<table>
<thead>
<tr>
<th>Brand</th>
<th>Indication</th>
<th>Dosing</th>
<th>Oral Overlap</th>
<th>Tmax</th>
<th>T 1/2</th>
<th>Injection Interval</th>
<th>Pros &amp; Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aripiprazole</td>
<td>Schizophrenia</td>
<td>720–960 mg every 8 weeks</td>
<td>Yes 14 days</td>
<td>1 - 49 days</td>
<td>?</td>
<td>8 weeks</td>
<td>Pros:&lt;br&gt;- Low risk of metabolic &amp; endocrine AEs&lt;br&gt;- Aristada can be started using Initio 675 mg IM + 30 mg oral dose instead of 3 weeks oral bridge (+ 1M maintenance dose)&lt;br&gt;- 4 week, 6 week, 8 week and 2 months IM option&lt;br&gt;- Rates of akathisia are comparable to D2 antagonist antipsychotic LAIs&lt;br&gt;- Abilify Maintena 200 mg &amp; 160 mg dose can be obtained from 300 mg or 400 mg vials&lt;br&gt;- A subset of clients may need a D2 antagonist for optimal positive symptom control&lt;br&gt;- Abilify Asimtufii® and Maintena 1M require 2 weeks of oral overlap</td>
</tr>
<tr>
<td>monohydrate Abilify</td>
<td>Bipolar I</td>
<td>675 mg IM once + 30 mg aripiprazole PO once + one Aristada IM inj within 10 days</td>
<td>Yes (aripiprazole 30 mg PO once)</td>
<td>16 - 35 days (median 27 days)</td>
<td>15 - 18 days</td>
<td>Once</td>
<td></td>
</tr>
<tr>
<td>Asimtufii® 2023</td>
<td>Schizophrenia</td>
<td>675 mg IM once + 30 mg aripiprazole PO once + one Aristada IM inj within 10 days</td>
<td>Yes (aripiprazole 30 mg PO once)</td>
<td>16 - 35 days (median 27 days)</td>
<td>15 - 18 days</td>
<td>Once</td>
<td></td>
</tr>
<tr>
<td>Aripiprazole</td>
<td>Schizophrenia</td>
<td>441, 662, 882 mg IM once monthly, or 882 mg Q6-weeks or 1064 mg Q2-months</td>
<td>Yes 21 days</td>
<td>41 days (single dose)</td>
<td>53.9 - 57.2 days</td>
<td>4 weeks (all doses)</td>
<td></td>
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<tr>
<td>lauroxil Aristada</td>
<td>Schizophrenia</td>
<td>441, 662, 882 mg IM once monthly, or 882 mg Q6-weeks or 1064 mg Q2-months</td>
<td>Yes 21 days</td>
<td>41 days (single dose)</td>
<td>53.9 - 57.2 days</td>
<td>4 weeks (all doses)</td>
<td></td>
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<tr>
<td>Aristada® 2015</td>
<td>Schizophrenia</td>
<td>300 or 400 mg IM once monthly</td>
<td>Yes 14 days</td>
<td>5 - 7 days (gluteal)</td>
<td>29.9 days (300 mg)</td>
<td>4 weeks</td>
<td></td>
</tr>
<tr>
<td>Aripiprazole</td>
<td>Schizophrenia</td>
<td>300 or 400 mg IM once monthly</td>
<td>Yes 14 days</td>
<td>5 - 7 days (gluteal)</td>
<td>29.9 days (300 mg)</td>
<td>4 weeks</td>
<td></td>
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<tr>
<td>Abilify Maintena®</td>
<td>Schizophrenia</td>
<td>300 or 405 mg IM Q-2 weeks 300 or 405 mg IM Q-4 weeks</td>
<td>No</td>
<td>7 days</td>
<td>30 days</td>
<td>2 to 4 weeks</td>
<td>Pros:&lt;br&gt;- Olanzapine’s small efficacy edge for some clts,&lt;br&gt;- Can be loaded, max dose equals 20 mg/day PO olanzapine&lt;br&gt;- Metabolic AEs, post-injection syndrome causing delirium/sedation requires 3-hour observation</td>
</tr>
<tr>
<td>2013</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Cons:&lt;br&gt;- Aripiprazole PO can be started using Initio 675 mg IM + 30 mg oral dose instead of 3 weeks oral bridge (+ 1M maintenance dose)&lt;br&gt;- 4 week, 6 week, 8 week and 2 months IM option&lt;br&gt;- Rates of akathisia are comparable to D2 antagonist antipsychotic LAIs&lt;br&gt;- Abilify Maintena 200 mg &amp; 160 mg dose can be obtained from 300 mg or 400 mg vials&lt;br&gt;- A subset of clients may need a D2 antagonist for optimal positive symptom control&lt;br&gt;- Abilify Asimtufii® and Maintena 1M require 2 weeks of oral overlap</td>
</tr>
<tr>
<td>Olanzapine</td>
<td>Schizophrenia</td>
<td>150 or 210 mg IM Q-2 weeks 300 or 405 mg IM Q-4 weeks</td>
<td>No</td>
<td>7 days</td>
<td>30 days</td>
<td>2 to 4 weeks</td>
<td>Pros:&lt;br&gt;- Olanzapine’s small efficacy edge for some clts,&lt;br&gt;- Can be loaded, max dose equals 20 mg/day PO olanzapine&lt;br&gt;- Metabolic AEs, post-injection syndrome causing delirium/sedation requires 3-hour observation</td>
</tr>
<tr>
<td>Zyprexa Relprevv®</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Cons:&lt;br&gt;- Aripiprazole PO can be started using Initio 675 mg IM + 30 mg oral dose instead of 3 weeks oral bridge (+ 1M maintenance dose)&lt;br&gt;- 4 week, 6 week, 8 week and 2 months IM option&lt;br&gt;- Rates of akathisia are comparable to D2 antagonist antipsychotic LAIs&lt;br&gt;- Abilify Maintena 200 mg &amp; 160 mg dose can be obtained from 300 mg or 400 mg vials&lt;br&gt;- A subset of clients may need a D2 antagonist for optimal positive symptom control&lt;br&gt;- Abilify Asimtufii® and Maintena 1M require 2 weeks of oral overlap</td>
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<td>Generic (Brand) Year approved</td>
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<td>-------------------------------</td>
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| **Paliperidone palmitate Invega Hafyera® 2021** | Schizophrenia | 1,092 mg or 1,560 mg once 6-monthly after treatment with monthly paliperidone for at least 4 months or 3-month paliperidone LAI for at least one 3-month cycle | No | 148 - 159 days (gluteal) | 29 - 32 days | 6 months | **Pros**  
• Can be loaded  
• Few drug-drug interactions (renal excretion)  
• Max dose corresponds to 6 mg/day oral risperidone  
• Offers 3-month & 6-month options for clts on Paliperidone Palmitate 1 month for at least 4 months  
**Cons**  
• Metabolic side effects  
• Risk of hyperprolactinemia |
| **Paliperidone palmitate Invega Sustenna® 2009** | Schizophrenia Schizoaffective Disorder | Initiation: 234 mg followed by 156 mg IM (deltoid) one week later  
• 39 mg, 78 mg, 117 mg, 156 mg or 234 mg IM once monthly | No | 13 days | 25 - 49 days | 4 weeks | **Pros**  
• Well established (risperidone approved in 1993)  
• Subcutaneous LAIs eliminate the need for oral overlap  
• Perseris and Uzedy can be administered in the upper arm  
• 4 week & 8 week SQ inj option  
• Uzedy dose range corresponds to 2, 3, 4, and 5 mg/day oral risperidone  
**Cons**  
• Metabolic & endocrine AEs  
• Risperdal Consta require biweekly injections, 21 days oral overlap and unfavorable PK  
• Perseris requires extensive mixing and comes in 90mg and 120mg doses, equivalent to 3mg/day and 4mg/day of oral risperidone respectively. Not suitable for doses outside 3-4mg/day range |
| **Paliperidone palmitate Invega Trinza® 2015** | Schizophrenia | 273 mg, 410 mg, 546 mg, or 819 mg IM Q3-months after treatment with once monthly Invega Sustenna for at least 4 months (3.5 x the last Sustenna dose) | No | 84 - 95 days (deltoid) | 30 - 33 days | 12 weeks | **Pros**  
• Can be loaded  
• Few drug-drug interactions (renal excretion)  
• Max dose corresponds to 6 mg/day oral risperidone  
• Offers 3-month & 6-month options for clts on Paliperidone Palmitate 1 month for at least 4 months  
**Cons**  
• Metabolic side effects  
• Risk of hyperprolactinemia |
| **Risperidone Perseris® 2018** | Schizophrenia | 90 mg or 120 mg SC once monthly | No | 1st peak 4 to 6 hours (initial drug release d/t depot formation process), 2nd peak 10 to 14 days post-dose (slow release from the depot) | 9-11 days | 4 weeks | **Pros**  
• Can be loaded  
• Few drug-drug interactions (renal excretion)  
• Max dose corresponds to 6 mg/day oral risperidone  
• Offers 3-month & 6-month options for clts on Paliperidone Palmitate 1 month for at least 4 months  
**Cons**  
• Metabolic side effects  
• Risk of hyperprolactinemia |
| **Risperidone Risperdal Consta® 2003** | Schizophrenia Bipolar I | 12.5 mg, 25 mg, 37.5 mg, or 50 mg IM Q-2 weeks | Yes, 21 days after initial inj or any change in dose | 21 days | 3 -6 days | 2 weeks | **Pros**  
• Can be loaded  
• Few drug-drug interactions (renal excretion)  
• Max dose corresponds to 6 mg/day oral risperidone  
• Offers 3-month & 6-month options for clts on Paliperidone Palmitate 1 month for at least 4 months  
**Cons**  
• Metabolic side effects  
• Risk of hyperprolactinemia |
| **Risperidone Rykindo 2023** | Schizophrenia Bipolar I | 25 mg to 50 mg IM every 2 weeks | Yes (7 days) | 14 days (25 mg)  
17 days (50 mg) | 3 to 6 days | 2 weeks | **Pros**  
• Well established (risperidone approved in 1993)  
• Subcutaneous LAIs eliminate the need for oral overlap  
• Perseris and Uzedy can be administered in the upper arm  
• 4 week & 8 week SQ inj option  
• Uzedy dose range corresponds to 2, 3, 4, and 5 mg/day oral risperidone  
**Cons**  
• Metabolic & endocrine AEs  
• Risperdal Consta require biweekly injections, 21 days oral overlap and unfavorable PK  
• Perseris requires extensive mixing and comes in 90mg and 120mg doses, equivalent to 3mg/day and 4mg/day of oral risperidone respectively. Not suitable for doses outside 3-4mg/day range |
| **Risperidone Uzedy® 2023** | Schizophrenia | Convert from PO to SQ: 2mg/day to 50mg monthly or 100mg bi-monthly; 3mg/day to 75mg monthly or 150mg bi-monthly; 4mg/day to 100mg monthly or 200mg bi-monthly; 5mg/day to 125mg monthly or 250mg bi-monthly | No | 8 to 14 days | 14 - 22 days | 4 - 8 weeks | **Pros**  
• Can be loaded  
• Few drug-drug interactions (renal excretion)  
• Max dose corresponds to 6 mg/day oral risperidone  
• Offers 3-month & 6-month options for clts on Paliperidone Palmitate 1 month for at least 4 months  
**Cons**  
• Metabolic side effects  
• Risk of hyperprolactinemia |
<table>
<thead>
<tr>
<th>Generic Brand</th>
<th>Dosage Form/Strength</th>
<th>Requires Adding Diluent/ inj volume</th>
<th>Injection Type/Sites Needle</th>
<th>Refrigerated</th>
<th>Administration/Comments</th>
<th>Cost per 12 months *</th>
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| Aripiprazole monohydrate     | Pre-filled ER injectable suspension syringes 720 mg or 960 mg every 8 weeks | No 3.2 mL (960 mg) 2.4 mL (720 mg) | IM Gluteal 22G 1.5-inch or 21G 2-inch | No           | • Tap 10 times, shake syringe vigorously for at least 10 seconds until the medication is uniform  
  • For non-obese patients, use a 22-gauge, 1.5-inch needle.  
  • For obese patients, use a 21-gauge, 2-inch needle | Up to $32,631 |
| Abilify Asimutufii®          |                      |                                    |                             |              |                                                                                           |                      |
| Aripiprazole lauroxil        | Pre-filled ER injectable suspension syringes 675 mg | No 2.4 mL | IM Deltoid or Gluteal 21G 1-inch 20G 1.5-inch or 2-inch | No           | • Tap & shake syringe vigorously for at least 30 seconds prior to use  
  • Aristada Initio is not interchangeable with Aristada (different PK profiles)  
  • Avoid use in known CYP2D6 poor Metabolizers | Up to $35,988 |
| Aristada Initio®             |                      |                                    |                             |              |                                                                                           |                      |
| Aripiprazole lauroxil        | Prefilled syringe 441 mg, 662 mg, 882 mg, 1064 mg | No 3.9 mL (1064 mg) 3.2 mL (882 mg) 2.4 mL (662 mg) 1.6 mL (441 mg) | IM Deltoid (441 mg only) Gluteal (all doses) 21G 1-inch 20G 1.5-inch or 2-inch | No           | • Tap 10 times, shake syringe vigorously for at least 30 seconds prior to use  
  • Inject over <10 seconds into deltoid or gluteal muscle (441 mg), gluteal only (662 or 882 mg)  
  • Use longer needles for larger amount of subcutaneous tissue overlaying the muscle | Up to $32,631 |
| Aristada                     |                      |                                    |                             |              |                                                                                           |                      |
| Aripiprazole Abilify         | 1) 300 mg & 400 mg vials  
  2) 300 mg & 400 mg pre-filled dual chamber syringe | Yes, dual- chamber syringe also available 0.8 mL (160 mg) 1 mL (200 mg) 1.5 mL (300 mg) 2 mL (400 mg) | IM Deltoid or Gluteal 21G 2-inch, 22G 1.5-inch or 23G 1-inch | No           | • Shake syringe vigorously for 20 seconds, shake vials for 30 sec. Inject slowly into deltoid or gluteal muscle (300 or 400 mg)  
  • adjust dose for strong CYP2D6 or CYP3A4 inhibitors; avoid use with strong CYP3A4 inducers | Up to $32,631 |
<p>| Maintena                     |                      |                                    |                             |              |                                                                                           |                      |
| Olanzapine Pamoate Zyprexa   | ER powder for suspension Vial Kits - 210 mg, 300 mg, 405 mg | No Range: 1.0 mL (150 mg) to 2.7 mL (405 mg [150mg/mL] | IM Gluteal 19G, 1.5-inch needle | No           | Reconstituted suspension may be stored at room temperature and used within 24 hours. Shake vigorously to resuspend prior to use | Up to $27,294 |
| Relprevv®                    |                      |                                    |                             |              |                                                                                           |                      |</p>
<table>
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<tr>
<th>Generic Brand</th>
<th>Dosage Form/Strength</th>
<th>Requires Adding Diluent/inj volume</th>
<th>Injection Type/Sites Needle gauge &amp; Length</th>
<th>Refrigerated</th>
<th>Administration/Comments</th>
<th>Cost per 12 months *</th>
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</table>
| **Paliperidone palmitate**<br> *Invega Halnyera®* | Injectable suspension 1092 mg, 1560 mg | No<br>3.5 mL: 1092 mg<br>5 mL: 1560 mg | IM Gluteal<br>20G, 1.5-inch | No | ▪ Shake syringe VERY FAST for at least 15 seconds, rest briefly & shake again for 15 seconds  
▪ Administer within 5 minutes using the needles provided in the kit  
▪ Inject slowly (~30 seconds) as a single injection deep into the gluteal muscle | Up to $39,833 |
| **Paliperidone palmitate**<br> *Invega Sustenna®* | Injectable suspension 39 mg, 78 mg, 117 mg, 156 mg, 234 mg | No<br>Range: 0.25 mL (39 mg) to 1.5 mL (234 mg) [156 mg/mL] | IM Load: Deltoid only<br>Maintenance: Deltoid or gluteal<br>22G, 1.5-inch<br>23G, 1-inch | No | ▪ Shake syringe vigorously for at least 10 seconds and select appropriate needle  
-- For deltoid inj, use 1-inch 23G needle for pts < 90 kg or 1½-inch 22G needle for pts ≥ 90 kg  
-- For gluteal inj, use 1½-inch 22G needle regardless of weight | Up to $40,177 |
| **Paliperidone palmitate**<br> *Invega Trinza®* | Injectable suspension 273 mg, 410 mg, 546 mg, 819 mg | No<br>Range 0.9 mL (273 mg) to 2.6 mL (819 mg) [312 mg/mL] | IM Deltoid or gluteal<br>22G, 1 or 1.5-inch | No | ▪ Shake syringe vigorously for at least 15 seconds within 5 minutes prior to use  
▪ Administer using only the needles provided in the kit | Up to $40,177 |
| **Risperidonecers**<br> *Perseris®* | Syringe kits: 90mg, 120 mg | Yes<br>0.6 mL (90 mg)<br>0.8 mL (120 mg) | Subcutaneous<br>Abdomen or back of the upper arm<br>18G, 5/8-inch | Yes | ▪ Constitute by coupling the liquid & powder syringes & passing the contents back & forth between the syringes. Incorrectly mixed medication could result in incorrect dosage  
▪ Administer using the prepackaged syringe | Up to $33,130 |
| **Risperidone**<br> *Consta®* | Vial kits: 12.5 mg, 25 mg, 37.5 mg, 50 mg | Yes<br>~ 2 mL | IM Deltoid or gluteal<br>20G, 2-inch<br>21G, 1-inch | Yes | Administer deep IM injection into deltoid or upper outer gluteal muscle using the provided needle. Alternate between both arms or buttocks | Up to $28,150 |
| **Risperidone**<br> *Rykindo®* | Kit with vial & pre-filled diluent in a syringe 12.5mg, 25mg, 37.5mg & 50mg | Yes<br>~ 2 mL | IM Gluteal<br>20G, 2-inch | Yes | Let kit reach room temperature for at least 30 minutes before use. Shake vigorously for at least 30 seconds after injecting diluent for uniform suspension. Resuspend by shaking vigorously for 20 to 30 seconds just before injection | Not available |
| **Risperidone**<br> *Uzedy®* | Suspension Prefilled Syringe 50 mg, 75 mg, 100 mg, 125 mg, 150 mg, 200 mg, 250 mg | No<br>Range: 0.14 mL (50 mg) to 0.7 mL (250 mg) | Subcutaneous<br>Abdomen or upper arm<br>21G, 5/8-inch | Yes | Administer by SQ injection in the abdomen or upper arm by a healthcare professional  
Let the injection reach room temperature for at least 30 minutes before use  
Therapeutic concentrations attained within 6 to 24 hours after the first injection | Up to $36,960 |

*RxNova accessed 6/8/2023 for FDB WAC pricing*
BHRS Indigent and CareAdvantage (HPSM) effective July 1, 2023

PA requirement removed for: Abilify Maintena, Aristada ER, Aristada Initio, Invega Sustenna, Invega Trinza, Perseris, Risperdal Consta
PA requirement remains for: Invega Hafyera, Zyprexa Zelprev

State MediCal through DHCS/Magellan

PA required for all antipsychotic LAIs

Formulary Recommendation Abilify Asimtufii

Add to BHRS, CareAdvantage, and HealthWorx formulary with PA criteria:
Indication—FDA approved diagnoses
Age—Adults
Documentation—
Patient has tried and failed oral antipsychotic therapy Or
Transferred from hospital/facility/another provider stabilized on this medication
Quantity Limit --
   #1/60DS for 760mg and 960mg

Formulary Recommendation For Uzedy

Add to BHRS, CareAdvantage, and HealthWorx formulary with PA criteria:
Indication—FDA approved diagnoses
Age—Adults
Documentation—
Patient has tried and failed oral antipsychotic therapy Or
Transferred from hospital/facility/another provider stabilized on this medication
Quantity Limit --
   #1/30DS for 50mg, 75mg, 100mg, 125mg
   #1/60DS for 150mg, 200mg, 250mg