





## FLORIDA MEDICAID PRIOR AUTHORIZATION Antidepressant < 6 years

Note: Form must be completed in full. An incomplete form may be returned.

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### Review Criteria:

- The most current antidepressant prior authorization request form is required for review.
- All relevant sections of the antidepressant prior authorization form must be complete.
- The evaluation and progress notes must document target symptoms and behaviors.

### Clinical Notes:

- Psychosocial treatments (e.g., dyadic therapy) must precede the use of psychotherapeutic medications and should continue if medications are prescribed.
- Risks and benefits should be carefully considered before prescribing an antidepressant.
- When discontinuing antidepressant medication prescribed for depression or anxiety, gradually taper down the dose to prevent discontinuation syndrome.

### Calculation of BMI and BMI Percentile:

The Centers for Disease Control and Prevention (CDC) provides a ***BMI Calculator for Children and Teens*** that may be accessed at the following link: <http://apps.nccd.cdc.gov/dnpabmi/Calculator.aspx?CalculatorType=Metric>

### Florida Medicaid Clinical Guidelines:

- Access the *Principles of Practice* for children younger than 6 years of age at: <http://medicaidmentalhealth.org/ViewGuideline.cfm?GuidelineID=32>
- Access the complete *Florida Medicaid Psychotherapeutic Medication Treatment Guidelines* on the Web at: <http://medicaidmentalhealth.org/>

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