

## Provider Bulletin

March 2023

## Hot Tip: ADHD Update

Highmark Blue Cross Blue Shield of Western New York (Highmark BCBSWNY) partners with Amerigroup companies to administer certain services to Medicaid Managed Care (MMC) and Child Health Plus (CHPlus) members. Please note, this information is specific to the CHPlus program only.

Your patients may experience a pharmacy claim rejection when prescribed nonpreferred products. To avoid additional steps or delays at the pharmacy, consider prescribing preferred products whenever possible. Utilization management edits may apply to select preferred products. Coverage should be verified by reviewing the *Preferred Drug List (PDL)* on the Highmark BCBSWNY provider website. The *PDL* is subject to change quarterly.

Nonpreferred	Preferred products
products	
	Clonidine 12-hour and immediate release
	Brand name: Kapvay/Catapres
	Guanfacine ER <sup>2</sup> Brand name: Intuniv
Evekeo	Amphetamine mixed salts OPT (tabs/caps)
	Brand name: Adderall
	Dextroamphetamine/Amphetamine ER OPT (caps)
-	Brand name: Adderall XR
•	Dextroamphetamine IR/ER (tabs/caps and solution)
	Brand name: Dexedrine and Procentra
	Methylphenidate
Aptensio XR Cotempla XR	<ul> <li>CD cap: 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, and 60 mg</li> </ul>
Daytrana	<ul> <li>ER tab: 18 mg, 27 mg, 36 mg, and 54 mg</li> </ul>
	<ul> <li>IR tab: 5 mg, 10 mg, and 20 mg</li> </ul>
Relexxii Desoxyn <sup>1</sup>	<ul> <li>LA cap: 10 mg, 20 mg, 30 mg, 40 mg,</li> </ul>
	60 mg
	Brand name: Metadate CD, Concerta, and Ritalin/Ritalin
	LA
	Dexmethylphenidate, Dexmethylphenidate ER
	Brand name: Focalin/Focalin XR
QuilliChew Quillivant	Methylphenidate solution (5 mg/5 ml and
	10 mg/5 ml)
All Suspension	Brand name: Ritalin
	Evekeo  Adzenys XR Dyanavel XR Mydayis ER  Vyvanse <sup>1</sup> Zenzedi Adhansia XR Aptensio XR Cotempla XR Daytrana Jornay PM Relexxii

## https://providerpublic.mybcbswny.com

Amerigroup Partnership Plan, LLC provides management services for Highmark Blue Cross Blue Shield of Western New York's managed Medicaid. Amerigroup Partnership Plan, LLC brinda servicios administrativos para Medicaid administrado de Highmark Blue Cross Blue Shield of Western New York

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<sup>2</sup> As of November 1, 2022, Guanfacine ER is a preferred product.

If you have questions regarding this *Hot Tip*, call Provider Services at **866-231-0847**.

The PDL is available at **mybcbswny.com/stateplans** > Provider > Eligibility & Pharmacy > Pharmacy Information.



Email is the quickest and most direct way to receive important information from Highmark Blue Cross Blue Shield of Western New York.



To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form (bit.ly/NYwesternmp).

<sup>&</sup>lt;sup>1</sup> Chemical, preferred drug equivalents are not available for Lisdexamfetamine Dimesylate (Vyvanse) or Methamphetamine (Desoxyn).