

HMO SNP

Other Providers are Available in our Network

## *Step Therapy Criteria*

### *Step Therapy Group*

#### *Drug Names*

ATYPICAL ANTIPSYCHOTICS

ABILIFY, ABILIFY DISCMELT, CLOZAPINE, FAZACLO, GEODON, INVEGA, INVEGA SUSTENNA, RISPERDAL CONSTA, SEROQUEL, SEROQUEL XR, ZYPREXA, ZYPREXA ZYDIS

#### *Step Therapy Criteria*

Must have a claims history of generic risperidone within the last 60 days.

### *Step Therapy Group*

#### *Drug Names*

#### *Step Therapy Criteria*

FENTANYL PATCHES

FENTANYL

Adjudicates if fill history of intermediate-long acting oral narcotic in past 60 days (Morphine sulfate CR, methadone). This applies to all fentanyl transdermal patches.

### *Step Therapy Group*

#### *Drug Names*

#### *Step Therapy Criteria*

HMG-COA REDUCTASE INHIBITORS - CRESTOR, LIPITOR, VYTORIN

CRESTOR, LIPITOR, VYTORIN

Adjudicates if claims history of any generic simvastatin within the last 60 days.

### *Step Therapy Group*

#### *Drug Names*

#### *Step Therapy Criteria*

PROTON PUMP INHIBITORS

NEXIUM, NEXIUM I.V.

Adjudicates if there is claims history of lansoprazole, omeprazole prescription or pantoprazole-containing drug within past 60 days.

### *Step Therapy Group*

#### *Drug Names*

#### *Step Therapy Criteria*

ZETIA

ZETIA

Must have a claims history of simvastatin within the past 60 days.

A Health Plan with a Medicare Contract