

2024 AmeriHealth Caritas VIP Care DE DSNP

2024 Step Therapy Criteria

CURRENT AS OF 06/01/2024

anticonvulsant step therapy

Products Affected

- FYCOMPA SUSPENSION 0.5 MG/ML ORAL
- FYCOMPA TABLET 10 MG ORAL
- FYCOMPA TABLET 12 MG ORAL
- FYCOMPA TABLET 2 MG ORAL
- FYCOMPA TABLET 4 MG ORAL
- FYCOMPA TABLET 6 MG ORAL
- FYCOMPA TABLET 8 MG ORAL
- SPRITAM TABLET DISINTEGRATING SOLUBLE 1000 MG ORAL
- SPRITAM TABLET DISINTEGRATING SOLUBLE 250 MG ORAL
- SPRITAM TABLET DISINTEGRATING SOLUBLE 500 MG ORAL
- SPRITAM TABLET DISINTEGRATING SOLUBLE 750 MG ORAL
- SYMPAZAN FILM 10 MG ORAL
- SYMPAZAN FILM 20 MG ORAL
- SYMPAZAN FILM 5 MG ORAL
- XCOPRI (250 MG DAILY DOSE) TABLET THERAPY PACK 100 & 150 MG ORAL
- XCOPRI (350 MG DAILY DOSE) TABLET THERAPY PACK 150 & 200 MG ORAL
- XCOPRI TABLET 100 MG ORAL
- XCOPRI TABLET 150 MG ORAL
- XCOPRI TABLET 200 MG ORAL
- XCOPRI TABLET 25 MG ORAL
- XCOPRI TABLET 50 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 150 MG & 14 X200 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 50 MG & 14 X100 MG ORAL
- ZONISADE SUSPENSION 100 MG/5ML ORAL

Details

Criteria
Step 1: First line therapy should be a documented trial of two generic anticonvulsants. Step 2: Once two generic anticonvulsants have been tried, patients can receive therapy with Spritam, Sympazan, Xcopri, Fycompa or Zonisade.

Formulary ID 24425

Last Updated: 05/2024

antidepressant step therapy

Products Affected

- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 120 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 20 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 40 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 80 MG ORAL
- FETZIMA TITRATION CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG ORAL

Details

Criteria	Step 1: First line therapy should be a documented trial of two generic antidepressants. Step 2: Once two generic antidepressants have been tried, patient can receive therapy with Fetzima.
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brinzolamide step therapy

Products Affected

- *brinzolamide suspension 1 % ophthalmic*

Details

Criteria	Step 1: First line therapy should be a documented trial of formulary dorzolamide or dorzolamide/timolol. Step 2: Once dorzolamide or dorzolamide/timolol has been tried, the patient can receive therapy with brinzolamide.
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febuxostat step therapy

Products Affected

- *febuxostat tablet 40 mg oral*
- *febuxostat tablet 80 mg oral*

Details

Criteria	Step 1: First line therapy should be a documented trial of allopurinol tablet. Step 2: Once allopurinol tablet has been tried, patients can receive therapy with Febuxostat.
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glp-1 agonists

Products Affected

- MOUNJARO SOLUTION PEN-INJECTOR 10 MG/0.5ML SUBCUTANEOUS
- MOUNJARO SOLUTION PEN-INJECTOR 12.5 MG/0.5ML SUBCUTANEOUS
- MOUNJARO SOLUTION PEN-INJECTOR 15 MG/0.5ML SUBCUTANEOUS
- MOUNJARO SOLUTION PEN-INJECTOR 2.5 MG/0.5ML SUBCUTANEOUS
- MOUNJARO SOLUTION PEN-INJECTOR 5 MG/0.5ML SUBCUTANEOUS
- MOUNJARO SOLUTION PEN-INJECTOR 7.5 MG/0.5ML SUBCUTANEOUS
- OZEMPIC (0.25 OR 0.5 MG/DOSE) SOLUTION PEN-INJECTOR 2 MG/1.5ML SUBCUTANEOUS
- OZEMPIC (0.25 OR 0.5 MG/DOSE) SOLUTION PEN-INJECTOR 2 MG/3ML SUBCUTANEOUS
- OZEMPIC (1 MG/DOSE) SOLUTION PEN-INJECTOR 4 MG/3ML SUBCUTANEOUS
- OZEMPIC (2 MG/DOSE) SOLUTION PEN-INJECTOR 8 MG/3ML SUBCUTANEOUS
- RYBELSUS TABLET 14 MG ORAL
- RYBELSUS TABLET 3 MG ORAL
- RYBELSUS TABLET 7 MG ORAL
- TRULICITY SOLUTION PEN-INJECTOR 0.75 MG/0.5ML SUBCUTANEOUS
- TRULICITY SOLUTION PEN-INJECTOR 1.5 MG/0.5ML SUBCUTANEOUS
- TRULICITY SOLUTION PEN-INJECTOR 3 MG/0.5ML SUBCUTANEOUS
- TRULICITY SOLUTION PEN-INJECTOR 4.5 MG/0.5ML SUBCUTANEOUS
- VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS

Details

Criteria	Step 1: First line therapy should be a trial of at least one diabetic agent. Step 2: Once a diabetic agent has been tried, patients can receive therapy with Ozempic, Victoza, Trulicity, Rybelsus, or Mounjaro.
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netarsudil step therapy

Products Affected

- RHOPRESSA SOLUTION 0.02 %
OPHTHALMIC
- ROCKLATAN SOLUTION 0.02-0.005 %
OPHTHALMIC

Details

Criteria	Step 1: First line therapy should be a documented trial of latanoprost or travoprost. Step 2: Once latanoprost or travoprost has been tried, patients can receive therapy with Rhopressa or Rocklatan.
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ongentys step therapy

Products Affected

- ONGENTYS CAPSULE 25 MG ORAL
- ONGENTYS CAPSULE 50 MG ORAL

Details

Criteria	Step 1: First line therapy should be a documented trial of entacapone or carbidopa-levodopa-entacapone. Step 2: Once entacapone or carbidopa-levodopa-entacapone has been tried, patients can receive therapy with Ongentys.
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rivastigmine patch step therapy

Products Affected

- *rivastigmine patch 24 hour 13.3 mg/24hr transdermal*
- *rivastigmine patch 24 hour 9.5 mg/24hr transdermal*
- *rivastigmine patch 24 hour 4.6 mg/24hr transdermal*

Details

Criteria	Step 1: First line therapy should be a documented trial of rivastigmine capsule. Step 2: Once rivastigmine capsule has been tried, patients can receive therapy with rivastigmine patches.
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savella step therapy

Products Affected

- SAVELLA TABLET 100 MG ORAL
- SAVELLA TABLET 12.5 MG ORAL
- SAVELLA TABLET 25 MG ORAL
- SAVELLA TABLET 50 MG ORAL
- SAVELLA TITRATION PACK 12.5 & 25 & 50 MG ORAL

Details

Criteria	Step 1: First line therapy should be a documented trial of generic duloxetine. Step 2: Once generic duloxetine has been tried, patients can receive therapy with Savella.
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topical immunomodulators step therapy

Products Affected

- *pimecrolimus cream 1 % external*
- *tacrolimus ointment 0.03 % external*
- *tacrolimus ointment 0.1 % external*

Details

Criteria	Step 1: First line therapy should be a documented trial of two topical corticosteroids. Step 2: Once two topical corticosteroids have been tried, patients can receive therapy with generic pimecrolimus or generic topical tacrolimus.
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urinary incontinence agents step therapy

Products Affected

- *darifenacin hydrobromide er tablet extended release 24 hour 15 mg oral*
- *darifenacin hydrobromide er tablet extended release 24 hour 7.5 mg oral*
- *fesoterodine fumarate er tablet extended release 24 hour 4 mg oral*
- *fesoterodine fumarate er tablet extended release 24 hour 8 mg oral*
- *trospium chloride er capsule extended release 24 hour 60 mg oral*

Details

Criteria
Step 1: First line therapy should be a documented trial of oxybutynin, oxybutynin ER, trospium, tolterodine, tolterodine ER or solifenacin. Step 2: Once one of the medications listed in Step 1 have been tried, patients can receive therapy with trospium ER, darifenacin ER or fesoterodine ER

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FYCOMPA TABLET 4 MG ORAL..... 1
FYCOMPA TABLET 6 MG ORAL..... 1
FYCOMPA TABLET 8 MG ORAL..... 1

M

MOUNJARO SOLUTION PEN-INJECTOR
10 MG/0.5ML SUBCUTANEOUS 5
MOUNJARO SOLUTION PEN-INJECTOR
12.5 MG/0.5ML SUBCUTANEOUS 5
MOUNJARO SOLUTION PEN-INJECTOR
15 MG/0.5ML SUBCUTANEOUS 5
MOUNJARO SOLUTION PEN-INJECTOR
2.5 MG/0.5ML SUBCUTANEOUS 5
MOUNJARO SOLUTION PEN-INJECTOR
5 MG/0.5ML SUBCUTANEOUS 5

MOUNJARO SOLUTION PEN-INJECTOR
7.5 MG/0.5ML SUBCUTANEOUS 5

O

ONGENTYS CAPSULE 25 MG ORAL.... 7
ONGENTYS CAPSULE 50 MG ORAL.... 7
OZEMPIC (0.25 OR 0.5 MG/DOSE)
SOLUTION PEN-INJECTOR 2
MG/1.5ML SUBCUTANEOUS 5
OZEMPIC (0.25 OR 0.5 MG/DOSE)
SOLUTION PEN-INJECTOR 2
MG/3ML SUBCUTANEOUS 5
OZEMPIC (1 MG/DOSE) SOLUTION
PEN-INJECTOR 4 MG/3ML
SUBCUTANEOUS..... 5
OZEMPIC (2 MG/DOSE) SOLUTION
PEN-INJECTOR 8 MG/3ML
SUBCUTANEOUS..... 5

P

pimecrolimus cream 1 % external..... 10

R

RHOPRESSA SOLUTION 0.02 %
OPHTHALMIC 6
rivastigmine patch 24 hour 13.3 mg/24hr
transdermal..... 8
rivastigmine patch 24 hour 4.6 mg/24hr
transdermal..... 8
rivastigmine patch 24 hour 9.5 mg/24hr
transdermal..... 8
ROCKLATAN SOLUTION 0.02-0.005 %
OPHTHALMIC 6
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RYBELSUS TABLET 3 MG ORAL 5
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 SPRITAM TABLET DISINTEGRATING
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 1.5 MG/0.5ML SUBCUTANEOUS 5
 TRULICITY SOLUTION PEN-INJECTOR
 3 MG/0.5ML SUBCUTANEOUS 5
 TRULICITY SOLUTION PEN-INJECTOR
 4.5 MG/0.5ML SUBCUTANEOUS 5
V
 VICTOZA SOLUTION PEN-INJECTOR
 18 MG/3ML SUBCUTANEOUS 5

X
 XCOPRI (250 MG DAILY DOSE)
 TABLET THERAPY PACK 100 & 150
 MG ORAL 1
 XCOPRI (350 MG DAILY DOSE)
 TABLET THERAPY PACK 150 & 200
 MG ORAL 1
 XCOPRI TABLET 100 MG ORAL 1
 XCOPRI TABLET 150 MG ORAL 1
 XCOPRI TABLET 200 MG ORAL 1
 XCOPRI TABLET 25 MG ORAL 1
 XCOPRI TABLET 50 MG ORAL 1
 XCOPRI TABLET THERAPY PACK 14 X
 12.5 MG & 14 X 25 MG ORAL..... 1
 XCOPRI TABLET THERAPY PACK 14 X
 150 MG & 14 X200 MG ORAL..... 1
 XCOPRI TABLET THERAPY PACK 14 X
 50 MG & 14 X100 MG ORAL..... 1
Z
 ZONISADE SUSPENSION 100 MG/5ML
 ORAL..... 1