

ANTIDEPRESSANTS**Drug(s) Applied:**

APLENZIN; AUVELITY; DESVENLAFAXINE ER 50MG, 100MG (MSC M/N); EMSAM; FETZIMA; FETZIMA TITRATION PACK; KHEDEZLA; CITALOPRAM CAPSULE; SERTRALINE CAPSULE; VENLAFAXINE BESYLATE 112.5 MG TABLET

ST Criteria	Trial of two generics of the following formulary products: bupropion, mirtazapine, citalopram (tablet or solution), desvenlafaxine succinate ER, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline (tablet or solution), venlafaxine. Approve for continuation of prior therapy.
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ATYPICAL ANTIPSYCHOTICS**Drug(s) Applied:**

FANAPT; FANAPT TITRATION PACK; VRAYLAR; LYBALVI; SECUADO

ST Criteria	Trial of two of the following oral generic formulary atypical antipsychotic agents: asenapine, aripiprazole, olanzapine, paliperidone, quetiapine, risperidone, ziprasidone. Approve for continuation of prior therapy.
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GLUCAGON**Drug(s) Applied:**

GLUCAGEN; ZEGALOGUE

ST Criteria	Trial of one of the following: Gvoke, Baqsimi, or Glucagon.
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INHALED CORTICOSTEROID**Drug(s) Applied:**

ARMONAIR; ARMONAIR DIGIHALER; QVAR REDIHALER; PULMICORT

ST Criteria	Trial of Arnuity Ellipta and either Flovent Diskus or Flovent HFA.
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INVEGA HAFYERA THERAPY**Drug(s) Applied:**

INVEGA HAFYERA

ST Criteria	Trial of one of the following: Invega Sustenna or Invega Trinza. Step applies to new starts only. Approve for continuation of prior therapy.
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NAMZARIC**Drug(s) Applied:**

NAMZARIC

ST Criteria	Trial of generic memantine extended-release.
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NON-PREFERRED SGLT2S**Drug(s) Applied:**

SEGLUROMET; STEGLATRO; INVOKAMET; INVOKAMET XR; INVOKANA

ST Criteria	Trial of Farxiga or Xigduo XR, AND one of the following: Jardiance, Synjardy, Synjardy XR. Step requirements do not apply to members with type 2 diabetes with either diabetic nephropathy or established cardiovascular disease.
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PD AGENTS**Drug(s) Applied:**

NEUPRO

ST Criteria	Trial of one of the following generic formulary dopamine agonist agent: pramipexole, ropinirole.
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RELISTOR**Drug(s) Applied:**

RELISTOR (TABLET, INJECTION)

ST Criteria	Trial of lubiprostone or lactulose.
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RYTARY**Drug(s) Applied:**

RYTARY

ST Criteria	Trial of one generic carbidopa/levodopa containing formulation.
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ACTINIC KERATOSIS**Drug(s) Applied:**

PICATO; DICLOFENAC 3% GEL; KLISYRI

ST Criteria	Trial of either topical fluorouracil or topical imiquimod.
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STATINS**Drug(s) Applied:**

ALTOPREV; FLOLIPID; LIVALO; EZALLOR; SIMVASTATIN SUSP MSC M

ST Criteria	Trial of any one of the following generic formulary HMG-CoA reductase inhibitors (statin): atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
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GLP1 AGONISTS

Drug(s) Applied:

BYDUREON BCISE; BYDUREON PEN; VICTOZA; OZEMPIC; TRULICITY; BYETTA; RYBELSUS; SOLIQUA; MOUNJARO

ST Criteria	Trial of one of the following generic formulary metformin or metformin combinations: metformin, metformin ER, glipizide-metformin, glyburide-metformin, pioglitazone-metformin. Ozempic (semaglutide), Trulicity (dulaglutide), Victoza (liraglutide): Step requirements do not apply to members with type 2 diabetes and multiple cardiovascular risk factors or established cardiovascular disease.
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ZONISADE SUSPENSION**Drug(s) Applied:**

ZONISADE ORAL SUSPENSION

ST Criteria	Trial of generic zonisamide capsule. Step applies to new starts only. Approve for continuation of prior therapy.
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