

# Pharmacy Drug Policy Checklist

**POLICY NAME**

Quillichew (methylphenidate HCl chew tab) ER

**POLICY #**

2471P

## Criteria

### Coverage Criteria

- ☐ 1.1 Member aged 6 to 12 years of age
- ☐ 1.2 Provider can submit medical chart documentation of inability to swallow tablets in members older than