

Texas Prior Authorization Program
Clinical Criteria

Drug/Drug Class

Antipsychotic Agents

Clinical Criteria Information Included in this Document

Cobenfy (xanomeline and trospium chloride)

- [Drugs requiring prior authorization](#): the list of drugs requiring prior authorization for this clinical criteria
- [Prior authorization criteria logic](#): a description of how the prior authorization request will be evaluated against the clinical criteria rules
- [Logic diagram](#): a visual depiction of the clinical criteria logic
- [Supporting tables](#): a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes); provided when applicable
- [References](#): clinical publications and sources relevant to this clinical criteria

Note: Click the hyperlink to navigate directly to that section.

Revision Notes

Initial publication and presentation to the DUR Board



**Cobefy (xanomeline
and trospium chloride)**
Drugs Requiring Prior Authorization

The listed GCNs may not be an indication of TX Medicaid Formulary coverage. To learn the current formulary coverage, visit txvendordrug.com/formulary/formulary-search.

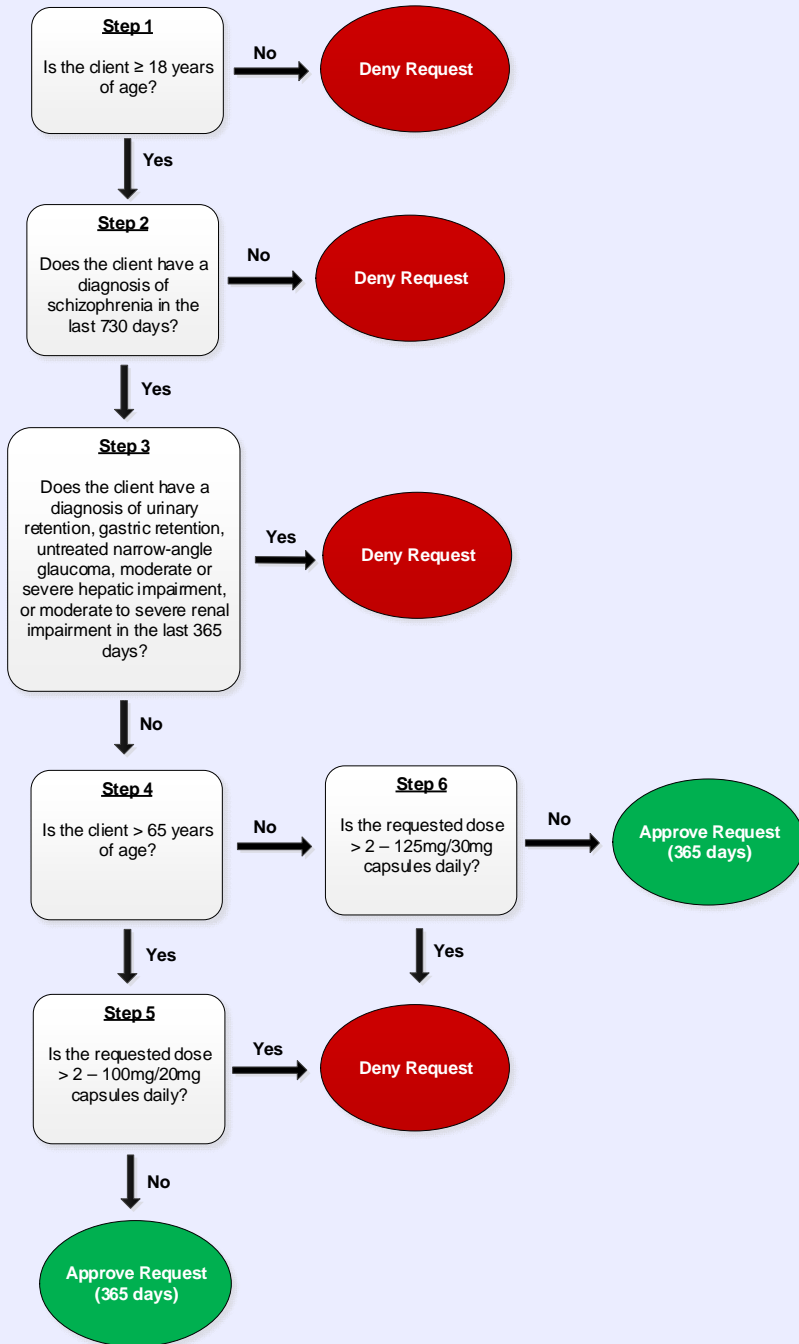
Drugs Requiring Prior Authorization	
Label Name	GCN
COBENFY 50 MG-20 MG CAPSULE	56278
COBENFY 100 MG-20 MG CAPSULE	56276
COBENFY 125 MG-30 MG CAPSULE	56271
COBENFY STARTER PACK	56277

The logo for PAXPRESS, featuring the word "PAXPRESS" in a stylized, serif font with a trademark symbol.**Cobenfy (xanomeline
and trospium chloride)****Clinical Criteria Logic**

1. Is the client greater than or equal to (\geq) 18 years of age?
 Yes - Go to #2
 No - Deny
2. Does the client have a diagnosis of [schizophrenia](#) in the last 730 days?
 Yes - Go to #3
 No - Deny
3. Does the client have a diagnosis of [urinary retention, gastric retention, untreated narrow-angle glaucoma, moderate or severe hepatic impairment, or moderate to severe renal impairment](#) in the last 365 days?
 Yes - Deny
 No - Go to #4
4. Is the client greater than ($>$) 65 years of age?
 Yes - Go to #5
 No - Go to #6
5. Is the requested dose greater than ($>$) 2 - 100mg/20mg capsules daily?
 Yes - Deny
 No - Approve (365 days)
6. Is the requested dose greater than ($>$) 2 - 125mg/30mg capsules daily?
 Yes - Deny
 No - Approve (365 days)



Cobenfy (xanomeline and trospium chloride)
Clinical Criteria Diagram





**Cobenfy (xanomeline
and trospium chloride)**
Clinical Criteria Supporting Tables

Schizophrenia	
ICD-10 Code	Description
F200	PARANOID SCHIZOPHRENIA
F201	DISORGANIZED SCHIZOPHRENIA
F202	CATATONIC SCHIZOPHRENIA
F203	UNDIFFERENTIATED SCHIZOPHRENIA
F205	RESIDUAL SCHIZOPHRENIA
F2081	SCHIZOPHRENIFORM DISORDER
F2089	OTHER SCHIZOPHRENIA
F209	SCHIZOPHRENIA, UNSPECIFIED
F21	SCHIZOTYPAL DISORDER

Urinary Retention, Gastric Retention, Untreated Narrow-Angle Glaucoma, Moderate to Severe Hepatic Impairment, or Moderate to Severe Renal Impairment	
ICD-10 Code	Description
B180	CHRONIC VIRAL HEPATITIS B WITH DELTA-AGENT
B181	CHRONIC VIRAL HEPATITIS B WITHOUT DELTA-AGENT
B182	CHRONIC VIRAL HEPATITIS C
B188	OTHER CHRONIC VIRAL HEPATITIS
B189	CHRONIC VIRAL HEPATITIS, UNSPECIFIED
B190	UNSPECIFIED VIRAL HEPATITIS WITH HEPATIC COMA
B1910	UNSPECIFIED VIRAL HEPATITIS B WITHOUT HEPATIC COMA
B1911	UNSPECIFIED VIRAL HEPATITIS B WITH HEPATIC COMA

Urinary Retention, Gastric Retention, Untreated Narrow-Angle Glaucoma, Moderate to Severe Hepatic Impairment, or Moderate to Severe Renal Impairment	
ICD-10 Code	Description
B1920	UNSPECIFIED VIRAL HEPATITIS C WITHOUT HEPATIC COMA
B1921	UNSPECIFIED VIRAL HEPATITIS C WITH HEPATIC COMA
B199	UNSPECIFIED VIRAL HEPATITIS WITHOUT HEPATIC COMA
H40031	ANATOMICAL NARROW ANGLE, RIGHT EYE
H40032	ANATOMICAL NARROW ANGLE, LEFT EYE
H40033	ANATOMICAL NARROW ANGLE, BILATERAL
H40039	ANATOMICAL NARROW ANGLE, UNSPECIFIED EYE
H4020X1	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, MILD STAGE
H4020X2	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, MODERATE STAGE
H4020X3	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, SEVERE STAGE
H4020X4	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, INDETERMINATE STAGE
H4020XO	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, STAGE UNSPECIFIED
H40219	ACUTE ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE
H402210	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE; STAGE UNSPECIFIED
H402211	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE; MILD STAGE
H402212	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE; MODERATE STAGE
H402213	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE; SEVERE STAGE
H402214	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE; INDETERMINATE STAGE
H402220	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE; STAGE UNSPECIFIED

Urinary Retention, Gastric Retention, Untreated Narrow-Angle Glaucoma, Moderate to Severe Hepatic Impairment, or Moderate to Severe Renal Impairment	
ICD-10 Code	Description
H402221	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE; MILD STAGE
H402222	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE; MODERATE STAGE
H402223	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE; SEVERE STAGE
H402224	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE; INDETERMINATE STAGE
H402230	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL; STAGE UNSPECIFIED
H402231	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL; MILD STAGE
H402232	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL; MODERATE STAGE
H402233	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL; SEVERE STAGE
H402234	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL; INDETERMINATE STAGE
H402290	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE; STAGE UNSPECIFIED
H402291	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE; MILD STAGE
H402292	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE; MODERATE STAGE
H402293	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE; SEVERE STAGE
H402294	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE; INDETERMINATE STAGE
H40231	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, RIGHT EYE
H40232	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, LEFT EYE
H40233	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, BILATERAL
H40239	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE

Urinary Retention, Gastric Retention, Untreated Narrow-Angle Glaucoma, Moderate to Severe Hepatic Impairment, or Moderate to Severe Renal Impairment	
ICD-10 Code	Description
H40241	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, RIGHT EYE
H40242	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, LEFT EYE
H40243	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, BILATERAL
H40249	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE
K3184	GASTROPARESIS
K700	ALCOHOLIC FATTY LIVER
K7010	ALCOHOLIC HEPATITIS WITHOUT ASCITES
K7011	ALCOHOLIC HEPATITIS WITH ASCITES
K702	ALCOHOLIC FIBROSIS AND SCLEROSIS OF LIVER
K7030	ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES
K7031	ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES
K7040	ALCOHOLIC HEPATIC FAILURE WITHOUT COMA
K7041	ALCOHOLIC HEPATIC FAILURE WITH COMA
K709	ALCOHOLIC LIVER DISEASE, UNSPECIFIED
K710	TOXIC LIVER DISEASE WITH CHOLESTASIS
K7110	TOXIC LIVER DISEASE WITH HEPATIC NECROSIS WITHOUT COMA
K7111	TOXIC LIVER DISEASE WITH HEPATIC NECROSIS WITH COMA
K712	TOXIC LIVER DISEASE WITH ACUTE HEPATITIS
K713	TOXIC LIVER DISEASE WITH CHRONIC PERSISTENT HEPATITIS
K714	TOXIC LIVER DISEASE WITH CHRONIC LOBULAR HEPATITIS
K7150	TOXIC LIVER DISEASE WITH CHRONIC ACTIVE HEPATITIS WITHOUT ASCITES
K7151	TOXIC LIVER DISEASE WITH CHRONIC ACTIVE HEPATITIS WITH ASCITES

Urinary Retention, Gastric Retention, Untreated Narrow-Angle Glaucoma, Moderate to Severe Hepatic Impairment, or Moderate to Severe Renal Impairment	
ICD-10 Code	Description
K716	TOXIC LIVER DISEASE WITH HEPATITIS, NOT ELSEWHERE CLASSIFIED
K717	TOXIC LIVER DISEASE WITH FIBROSIS AND CIRRHOSIS OF LIVER
K718	TOXIC LIVER DISEASE WITH OTHER DISORDERS OF LIVER
K719	TOXIC LIVER DISEASE, UNSPECIFIED
K7200	ACUTE AND SUBACUTE HEPATIC FAILURE WITHOUT COMA
K7201	ACUTE AND SUBACUTE HEPATIC FAILURE WITH COMA
K7210	CHRONIC HEPATIC FAILURE WITHOUT COMA
K7211	CHRONIC HEPATIC FAILURE WITH COMA
K7290	HEPATIC FAILURE, UNSPECIFIED WITHOUT COMA
K7291	HEPATIC FAILURE, UNSPECIFIED WITH COMA
K730	CHRONIC PERSISTENT HEPATITIS, NOT ELSEWHERE CLASSIFIED
K731	CHRONIC LOBULAR HEPATITIS, NOT ELSEWHERE CLASSIFIED
K732	CHRONIC ACTIVE HEPATITIS, NOT ELSEWHERE CLASSIFIED
K738	OTHER CHRONIC HEPATITIS, NOT ELSEWHERE CLASSIFIED
K739	CHRONIC HEPATITIS, UNSPECIFIED
K740	HEPATIC FIBROSIS
K741	HEPATIC SCLEROSIS
K742	HEPATIC FIBROSIS WITH HEPATIC SCLEROSIS
K743	PRIMARY BILIARY CIRRHOSIS
K744	SECONDARY BILIARY CIRRHOSIS
K745	BILIARY CIRRHOSIS, UNSPECIFIED
K7460	UNSPECIFIED CIRRHOSIS OF LIVER
K7469	OTHER CIRRHOSIS OF LIVER

Urinary Retention, Gastric Retention, Untreated Narrow-Angle Glaucoma, Moderate to Severe Hepatic Impairment, or Moderate to Severe Renal Impairment	
ICD-10 Code	Description
K7589	OTHER SPECIFIED INFLAMMATORY LIVER DISEASES
N1830	CHRONIC KIDNEY DISEASE, STAGE 3 UNSPECIFIED (eGFR 59-30 mL/min)
N1831	CHRONIC KIDNEY DISEASE, STAGE 3A (eGFR 59-45 mL/min)
N1832	CHRONIC KIDNEY DISEASE, STAGE 3B (eGFR 44-30 mL/min)
N184	CHRONIC KIDNEY DISEASE, STAGE 4 (SEVERE) (eGFR 29-15 mL/min)
N185	CHRONIC KIDNEY DISEASE, STAGE 5 (eGFR < 15 mL/min)
N186	END STAGE RENAL DISEASE
R330	DRUG INDUCED RETENTION OF URINE
R338	OTHER RETENTION OF URINE
R339	RETENTION OF URINE, UNSPECIFIED

The logo for PAXPRESS, featuring the word "PAXPRESS" in a stylized, serif font with a trademark symbol. The letters are blue and grey.**Cobenfy (xanomeline
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1. Clinical Pharmacology [online database]. Tampa, FL: Elsevier/Gold Standard, Inc.; 2025. Available at www.clinicalpharmacology.com. Accessed on January 31, 2025.
2. Micromedex [online database]. Available at www.micromedexsolutions.com. Accessed on January 31, 2025.
3. Cobenfy Prescribing Information. Princeton, NJ. Bristol-Myers Squibb. September 2024.

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Publication History

The Publication History records the publication iterations and revisions to this document. Notes for the *most current revision* are also provided in the [Revision Notes](#) on the first page of this document.

Publication Date	Notes
01/31/2025	<ul style="list-style-type: none">Initial publication and presentation to the DUR Board