

## Commercial/Healthcare Exchange PA Criteria

*Effective: June 2009*

**Prior Authorization:** Aplenzin, Forfivo XL

**Products Affected:** Aplenzin (bupropion hydrobromide) tablets, Forfivo XL (bupropion hydrochloride) extended-release tablets

**Medication Description:** Bupropion is an aminoketone class antidepressant. It inhibits weakly the neuronal uptake of dopamine and norepinephrine but does not inhibit monoamine oxidase or the reuptake of serotonin.

**Covered Uses:**

**Major Depressive Disorder:** Aplenzin and Forfivo XL

**Aplenzin Only** - Prevention of seasonal major depressive episodes in patients with a diagnosis of seasonal affective disorder (SAD)

**Exclusion Criteria:**

1. Patients with a history of seizure disorder(s).
2. patients treated currently with other bupropion products
3. patients with a current or prior diagnosis of bulimia or anorexia nervosa
4. patients undergoing abrupt discontinuation of alcohol, benzodiazepines, barbiturates, and antiepileptic drugs
5. Concomitant use of MAOIs (intended to treat psychiatric disorders) or within 14 days of discontinuing treatment
6. patients with known hypersensitivity to bupropion

**Required Medical Information:**

1. Diagnosis
2. Previous medications tried/failed

**Age Restrictions:** 18 years of age and older

**Prescriber Restrictions:** N/A

**Coverage Duration:** 12 months

**Other Criteria:**

- A. Patient has a diagnosis of major depressive disorder or seasonal affective disorder (Aplenzin Only); AND
- B. Intolerance to, or treatment failure of, at least one generic first line SSRI (citalopram, fluoxetine, fluvoxamine, paroxetine HCl immediate-release, sertraline); AND
- C. Intolerance to, or treatment failure of bupropion hydrochloride (Wellbutrin) dose equivalent to 450mg.

**References:**

1. Aplenzin full prescribing information. Bridgewater, NJ. Sanofi-Aventis US LLC
2. Forfivo XL full prescribing information, Austin, TX, Edgemont Pharmaceuticals

## Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	06/2009
2	Update	Moved to updated template Review History: 9/15, 2/17, 1/18	All	02/05/2020