

## Step Therapy Criteria

### PPI

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#### Products Affected

##### Step 2:

- DEXILANT CAPSULE DELAYED RELEASE 30 MG ORAL
- DEXILANT CAPSULE DELAYED RELEASE 60 MG ORAL

#### Details

<b>Criteria</b>	Claim will pay automatically for Dexilant if enrollee has a paid claim for at least a 1 days supply of step level 1 agent (lansoprazole, esomeprazole, omeprazole, pantoprazole, or rabeprazole) in the past. Otherwise, Dexilant requires a step therapy exception request indicating: (1) history of inadequate treatment response with step 1 agent, OR (2) history of adverse event with step 1 agent, OR (3) step 1 agent is contraindicated.
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## Step Therapy Criteria

### TRELEGY

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#### Products Affected

##### Step 2:

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

#### Details

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<b>Criteria</b>	Claim will pay automatically for Trelegy if enrollee has a paid claim for at least 1 day supply of Advair Diskus, Anoro Ellipta, Breo Ellipta, Serevent Diskus, Spiriva HandiHaler, or Spiriva Respimat in the past. Otherwise, Trelegy will require a step therapy exception request indicating: (1) history of inadequate treatment response with STEP 1 Agent, OR (2) history of adverse event with STEP 1 Agent, OR (3) STEP 1 Agent is contraindicated.
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## Step Therapy Criteria

### ULORIC

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#### Products Affected

##### Step 2:

- *febuxostat tablet 40 mg oral*
- *febuxostat tablet 80 mg oral*
- ULORIC TABLET 40 MG ORAL
- ULORIC TABLET 80 MG ORAL

#### Details

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Criteria	Claim will pay automatically for Uloric if enrollee has a paid claim for at least a 1 days supply of Allopurinol in the past. Otherwise, Uloric requires a step therapy exception request indicating: (1) history of inadequate treatment response with Allopurinol, OR (2) history of adverse event with Allopurinol, OR (3) Allopurinol is contraindicated.
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