



Antipsychotic Age and Dose Limits

Dr. Robert Hilt
University of Washington
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CURRENT LIMITS	Age under 3	Age 3–5 years	Age 6–12 years	Age 13–17 years
aripiprazole (Abilify®)	Review required	Review required	20 mg per day	30 mg per day
asenapine (Saphris®)	Review required	Review required	Review required	Review required
clozapine (Clozaril®/Fazaclo®)	Review required	Review required	600 mg per day	900 mg per day
haloperidol (Haldol®)	Review required	Review required	10 mg per day	15 mg per day
iloperidone (Fanapt®)	Review required	Review required	Review required	Review required
lurasidone (Latuda®)	Review required	Review required	Review required	Review required
olanzapine (Zyprexa®/Zydis®)	Review required	2.5 mg per day	10 mg per day	20 mg per day
paliperidone (Invega®)	Review required	Review required	Review required	Review required
perphenazine (Trilafon®)	Review required	Review required	12 mg per day	24 mg per day
quetiapine (Seroquel®/XR®)	Review required	Review required	300 mg per day	600 mg per day
risperidone (Risperdal®/M-Tab®)	Review required	2 mg per day	4 mg per day	8 mg per day
ziprasidone (Geodon®)	Review required	Review required	80 mg per day	160 mg per day

RECOMMENDED NEW LIMITS	Age under 3	Age 3–5 years	Age 6–12 years	Age 13–17 years
aripiprazole (Abilify®)	Review required	5 mg per day	20 mg per day	30 mg per day
asenapine (Saphris®)	Review required	Review required	Review required	Review required
clozapine (Clozaril®/Fazaclo®)	Review required	Review required	Review required	700 mg per day
haloperidol (Haldol®)	Review required	Review required	10 mg per day	15 mg per day
iloperidone (Fanapt®)	Review required	Review required	Review required	Review required
lurasidone (Latuda®)	Review required	Review required	40 mg per day	80 mg per day
olanzapine (Zyprexa®/Zydis®)	Review required	Review required	10 mg per day	20 mg per day
paliperidone (Invega®)	Review required	Review required	Review required	Review required
perphenazine (Trilafon®)	Review required	Review required	12 mg per day	24 mg per day
quetiapine (Seroquel®/XR®)	Review required	Review required	400 mg per day	800 mg per day
risperidone (Risperdal®/M-Tab®)	Review required	2 mg per day	4 mg per day	6 mg per day
ziprasidone (Geodon®)	Review required	Review required	80 mg per day	160 mg per day

Flag Differences from FDA Approvals

	Our ages allowed	FDA youth ages	Our Youth Max Dose	FDA Youth Max Dose
Aripiprazole	3 and up	6 and up	30mg per day	30mg per day
Asenapine	Always review	10 and up	none	20mg per day
Clozapine	13 and up	10 and up	700mg per day	700mg per day
Haloperidol	6 and up	3 and up	15mg per day	100mg per day
Iloperidone	Always review	none	none	none
Lurasidone	6 and up	10 and up	80mg per day	80mg per day
Olanzapine	6 and up	13 and up	20mg per day	20mg per day
Paliperidone	Always review	12 and up	none	12mg per day
Perphenazine	6 and up	none	24mg per day	none
Quetiapine	6 and up	10 and up	800mg per day	800mg per day
Risperidone	3 and up	5 and up	6mg per day	6mg per day
Ziprasidone	6 and up	none	160mg per day	none



Motion

“I move that the Apple Health Medicaid Program implement the antipsychotic age and dose limits as recommended.”

Motion: Buccola

2nd: Flatebo