



Plan Year 2017

C and O Employees' Hospital Association Medicare Part D Prescription Drug Plan

Step Therapy Criteria (ST)

Step Therapy: In some cases, C and O Employees' Hospital Association Medicare Part D Prescription Drug Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, C and O Employees' Hospital Association Medicare Part D Prescription Drug Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, C and O Employees' Hospital Association Medicare Part D Prescription Drug Plan will then cover Drug B.

**PLEASE READ:
THIS DOCUMENT CONTAINS INFORMATION ABOUT OUR STEP THERAPY CRITERIA.**

The COEHA has a contract with the Federal Government to provide our members with an enhanced Medicare Part D Prescription Drug Plan. Enrollment in C and O Employees' Hospital Association Medicare Part D Prescription Drug Plan depends upon contract renewal.

Last updated 08/01/2017

C and O Employees' Hospital Association Medicare Part D Prescription Drug Plan

Step Therapy Criteria
Last Updated 8/1/2017

Products Affected

APLENZIN 174MG ER TAB

Details

Criteria Step Therapy requires trial of bupropion SR or bupropion XL in previous 180 days.

Products Affected

APLENZIN 348MG ER TAB

Details

Criteria Step Therapy requires trial of bupropion SR or bupropion XL in previous 180 days.

Products Affected

APLENZIN 522MG ER TAB

Details

Criteria	Step Therapy requires trial of bupropion SR or bupropion XL in previous 180 days.
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Products Affected

ARANESP 100MCG/0.5ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 100MCG/ML INJ

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 10MCG/0.4ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARANESP 150MCG/0.3ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 200MCG/0.4ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARANESP 200MCG/ML INJ

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 25MCG/0.42ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 25MCG/ML INJ

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARANESP 300MCG/0.6ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 300MCG/ML INJ

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARANESP 40MCG/0.4ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARANESP 40MCG/ML INJ

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARANESP 500MCG/ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 60MCG/0.3ML SYRINGE

Details

Criteria Step Therapy requires trial of PROCRIT or EPOGEN

Products Affected

ARANESP 60MCG/ML INJ

Details

Criteria Step Therapy requires trial of PROCIT or EPOGEN

Products Affected

ARICEPT 23MG TAB

Details

Criteria Step Therapy requires trial of donepezil 10mg in previous 180 days.

Products Affected

BECONASE 42MCG NASAL INHALER

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

BESIVANCE 0.6% OPHTH SUSP

Details

Criteria	Step Therapy requires trial of one of the following ciprofloxacin, levofloxacin, ofloxacin, VIGAMOX or MOXEZA in previous 180 days.
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Products Affected

budesonide 32mcg nasal inhaler

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

darifenacin 15mg er tab

Details

Criteria Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.

Products Affected

darifenacin 7.5mg er tab

Details

Criteria	Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.
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Products Affected

DESVENLAFAXINE 100MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

DESVENLAFAXINE 50MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

DEXILANT 30MG DR CAP

Details

Criteria Step Therapy requires trial of rabeprazole, omeprazole, lansoprazole or pantoprazole in previous 180 days.

Products Affected

DEXILANT 60MG DR CAP

Details

Criteria Step Therapy requires trial of rabeprazole, omeprazole, lansoprazole or pantoprazole in previous 180 days.

Products Affected

DIFICID 200MG TAB

Details

Criteria Step Therapy requires trial of vancomycin.

Products Affected

donepezil 23mg tab

Details

Criteria Step Therapy requires trial of donepezil 10mg in previous 180 days.

Products Affected

DULOXETINE 40MG DR CAP

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

ENABLEX 15MG ER TAB

Details

Criteria	Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.
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Products Affected

ENABLEX 7.5MG ER TAB

Details

Criteria	Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.
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Products Affected

EPINEPHRINE 1 MG/ML (0.15ML) AUTO-INJECTOR

Details

Criteria Step Therapy requires trial of EPIPEN or EPINEPHRINE 0.15MG/0.3ML AUTO-INJECTOR in previous 180 days.

Products Affected

EPINEPHRINE 1 MG/ML (0.3ML) AUTO-INJECTOR

Details

Criteria Step Therapy requires trial of EPIPEN or EPINEPHRINE 0.15MG/0.3ML AUTO-INJECTOR in previous 180 days.

Products Affected

EXTAVIA 0.3MG INJ

Details

Criteria Step Therapy requires trial of two of the following: COPAXONE, AVONEX, or PLEGRIDY.

Products Affected

FETZIMA 120MG ER CAP

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA 20MG ER CAP

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA 40MG ER CAP

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA 80MG ER CAP

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA PACK

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

fluvoxamine maleate 100mg er cap

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

fluvoxamine maleate 150mg er cap

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

gatifloxacin 0.5% ophth soln

Details

Criteria Step Therapy requires trial of one of the following ciprofloxacin, levofloxacin, ofloxacin, VIGAMOX or MOXEZA in previous 180 days.

Products Affected

KHEDEZLA 100MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

KHEDEZLA 50MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

LEVALBUTEROL 45MCG INH

Details

Criteria Step Therapy requires trial of VENTOLIN HFA in previous 180 days.

Products Affected

lidocaine 5% ointment

Details

Criteria Step Therapy Requires Trial of lidocaine gel/jelly in previous 180 days.

Products Affected

METROGEL 1% GEL

Details

Criteria Step Therapy requires trial of FINACEA.

Products Affected

mometasone 50mcg nasal spray

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

NAMZARIC 10-21MG ER CAP

Details

Criteria Patient has tried or was intolerant to donepezil and memantine.

Products Affected

NAMZARIC 10-7MG ER CAP

Details

Criteria Patient has tried or was intolerant to donepezil and memantine.

Products Affected

NAMZARIC 14-10MG ER CAP

Details

Criteria Patient has tried or was intolerant to donepezil and memantine.

Products Affected

NAMZARIC 28-10MG ER CAP

Details

Criteria Patient has tried or was intolerant to donepezil and memantine.

Products Affected

NAMZARIC TITRATION PACK

Details

Criteria Patient has tried or was intolerant to donepezil and memantine.

Products Affected

NASONEX 50MCG NASAL SPRAY

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

NORITATE 1% CREAM

Details

Criteria Step Therapy requires trial of FINACEA.

Products Affected

OMNARIS 50MCG NASAL INHALER

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

OXYTROL 3.9MG/24HR PATCH

Details

Criteria Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.

Products Affected

PANCREAZE 10500-25000-43750UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

PANCREAZE 16800-40000-70000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

PANCREAZE 21000-37000-61000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

PANCREAZE 2600-6200-10850UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

PANCREAZE 4200-10000-17500UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

PATADAY 0.2% OPHTH SOLN

Details

Criteria Step Therapy requires trial of generic olopatadine ophthalmic solution.

Products Affected

PENTASA 250MG ER CAP

Details

Criteria Step Therapy requires trial of one of the following ASACOL, DELZICOL or LIALDA in previous 180 days.

Products Affected

PENTASA 500MG ER CAP

Details

Criteria Step Therapy requires trial of one of the following ASACOL, DELZICOL or LIALDA in previous 180 days.

Products Affected

PEXEVA 10MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

PEXEVA 20MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

PEXEVA 30MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

PEXEVA 40MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

PRISTIQ 100MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

PRISTIQ 25MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

PRISTIQ 50MG ER TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

QNASL 40MCG NASAL INHALER

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

QNASL 80MCG NASAL INHALER

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

RYTARY 23.75-95MG ER CAP

Details

Criteria Step Therapy requires trial of carbidopa/levodopa ER tab.

Products Affected

RYTARY 36.25-145MG ER CAP

Details

Criteria Step Therapy requires trial of carbidopa/levodopa ER tab.

Products Affected

RYTARY 48.75-195MG ER CAP

Details

Criteria Step Therapy requires trial of carbidopa/levodopa ER tab.

Products Affected

RYTARY 61.25-245MG ER CAP

Details

Criteria Step Therapy requires trial of carbidopa/levodopa ER tab.

Products Affected

TOVIAZ 4MG ER TAB

Details

Criteria	Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.
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Products Affected

TOVIAZ 8MG ER TAB

Details

Criteria Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.

Products Affected

TRINTELLIX 10MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

TRINTELLIX 20MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

TRINTELLIX 5MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

ULORIC 40MG TAB

Details

Criteria Step Therapy requires trial of allopurinol in previous 180 days.

Products Affected

ULORIC 80MG TAB

Details

Criteria Step Therapy requires trial of allopurinol in previous 180 days.

Products Affected

URECHOLINE 10MG TAB

Details

Criteria Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.

Products Affected

URECHOLINE 25MG TAB

Details

Criteria Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.

Products Affected

URECHOLINE 50MG TAB

Details

Criteria	Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.
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Products Affected

URECHOLINE 5MG TAB

Details

Criteria	Step Therapy requires trial of Vesicare OR Myrbetriq in previous 180 days. If request for bethanechol, step not required for the treatment of acute postoperative and postpartum nonobstructive (functional) urinary retention and for neurogenic atony of the urinary bladder with retention.
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Products Affected
VANCOCIN 125MG CAP

Details

Criteria	Step Therapy requires trial of metronidazole in previous 180 days. If for C. difficile-associate diarrhea, step therapy not required if for severe or complicated disease.
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Products Affected
VANCOCIN 250MG CAP

Details

Criteria Step Therapy requires trial of metronidazole in previous 180 days. If for C. difficile-associate diarrhea, step therapy not required if for severe or complicated disease.

Products Affected

vancomycin 125mg cap

Details

Criteria	Step Therapy requires trial of metronidazole in previous 180 days. If for C. difficile-associate diarrhea, step therapy not required if for severe or complicated disease.
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Products Affected

vancomycin 250mg cap

Details

Criteria	Step Therapy requires trial of metronidazole in previous 180 days. If for C. difficile-associate diarrhea, step therapy not required if for severe or complicated disease.
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Products Affected

VIIIBRYD 10/20MG STARTER PACK

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

VIIBRYD 10MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

VIIIBRYD 20MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

VIIBRYD 40MG TAB

Details

Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

XOPENEX 45MCG INH

Details

Criteria Step Therapy requires trial of VENTOLIN HFA in previous 180 days.

Products Affected

ZENPEP 10000-34000-55000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZENPEP 15000-51000-82000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZENPEP 20000-68000-109000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZENPEP 25000-85000-136000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZENPEP 3000-10000-16000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZENPEP 40000-136000-218000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZENPEP 5000-17000-27000UNIT DR CAP

Details

Criteria Step Therapy requires trial of CREON in previous 180 days.

Products Affected

ZETONNA 37MCG NASAL INHALER

Details

Criteria Step Therapy requires trial of TWO (2) formulary generic Nasal Corticosteroids. If for nasal polyps, step therapy not required for BECONASE AQ or mometasone. If for prophylaxis of seasonal allergic rhinitis, step therapy not required for mometasone. If for seasonal and perennial vasomotor nonallergic rhinitis, trial of fluticasone only required for BECONASE AQ.

Products Affected

ZIOPTAN 0.0015% OPHTH SOLN

Details

Criteria Step Therapy requires trial of latanoprost.

Products Affected

ZYMAXID 0.5% OPHTH SOLN

Details

Criteria	Step Therapy requires trial of one of the following ciprofloxacin, levofloxacin, ofloxacin, VIGAMOX or MOXEZA in previous 180 days.
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