Fibromyalgia Syndrome with Focus on Pharmacology. Biomedicines. 2017 Jun; 5(2): 20. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5489806/
41	American Society of Anesthesiologists, American Society of Regional Anesthesia and Pain Medicine. Practice guidelines for chronic pain management. Anesthesiology. 2010;112:810-833. Available at: https://anesthesiology.pubs.asahq.org/article.aspx?articleid=1932775 .
42	Sertraline prescribing information. Almatica Pharma LLC. October 2021.
43	Citalopram prescribing information. Almatica Pharma LLC. February 2022.
44	Auvelity prescribing information. Axsome Therapeutics, Inc. August 2022.

POLICY AGENT SUMMARY STEP THERAPY

Agent Names	Strength	Targeted MSC	Available MSC	Preferred Status	Effective Date
APLENZIN*bupropion hbr tab er ; BUPROPTON*bupropion hcl tab ; BUPROPTON*bupropion hcl tab er ; FORFIVO*bupropion hcl tab er ; WELLBUTRIN*bupropion hcl tab er	100 MG ; 150 ; 150 MG ; 174 MG ; 200 MG ; 300 ; 300 MG ; 348 MG ; 450 MG ; 522 MG ; 75 MG	M ; N ; O	M ; N ; O ; Y		
AUVELITY*dextromethorphan hbr-bupropion hcl tab er	45 MG	M ; N ; O	N		
CELEXA*citalopram hydrobromide tab ; CITALOPRAM*citalopram hydrobromide cap ; CITALOPRAM*citalopram hydrobromide oral soln ; CITALOPRAM*citalopram hydrobromide tab	10 MG ; 10 MG/5ML ; 20 ; 20 MG ; 30 MG ; 40 MG	M ; N ; O	N ; O ; Y		
CYMBALTA*Duloxetine HCl Enteric Coated Pellets Cap 20 MG (Base Eq)	20 MG	M ; N ; O	O ; Y		
CYMBALTA*Duloxetine HCl Enteric Coated Pellets Cap 30 MG (Base Eq)	30 MG	M ; N ; O	O ; Y		
CYMBALTA*Duloxetine HCl Enteric Coated Pellets Cap 60 MG (Base Eq)	60 MG	M ; N ; O	O ; Y		
DESVENLAFAXINE*desvenlafaxine succinate tab er ; DESVENLAFAXINE*desvenlafaxine tab er ; PRISTIQ*desvenlafaxine succinate tab er	100 MG ; 25 MG ; 50 MG	M ; N ; O	M ; N ; O ; Y		
DRIZALMA*duloxetine hcl cap delayed release sprinkle	20 MG ; 30 MG ; 40 MG ; 60 MG	M ; N ; O	N		
DULOXETINE HYDROCHLORIDE*Duloxetine HCl Enteric Coated Pellets Cap 40 MG (Base Eq)	40 MG	M ; N ; O	Y		
EFFEXOR*venlafaxine hcl cap er ; VENLAFAXINE*venlafaxine besylate tab er ; VENLAFAXINE*venlafaxine hcl cap er ; VENLAFAXINE*venlafaxine hcl tab ; VENLAFAXINE*venlafaxine hcl tab er	100 MG ; 112.5 MG ; 150 MG ; 225 MG ; 25 MG ; 37.5 MG ; 50 MG ; 75 MG	M ; N ; O	M ; N ; O ; Y		
ESCITALOPRAM*escitalopram oxalate soln ; ESCITALOPRAM*escitalopram oxalate tab ; LEXAPRO*escitalopram oxalate tab	10 ; 10 MG ; 20 ; 20 MG ; 5 MG ; 5 MG/5ML	M ; N ; O	O ; Y		
FETZIMA*levomilnacipran hcl cap er	120 MG ; 20 MG ; 40 MG ; 80 MG	M ; N ; O	N		
FLUOXETINE*fluoxetine hcl cap ; FLUOXETINE*fluoxetine hcl cap delayed release ; FLUOXETINE*fluoxetine hcl solution ; FLUOXETINE*fluoxetine hcl tab ; PROZAC*fluoxetine hcl cap	10 MG ; 20 ; 20 MG ; 20 MG/5ML ; 40 MG ; 60 MG ; 90 MG	M ; N ; O	N ; O ; Y		
FLUVOXAMINE*fluvoxamine maleate cap er	100 MG ; 150 MG	M ; N ; O	O ; Y		
MAPROTILINE*maprotiline hcl tab	25 MG ; 50 MG ; 75 MG	M ; N ; O	N		

Agent Names	Strength	Targeted MSC	Available MSC	Preferred Status	Effective Date
MIRTAZAPINE*mirtazapine orally disintegrating tab ; MIRTAZAPINE*mirtazapine tab ; REMERON*mirtazapine orally disintegrating tab ; REMERON*mirtazapine tab	15 MG ; 30 MG ; 45 MG ; 7.5 MG	M ; N ; O	O ; Y		
PAROXETINE*paroxetine hcl oral susp ; PAROXETINE*paroxetine hcl tab ; PAROXETINE*paroxetine hcl tab er ; PAXIL*paroxetine hcl oral susp ; PAXIL*paroxetine hcl tab ; PAXIL*paroxetine hcl tab er ; PEXEVA*paroxetine mesylate tab	10 MG ; 10 MG/5ML ; 12.5 MG ; 20 MG ; 25 MG ; 30 MG ; 37.5 MG ; 40 MG	M ; N ; O	N ; O ; Y		
SERTRALINE*sertraline hcl cap ; SERTRALINE*sertraline hcl oral concentrate for solution ; SERTRALINE*sertraline hcl tab ; ZOLOFT*sertraline hcl oral concentrate for solution ; ZOLOFT*sertraline hcl tab	100 ; 100 MG ; 150 MG ; 20 MG/ML ; 200 MG ; 25 ; 25 MG ; 50 ; 50 MG	M ; N ; O	N ; O ; Y		
TRINTELLIX*vortioxetine hbr tab	10 MG ; 20 MG ; 5 MG	M ; N ; O	N		
VIIBRYD*vilazodone hcl tab ; VIIBRYD*vilazodone hcl tab starter kit ; VILAZODONE*vilazodone hcl tab	10 MG ; 20 MG ; 40 MG	M ; N ; O	N ; O ; Y		

CLIENT SUMMARY – STEP THERAPY

Target Brand Agent Name(s)	Target Generic Agent Name(s)	Strength	Client Formulary
Aplenzin ; Forfivo xl ; Wellbutrin sr ; Wellbutrin xl	Bupropion HCl Tab ER ; bupropion hbr tab er ; bupropion hcl tab ; bupropion hcl tab er	100 MG ; 150 ; 150 MG ; 174 MG ; 200 MG ; 300 ; 300 MG ; 348 MG ; 450 MG ; 522 MG ; 75 MG	Commercial ; HIM ; ResultsRx
Auvelity	dextromethorphan hbr-bupropion hcl tab er	45 MG	Commercial ; HIM ; ResultsRx
Celexa	Citalopram Hydrobromide Tab ; citalopram hydrobromide cap ; citalopram hydrobromide oral soln ; citalopram hydrobromide tab	10 MG ; 10 MG/5ML ; 20 ; 20 MG ; 30 MG ; 40 MG	Commercial ; HIM ; ResultsRx
Cymbalta	Duloxetine HCl Enteric Coated Pellets Cap 20 MG (Base Eq)	20 MG	Commercial ; HIM ; ResultsRx
Cymbalta	Duloxetine HCl Enteric Coated Pellets Cap 30 MG (Base Eq)	30 MG	Commercial ; HIM ; ResultsRx
Cymbalta	Duloxetine HCl Enteric Coated Pellets Cap 60 MG (Base Eq)	60 MG	Commercial ; HIM ; ResultsRx
Pristiq	desvenlafaxine succinate tab er ; desvenlafaxine tab er	100 MG ; 25 MG ; 50 MG	Commercial ; HIM ; ResultsRx
Drizalma sprinkle	duloxetine hcl cap delayed release sprinkle	20 MG ; 30 MG ; 40 MG ; 60 MG	Commercial ; HIM ; ResultsRx
	Duloxetine HCl Enteric Coated Pellets Cap 40 MG (Base Eq)	40 MG	Commercial ; HIM ; ResultsRx
Effexor xr	venlafaxine besylate tab er ; venlafaxine hcl cap er ; venlafaxine hcl tab ; venlafaxine hcl tab er	100 MG ; 112.5 MG ; 150 MG ; 225 MG ; 25 MG ; 37.5 MG ; 50 MG ; 75 MG	Commercial ; HIM ; ResultsRx
Lexapro	Escitalopram Oxalate Tab ; escitalopram oxalate soln ; escitalopram oxalate tab	10 ; 10 MG ; 20 ; 20 MG ; 5 MG ; 5 MG/5ML	Commercial ; HIM ; ResultsRx
Fetzima ; Fetzima titration pack	levomilnacipran hcl cap er	120 MG ; 20 MG ; 40 MG ; 80 MG	Commercial ; HIM ; ResultsRx
Prozac	Fluoxetine HCl Solution ; fluoxetine hcl cap ; fluoxetine hcl cap delayed release ; fluoxetine hcl solution ; fluoxetine hcl tab	10 MG ; 20 ; 20 MG ; 20 MG/5ML ; 40 MG ; 60 MG ; 90 MG	Commercial ; HIM ; ResultsRx
	fluvoxamine maleate cap er	100 MG ; 150 MG	Commercial ; HIM ; ResultsRx
	maprotiline hcl tab	25 MG ; 50 MG ; 75 MG	Commercial ; HIM ; ResultsRx

Target Brand Agent Name(s)	Target Generic Agent Name(s)	Strength	Client Formulary
Remeron ; Remeron soltab	mirtazapine orally disintegrating tab ; mirtazapine tab	15 MG ; 30 MG ; 45 MG ; 7.5 MG	Commercial ; HIM ; ResultsRx
Paxil ; Paxil cr ; Pexeva	paroxetine hcl oral susp ; paroxetine hcl tab ; paroxetine hcl tab er ; paroxetine mesylate tab	10 MG ; 10 MG/5ML ; 12.5 MG ; 20 MG ; 25 MG ; 30 MG ; 37.5 MG ; 40 MG	Commercial ; HIM ; ResultsRx
Zoloft	Sertraline HCl Tab ; sertraline hcl cap ; sertraline hcl oral concentrate for solution ; sertraline hcl tab	100 ; 100 MG ; 150 MG ; 20 MG/ML ; 200 MG ; 25 ; 25 MG ; 50 ; 50 MG	Commercial ; HIM ; ResultsRx
Trintellix	vortioxetine hbr tab	10 MG ; 20 MG ; 5 MG	Commercial ; HIM ; ResultsRx
Viibryd ; Viibryd starter pack	vilazodone hcl tab ; vilazodone hcl tab starter kit	10 MG ; 20 MG ; 40 MG	Commercial ; HIM ; ResultsRx

STEP THERAPY CLINICAL CRITERIA FOR APPROVAL

Module	Clinical Criteria for Approval
Brand Agents other than Cymbalta /Drizalma	<p>Brand Antidepressant Agents (except Cymbalta and Drizalma) will be approved when ONE of the following is met:</p> <ol style="list-style-type: none"> Information has been provided that indicates the patient has been treated with the requested agent within the past 180 days OR The prescriber states that the patient has been treated with the requested agent within the past 180 days AND is at risk if therapy is changed OR The patient's medication history includes use of a generic antidepressant agent - SSRI, SNRI, bupropion, mirtazapine, or vilazodone in the past 365 days OR The patient has an intolerance or hypersensitivity to a generic antidepressant agent - SSRI, SNRI, bupropion, mirtazapine, or vilazodone OR The patient has an FDA labeled contraindication to ALL generic antidepressants - SSRI, SNRI, bupropion, mirtazapine or vilazodone <p>Length of Approval: 12 months</p>
Cymbalta /Drizalma	<p>Cymbalta and Drizalma Sprinkle will be approved when ONE of the following is met:</p> <ol style="list-style-type: none"> Information has been provided that indicates the patient has been treated with the requested agent within the past 180 days OR The prescriber states the patient has been treated with the requested agent within the past 180 days AND is at risk if therapy is changed OR The patient's medication history includes use of a generic antidepressant agent - SSRI, SNRI, bupropion, mirtazapine, or vilazodone in the past 365 days OR The patient has a diagnosis of neuropathic pain and ONE of the following: <ol style="list-style-type: none"> The patient's medication history includes use of amitriptyline, nortriptyline, desipramine, imipramine, or gabapentin within the past 90 days OR The patient has an intolerance or hypersensitivity to ONE prerequisite agent (i.e., amitriptyline, nortriptyline, desipramine, imipramine, or gabapentin) OR The patient has an FDA labeled contraindication to ALL prerequisite agents (i.e., amitriptyline, nortriptyline, desipramine, imipramine, or gabapentin) OR The patient has a diagnosis of fibromyalgia and ONE of the following: <ol style="list-style-type: none"> The patient's medication history includes use of amitriptyline, nortriptyline, desipramine, imipramine, cyclobenzaprine, gabapentin, or tramadol within the past 90 days OR The patient has an intolerance or hypersensitivity to ONE prerequisite agent (i.e., amitriptyline, nortriptyline, desipramine, imipramine, cyclobenzaprine, gabapentin, or tramadol) OR The patient has an FDA labeled contraindication to ALL prerequisite agents (i.e., amitriptyline, nortriptyline, desipramine, imipramine, cyclobenzaprine, gabapentin, or tramadol) OR The patient has a diagnosis of chronic musculoskeletal pain and ONE of the following:

Module	Clinical Criteria for Approval
	<ul style="list-style-type: none"> A. The patient’s medication history includes use of acetaminophen, oral NSAID, topical NSAID, tramadol, amitriptyline, nortriptyline, desipramine, imipramine, cyclobenzaprine, or gabapentin within the past 90 days OR B. The patient has an intolerance or hypersensitivity to ONE prerequisite agent (i.e., acetaminophen, oral NSAID, topical NSAID, tramadol, amitriptyline, nortriptyline, desipramine, imipramine, cyclobenzaprine, or gabapentin) OR C. The patient has an FDA labeled contraindication to ALL prerequisite agents (i.e., acetaminophen, oral NSAID, topical NSAID, tramadol, amitriptyline, nortriptyline, desipramine, imipramine, cyclobenzaprine, or gabapentin) OR <p>7. If using for a diagnosis other than neuropathic pain, fibromyalgia, or musculoskeletal pain, ONE of the following:</p> <ul style="list-style-type: none"> A. The patient has an intolerance or hypersensitivity to a generic antidepressant - SSRI, SNRI, bupropion, mirtazapine, or vilazodone OR B. The patient has an FDA labeled contraindication to ALL generic antidepressants - SSRI, SNRI, bupropion, mirtazapine, or vilazodone <p>Length of Approval: 12 months</p>

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