

Acyclovir Ointment

Products Affected

- *acyclovir ointment 5 % external*

Details

Criteria	Use of oral acyclovir or Abreva in the previous 130 days
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Adcirca

Products Affected

- *tadalafil (pah) tablet 20 mg oral*

Details

Criteria	Use of sildenafil for 30 days in previous 130 days
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Albenza

Products Affected

- *albendazole tablet 200 mg oral*

Details

Criteria	Requires use of pyrantel or ivermectin for at least 3 days. When ST therapy requirements are not met, the criteria in the PA guideline must be met for approval.
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Albuterol Nebulizers

Products Affected

- *albuterol sulfate nebulization solution 0.63 mg/3ml inhalation*
- *albuterol sulfate nebulization solution 1.25 mg/3ml inhalation*

Details

Criteria	Use of albuterol 0.083% in the previous 14 days. Patients < 18 years of age are not subject to ST.
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Atomoxetine

Products Affected

- *atomoxetine hcl capsule 10 mg oral*
- *atomoxetine hcl capsule 100 mg oral*
- *atomoxetine hcl capsule 18 mg oral*
- *atomoxetine hcl capsule 25 mg oral*
- *atomoxetine hcl capsule 40 mg oral*
- *atomoxetine hcl capsule 60 mg oral*
- *atomoxetine hcl capsule 80 mg oral*

Details

Criteria	Use of 2 formulary CNS stimulants for ADHD in the previous 90 days
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Auryxia

Products Affected

- **AURYXIA TABLET 1 GM 210 MG(Fe)**
ORAL

Details

Criteria	Requires use of sevelamer carbonate for 30 days within the previous 130 days.
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Azopt

Products Affected

- *brinzolamide suspension 1 % ophthalmic*

Details

Criteria	Use of dorzolamide or dorzolamide/timolol in the previous 130 days
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Bimatoprost

Products Affected

- *bimatoprost solution 0.03 % ophthalmic*

Details

Criteria	Use of latanoprost for 30 days in the previous 130 days
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Budesonide

Products Affected

- *budesonide capsule delayed release particles*
3 mg oral

Details

Criteria	Requires use of any two rectal steroids, intrarectal steroids, or inflammatory bowel agents for 30 days each (total of 60 days) within the previous 130 days.
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Candesartan

Products Affected

- *candesartan cilexetil tablet 16 mg oral*
- *candesartan cilexetil tablet 32 mg oral*
- *candesartan cilexetil tablet 4 mg oral*
- *candesartan cilexetil tablet 8 mg oral*
- *candesartan cilexetil-hctz tablet 16-12.5 mg oral*
- *candesartan cilexetil-hctz tablet 32-12.5 mg oral*
- *candesartan cilexetil-hctz tablet 32-25 mg oral*

Details

Criteria	Requires use of two formulary angiotensin II receptor blockers (ARBs) for 30 days within the previous 180 days.
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Celecoxib

Products Affected

- *celecoxib capsule 100 mg oral*
- *celecoxib capsule 200 mg oral*
- *celecoxib capsule 400 mg oral*
- *celecoxib capsule 50 mg oral*

Details

Criteria	Requires use of 3 different NSAID's. When ST therapy requirements are not met, the criteria in the PA guideline must be met for approval.
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Ciclopirox Shampoo

Products Affected

- *ciclopirox shampoo 1 % external*

Details

Criteria	Use of Ketoconazole Shampoo for 10 days within the previous 60 days.
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Ciclopirox Suspension/Cream

Products Affected

- *ciclopirox olamine cream 0.77 % external external*
- *ciclopirox olamine suspension 0.77 %*

Details

Criteria	Use of any one of the following for 10 days in the previous 60 days: OTC Clotrimazole Solution/Cream 1%, OTC Miconazole Cream/Ointment
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Clonidine Patches

Products Affected

- *clonidine patch weekly 0.1 mg/24hr*
transdermal
- *clonidine patch weekly 0.2 mg/24hr*
transdermal
- *clonidine patch weekly 0.3 mg/24hr*
transdermal

Details

Criteria	
	Use of clonidine tablets for at least 30 days within the past 130 days.

Clotrimazole (Rx)

Products Affected

- *clotrimazole cream 1 % external*

Details

Criteria	Use of OTC Clotrimazole Cream/Solution 1% for 10 days in the previous 60 days
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Combigan

Products Affected

- *brimonidine tartrate-timolol solution 0.2-0.5
% ophthalmic*

Details

Criteria	Use of 1 of the following for at least 15 days in the previous 130 days: Brimonidine Ophth Solution, Timolol Maleate Ophth Solution
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Dorzolamide-Timolol Ophthalmic Solution

Products Affected

- *dorzolamide hcl-timolol mal solution 22.3-6.8 mg/ml ophthalmic*

Details

Criteria	Use of ophthalmic beta blocker for 30 days for the previous 130 days
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Febuxostat

Products Affected

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

Details

Criteria	Use of allopurinol in the previous 130 days
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Fluvastatin

Products Affected

- *fluvastatin sodium capsule 20 mg oral*
- *fluvastatin sodium capsule 40 mg oral*

Details

Criteria	Requires use of two formulary statins for 60 days within the previous 180 days.
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GLP-1 Receptor Agonists

Products Affected

- **OZEMPIC (0.25 OR 0.5 MG/DOSE) SOLUTION PEN-INJECTOR 2 MG/1.5ML SUBCUTANEOUS**
- **OZEMPIC (1 MG/DOSE) SOLUTION PEN-INJECTOR 4 MG/3ML**
- **OZEMPIC (2 MG/DOSE) SOLUTION PEN-INJECTOR 8 MG/3ML SUBCUTANEOUS**

Details

Criteria	Use of metformin or combination metformin products for at least 60 days in the previous 130 days
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Granisetron

Products Affected

- *granisetron hcl tablet 1 mg oral*

Details

Criteria	Use of ondansetron for 30 days in the previous 130 days
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Griseofulvin

Products Affected

- *griseofulvin microsize suspension 125 mg/5ml oral*
- *griseofulvin microsize tablet 500 mg oral*
- *griseofulvin ultramicrosize tablet 125 mg*
- *griseofulvin ultramicrosize tablet 250 mg oral*

Details

Criteria	Use of any one: terbinafine tablets, ketoconazole tablets, fluconazole tablets/suspension, itraconazole capsules/solution for at least 7 days within the last 60 days. When step therapy requirements are not met, the criteria in the PA guideline must be met for approval.
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Isotretinoin

Products Affected

- **CLARAVIS CAPSULE 10 MG ORAL**
- **CLARAVIS CAPSULE 20 MG ORAL**
- **CLARAVIS CAPSULE 30 MG ORAL**
- **CLARAVIS CAPSULE 40 MG ORAL**
- *isotretinoin capsule 10 mg oral*
- *isotretinoin capsule 20 mg oral*
- *isotretinoin capsule 30 mg oral*
- *isotretinoin capsule 40 mg oral*
- **MYORISAN CAPSULE 10 MG ORAL**
- **MYORISAN CAPSULE 20 MG ORAL**
- **MYORISAN CAPSULE 30 MG ORAL**
- **MYORISAN CAPSULE 40 MG ORAL**
- **ZENATANE CAPSULE 10 MG ORAL**
- **ZENATANE CAPSULE 20 MG ORAL**
- **ZENATANE CAPSULE 30 MG ORAL**
- **ZENATANE CAPSULE 40 MG ORAL**

Details

Criteria	Use of doxycycline or minocycline for at least 30 days in the previous 130 days
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Ketoconazole Cream

Products Affected

- *ketoconazole cream 2 % external*

Details

Criteria	Use of any one of the following for 10 days in the previous 60 days: OTC Clotrimazole Solution/Cream 1%, OTC Miconazole Cream/Ointment, OTC Tolnaftate Cream 1%, OTC Terbinafine Cream 1%, OTC Butenafine Cream 1%
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Levalbuterol HFA

Products Affected

- *levalbuterol tartrate aerosol 45 mcg/act inhalation*

Details

Criteria	Use of albuterol HFA for at least 15 days in the past 130 days
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Lice/Scabicides

Products Affected

- *ivermectin lotion 0.5 % external*
- *malathion lotion 0.5 % external*
- *spinosad suspension 0.9 % external*

Details

Criteria	Use of permethrin or pyrethrin for 1 day in the previous 60 days
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Metronidazole Gel 1%

Products Affected

- *metronidazole gel 1 % external*

Details

Criteria	Requires use of metronidazole 0.75% gel for 60 days within the previous 130 days
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Naproxen Suspension

Products Affected

- *naproxen suspension 125 mg/5ml oral*

Details

Criteria	Use of ibuprofen suspension for 15 days within the previous 130 days
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Nasal Steroids

Products Affected

- *fluticasone propionate suspension 50 mcg/act nasal*

Details

Criteria	Use of 2 of the following agents in the previous 130 days: Flonase OTC, Rhinocort OTC, or Nasacort OTC
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Norethindrone

Products Affected

- *norethindrone acetate tablet 5 mg oral*

Details

Criteria	Use of medroxyprogesterone acetate tablets for 30 days in the previous 130 days.
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Ophthalmic antihistamines

Products Affected

- *azelastine hcl solution 0.05 % ophthalmic*

Details

Criteria	Use of ketotifen ophthalmic in the previous 130 days
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Overactive Bladder

Products Affected

- *solifenacin succinate tablet 10 mg oral*
- *solifenacin succinate tablet 5 mg oral*
- *tolterodine tartrate er capsule extended release 24 hour 2 mg oral*
- *tolterodine tartrate er capsule extended release 24 hour 4 mg oral*
- *tolterodine tartrate tablet 1 mg oral*
- *tolterodine tartrate tablet 2 mg oral*
- *trospium chloride er capsule extended release 24 hour 60 mg oral*
- *trospium chloride tablet 20 mg oral*

Details

Criteria	Use of oxybutynin IR/ER for at least 30 days within the previous 130 days.
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Paricalcitol

Products Affected

- *paricalcitol capsule 1 mcg oral*
- *paricalcitol capsule 2 mcg oral*
- *paricalcitol capsule 4 mcg oral*

Details

Criteria	Use of calcitriol in the previous 130 days
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Phosphate Binders

Products Affected

- *sevelamer carbonate tablet 800 mg oral*

Details

Criteria	Use of calcium acetate for at least 30 days within the previous 130 days.
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Ramelteon

Products Affected

- *ramelteon tablet 8 mg oral*

Details

Criteria	Use of zolpidem AND zaleplon in the previous 130 days
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Ribasphere

Products Affected

- *ribavirin capsule 200 mg oral*
- *ribavirin tablet 200 mg oral*

Details

Criteria	Paid claim for a direct-acting antiviral for Hepatitis C or Pegasys in the previous 5 days to assure that patients are taking ribavirin with other appropriate hepatitis C medications and not as monotherapy.
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Ropinirole ER

Products Affected

- *ropinirole hcl er tablet extended release 24 hour 12 mg oral*
- *ropinirole hcl er tablet extended release 24 hour 2 mg oral*
- *ropinirole hcl er tablet extended release 24 hour 4 mg oral*
- *ropinirole hcl er tablet extended release 24 hour 6 mg oral*
- *ropinirole hcl er tablet extended release 24 hour 8 mg oral*

Details

Criteria	Requires use of ropinirole IR for 30 days within the previous 130 days.
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Rosuvastatin

Products Affected

- *rosuvastatin calcium tablet 10 mg oral*
- *rosuvastatin calcium tablet 20 mg oral*
- *rosuvastatin calcium tablet 40 mg oral*
- *rosuvastatin calcium tablet 5 mg oral*

Details

Criteria	Use of atorvastatin for at least 60 days in the previous 130 days
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Savella

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	Use of duloxetine for at least 60 days in the previous 130 days
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SGLT2

Products Affected

- **SEGLUROMET TABLET 2.5-1000 MG ORAL**
- **SEGLUROMET TABLET 2.5-500 MG ORAL**
- **SEGLUROMET TABLET 7.5-1000 MG ORAL**
- **SEGLUROMET TABLET 7.5-500 MG ORAL**
- **STEGLATRO TABLET 15 MG ORAL**
- **STEGLATRO TABLET 5 MG ORAL**

Details

Criteria	Use of metformin or combination metformin products for at least 60 days in the previous 130 days
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Stiolto

Products Affected

- **STIOLTO RESPIMAT AEROSOL
SOLUTION 2.5-2.5 MCG/ACT
INHALATION**

Details

Criteria	Use of Incruse Ellipta in the previous 130 days
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Tazarotene

Products Affected

- *tazarotene cream 0.1 % external*

Details

Criteria	Use of topical corticosteroids for 30 days in the previous 130 days
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Timolol Gel

Products Affected

- *timolol maleate gel forming solution 0.25 % ophthalmic*
- *timolol maleate gel forming solution 0.5 % ophthalmic*

Details

Criteria	Use of Timolol Solution for 15 days in the previous 130 days
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Topical Calcineurin Inhibitors

Products Affected

- *tacrolimus ointment 0.03 % external*
- *tacrolimus ointment 0.1 % external*

Details

Criteria	Use of 2 different topical corticosteroids in the previous 130 days
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Topical Retinoids

Products Affected

- **AVITA CREAM 0.025 % EXTERNAL**
- **AVITA GEL 0.025 % EXTERNAL**
- *tretinoin cream 0.025 % external*
- *tretinoin cream 0.05 % external*
- *tretinoin cream 0.1 % external*
- *tretinoin gel 0.01 % external*
- *tretinoin gel 0.025 % external*

Details

Criteria	Use of OTC Differin 0.1% Gel in the previous 130 days
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Topical Steroids

Products Affected

- *clobetasol propionate cream 0.05 % external*
- *clobetasol propionate ointment 0.05 % external*
- *clobetasol propionate gel 0.05 % external*

Details

Criteria	Use of 1 of the following for at least 10 days within the past 60 days: AUG Betamethasone Dip Gel 0.05%, AUG Betamethasone Dip Lotion 0.05%, AUG Betamethasone Dip Ointment 0.05%, Halobetasol 0.05% Cream, Halobetasol 0.05% Ointment
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Trelegy Ellipta

Products Affected

- **TRELEGY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH INHALATION**
- **TRELEGY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 200-62.5-25 MCG/INH INHALATION**

Details

Criteria	Requires use of 2 formulary combination inhalers (ICS/LABA or LABA/LAMA) for 30 days within the previous 130 days.
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Trulicity

Products Affected

- **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**

Details

Criteria	Use of metformin or combination metformin products for at least 60 days in the previous 130 days
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