

Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date:	December 3, 2015
Revision Date:	November 29, 2016, May 13, 2022, January 24, 2024

# **REXULTI®** (brexpiprazole)

#### LENGTH OF AUTHORIZATION: Up to one year

### **REVIEW CRITERIA:**

For the treatment of schizophrenia

- Patient must be ≥13 years old; **AND**
- Patient must have a history, within the past 365 days of trial and failure of a preferred atypical antipsychotic with a minimum 30-day treatment period.

For the adjunctive treatment of major depressive disorder

- Patient must be ≥18 years old; **AND**
- Patient must have a history of trial and failure with a minimum of two antidepressants within the past 365 days; **AND**
- Documentation that brexpiprazole (Rexulti®) will be used concurrently with an antidepressant. (Failure can be defined as inefficacy or intolerability, but not non-compliance).

For the treatment of agitation associated with dementia due to Alzheimer's disease

- Patient must be  $\geq$ 18 years old; **AND**
- Patient must have a diagnosis of probable Alzheimer's disease according to National Institute of Neurological and Communicative Diseases and Stroke/Alzheimer's Disease and Related Disorders Association (NINCDS-ADRDA) criteria; AND
- Patient must have a Mini-Mental State Examination (MMSE) score of ≥ 5 and ≤ 22 and have a total score of ≥4 by the agitation/aggression item of the Neuropsychiatric Inventory/Neuropsychiatric Inventory Nursing Home Version (NPI/NPI-NH) and exhibit sufficient agitation behaviors to warrant use of pharmacotherapy, after excluding other factors.

### **CONTINUATION OF THERAPY**

- Patient met initial review criteria.
- Documentation of positive clinical response.
- Dosing is appropriate as per labeling or is supported by compendia.

## **DOSING AND ADMINISTRATION:**

- Available as 0.25mg, 0.5mg, 1mg, 2mg, 3mg, and 4mg tablets.
- Refer to product labeling at https://www.accessdata.fda.gov/scripts/cder/daf/

