

US Family Health Plan  
Prior Authorization Request Form for  
Lisdexamfetamine capsule and chewable tablet (**Vyvanse**)

To be completed and signed by the prescriber. To be used only for prescriptions which are to be filled through the Department of Defense (DoD) US Family Health Plan Pharmacy Program. US Family Health Plan is a TRICARE contractor for DoD.

The completed form may be faxed to 855-273-5735

OR

The patient may attach the completed form to the prescription and **mail** it to:

**Attn: Pharmacy, 77 Warren St, Brighton, MA 02135**

QUESTIONS? **Call 1-877-880-7007**

**Step 1** Please complete patient and physician information (please print):

Patient Name: _____	Physician Name: _____
Address: _____	Address: _____
_____	_____
Sponsor ID #: _____	Phone #: _____
Date of Birth: _____	Secure Fax #: _____

**Step 2** Please complete the clinical assessment:

<b>1. For which diagnosis is the requested medication being prescribed?</b>	<input type="checkbox"/> Attention Deficit Hyperactivity Disorder (ADHD) - <b>Proceed to question 2</b> <input type="checkbox"/> Moderate to severe Binge Eating Disorder- <b>Proceed to question 5</b> <input type="checkbox"/> Weight loss/Obesity - <b>STOP- Coverage not approved</b> <input type="checkbox"/> Other indication or diagnosis- <b>STOP- Coverage not approved</b>	
<b>2. Is the patient 6 years of age or older?</b>	<input type="checkbox"/> Yes <b>Proceed to question 3</b>	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
<b>3. Has the patient tried and failed mixed amphetamine salts ER (Adderall XR, generics) or another long acting amphetamine or amphetamine derivative type drug?</b>	<input type="checkbox"/> Yes <b>Proceed to question 4</b>	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
<b>4. Has the patient tried and failed methylphenidate OROS (Concerta, generics) or another long acting methylphenidate or methylphenidate derivative type drug?</b>	<input type="checkbox"/> Yes <b>Sign and date below</b>	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
<b>5. Is the patient an Active Duty Service Member (ADSM)?</b>	<input type="checkbox"/> Yes <b>Proceed to question 6</b>	<input type="checkbox"/> No <b>Proceed to question 7</b>
<b>6. Note to provider: please acknowledge the need to consult service specific policy for Binge Eating Disorder (BED).</b>	<input type="checkbox"/> Acknowledged <b>Proceed to question 7</b>	
<b>7. Is the patient 18 years of age or older?</b>	<input type="checkbox"/> Yes <b>Proceed to question 8</b>	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
<b>8. Was the requested medication prescribed by or in consultation with a psychiatrist or other behavioral specialist?</b>	<input type="checkbox"/> Yes <b>Proceed to question 9</b>	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
<b>9. Has the patient failed, does not have access to, or had an inadequate response to cognitive behavioral therapy or other psychotherapy?</b>	<input type="checkbox"/> Yes <b>Proceed to question 10</b>	<input type="checkbox"/> No <b>STOP</b> Coverage not approved

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10. Has the patient tried and failed OR had a contraindication to an SSRI (for example, citalopram, fluoxetine, sertraline)?	<input type="checkbox"/> Yes Proceed to question 11	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
11. Has the patient tried and failed OR had a contraindication to topiramate or zonisamide?	<input type="checkbox"/> Yes Proceed to question 12	<input type="checkbox"/> No <b>STOP</b> Coverage not approved
12. Note to provider: please acknowledge that Vyvanse will be discontinued if the patient does not respond by having a positive clinical response, defined as a meaningful decrease of binge eating episodes or binge days per week from baseline, or improvement in signs and symptoms of binge eating disorder after taking Vyvanse.	<input type="checkbox"/> Acknowledged Sign and date below	

**Step** I certify the above is true to the best of my knowledge. Please sign and date:

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\_\_\_\_\_  
Prescriber Signature

\_\_\_\_\_  
Date

[03 Mar 2021]