

Clinical Policy Title:	dextromethorphan hydrobromide and bupropion hydrochloride
Policy Number:	RxA.775
Drug(s) Applied:	Auvelity™
Original Policy Date:	10/19/2022
Last Review Date:	04/01/2024
Line of Business Policy Applies to:	All lines of business (except Medicare)

Criteria

I. Initial Approval Criteria

A. Major depressive disorder (must meet all):

Diagnosis of Major depressive disorder;

1. Trial and failure of at least three antidepressants from TWO different classes (e.g., selective serotonin reuptake inhibitor [SSRI], serotonin-norepinephrine reuptake inhibitor [SNRI], tricyclic antidepressant [TCA], bupropion,), each used for ≥ 4 weeks, unless contraindicated or clinically significant adverse effects experienced;

Approval Duration

All Lines of Business (except Medicare): 12 months

II. Continued Therapy Approval

A. Major depressive disorder (must meet all):

1. Member is currently receiving or has been treated with this medication within the past 90 days, excluding manufacturer samples.

Approval Duration

All Lines of Business (except Medicare): 12 months

References

Not Applicable

Review/Revision History	Review/Revision Date	P&T Approval Date
Policy established.	09/09/2022	10/19/2022
Policy was reviewed.	10/19/2023	10/19/2023
Policy was reviewed:	4/1/2024	10/19/2023
<ol style="list-style-type: none"> 1. I.A.3 Removed mirtazapine as an example since it is classified as a tricyclic antidepressant (TCA) 2. I.A.4 Removed dosing 		

This clinical policy has been developed to authorize, modify, or determine coverage for individuals with similar conditions. Specific care and treatment may vary depending on individual need and benefits covered by the plan. This policy is not intended to dictate to providers how to practice medicine, nor does it constitute a contract or guarantee regarding payment or results. This document may contain prescription brand name drugs that are trademarks of pharmaceutical manufacturers that are not affiliated with RxAdvance.

3. I.A Extended duration of approval to 12 months		
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