



Department  
of Health

# **NYRx, the Medicaid Pharmacy Program**

**Dose Optimization (DO)**



# Dose Optimization

Dose optimization can reduce prescription costs by reducing the number of pills a patient takes each day.

The drugs included in this program have been identified by the Department, the majority of which have FDA approval for once-a-day dosing, have multiple strengths available in correlating increments at similar costs, and are currently being prescribed above the recommended dosing frequency.

# Dose Optimization Criteria Requirements

- A prior authorization will be required to obtain medications included in the dose-op program when prescribed beyond the limits shown on the Dose Optimization Chart within the PDL.
- Consideration is given for drugs requiring dose titration.

# Example: Benicar, Diovan, and Micradis

Preferred Drugs	Non-Preferred Drugs	Prior Authorization/Coverage Parameters
<b>III. Cardiovascular</b>		
<b>Angiotensin Receptor Blockers (ARBs)</b>		
irbesartan <sup>1</sup> losartan olmesartan <sup>1</sup> telmisartan <sup>1</sup> valsartan tablet	Atacand® Avapro® Benicar® <u>DO</u> candesartan Cozaar® Diovan® <u>DO, 2</u> Edarbi® eprosartan Micardis® <u>DO</u>	<b>DOSE OPTIMIZATION (DO)</b> <ul style="list-style-type: none"> <li>See Dose Optimization Chart for affected drugs and strengths</li> </ul>

# Example: Benicar, Diovan, and Micradis

Dose Optimization Chart

Brand Name	Dose Optimization Limitations	
<b>CARDIOVASCULAR</b>		
<b>Angiotensin Receptor Blockers (ARBs)</b>		
Benicar® 20 mg	1 daily	Tablet
Micardis® 20 mg, 40 mg	1 daily	Tablet
Diovan® 40 mg, 80 mg, 160 mg	1 daily	Tablet

# Example: Viibryd, Lexapro, and Trintellix

Selective Serotonin Reuptake Inhibitors (SSRIs)		
citalopram (tablet, solution)	Celexa®	<p><b>DOSE OPTIMIZATION (DO)</b></p> <ul style="list-style-type: none"> <li>See Dose Optimization Chart for affected strengths</li> </ul> <p><b>CLINICAL CRITERIA (CC)</b></p> <ul style="list-style-type: none"> <li>Clinical editing will allow patients currently stabilized on fluvoxamine or fluvoxamine ER to continue to receive that agent without PA</li> <li>Clinical editing to allow patients with a diagnosis of Obsessive-Compulsive Disorder (OCD) to receive fluvoxamine and fluvoxamine ER without prior authorization</li> </ul>
escitalopram (tablet)	citalopram (capsule)	
fluoxetine (capsule, solution)	escitalopram (solution)	
paroxetine (tablet)	fluoxetine (tablet)	
sertraline (tablet, concentrate)	fluoxetine DR weekly	
Viibryd® <a href="#">DO</a> , <a href="#">BLTG</a> , 1	fluvoxamine <sup>CC</sup>	
	fluvoxamine ER <sup>CC</sup>	
	Lexapro® <a href="#">DO</a>	
	paroxetine (capsule)	
	paroxetine CR	
	paroxetine suspension	
	Paxil®	
	Paxil CR®	
	Pexeva®	
	Prozac®	
	sertraline (capsule)	
	Trintellix® <a href="#">DO</a>	

# Example: Viibryd, Lexapro, and Trintellix

Brand Name	Dose Optimization Limitations		
<b>CENTRAL NERVOUS SYSTEM</b>			
Vyvanse® 10 mg, 20 mg, 30 mg, 40 mg	1 daily	Capsule	
<b>Other Agents for Attention Deficit Hyperactivity Disorder (ADHD)</b>			
guanfacine ER 1 mg, 2 mg	1 daily	Tablet	
atomoxetine 40 mg	1 daily	Capsule	
Intuniv® 1 mg, 2 mg	1 daily	Tablet	
Strattera® 40 mg	1 daily	Capsule	
<b>Sedative Hypnotics</b>			
Lunesta® 1 mg	1 daily	Tablet	
<b>Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)</b>			
Effexor® XR 37.5 mg, 75 mg, 150 mg	1 daily	Capsule	In the case of dose titration for these medications, the Department will allow for multiday dosing (up to 2 doses/daily) for titration purposes for three months.
desvenlafaxine succinate ER (Pristiq® ER 50 mg)	1 daily	Tablet	
<b>Selective Serotonin Reuptake Inhibitors (SSRIs)</b>			
Lexapro® 5 mg, 10 mg	1 daily	Tablet	In the case of dose titration for these once daily medications, the Department will allow for multiday dosing (up to 2 doses/daily) for titration purposes for three months.
Trintellix® 5 mg, 10 mg	1 daily	Tablet	
Viibryd® 10 mg, 20 mg	1 daily	Tablet	