

Medications that require Step Therapy (ST) require trial and failure of preferred formulary agents prior to their authorization. If the prerequisite medications have been filled within the specified time frame, the prescription will automatically process at the pharmacy. Prior Authorization will be required for prescriptions that do not process automatically at the pharmacy.

Medication or Drug Class Name	Step Therapy Requirement
Adapalene cream/gel	Use of Differin gel OTC in the previous 130 days.
Albenza	Use of pyrantel or ivermectin in the previous 60 days.
Albuterol 0.021 % Albuterol 0.042 %	Use of albuterol 0.083 % in the previous 90 days.
Avandia/Avandamet	Use of metformin and pioglitazone for at least 90 days in the previous 130 days.
Azopt	Use of dorzolamide 2 % ophthalmic in the previous 130 days.
Celecoxib	Use of at least 2 of the following agents in the previous 130 days: formulary NSAIDs. In addition, patients with a claim for a PPI, H2 Receptor Antagonist, prednisone, or warfarin in the previous 130 days are not subject to the step requirement.
Corlanor	Use of a beta blocker and either an ACE-I or ARB in the previous 130 days.
DPP4 Inhibitors: Tradjenta Jentadueto Jentadueto XR	Use of metformin for at least 90 days in the previous 130 days.
Epipen/Epipen JR	Use of epinephrine auto-injector in the previous 130 days.
GLP1 Agonists: Tanzeum Trulicity	Use of metformin for at least 90 days duration in the previous 130 days.
Isotretinoin products: Amnesteem Zenatane Myorisan	Use of minocycline or doxycycline in the previous 130 days.
Levalbuterol HFA	Use of Ventolin HFA in the previous 130 days.
Lyrica	Use of duloxetine or gabapentin in the previous 130 days. Lyrica will be covered for the use of postherpetic neuralgia, spinal cord injury, or partial seizures.
Malathion	Use of pyrethrin or permethrin in the previous 60 days.
Nasal Steroids: Flunisolide Fluticasone (generic legend) Mometasone	Use of at least 2 of the following agents: Flonase OTC, Rhinocort OTC, or Nasacort OTC in the previous 130 days.
Ophthalmic antihistamines: Azelastine Epinastine Olopatadine	Use of ketotifen ophthalmic in the previous 90 days.

Medication or Drug Class Name	Step Therapy Requirement
Paricalcitol	Use of calcitriol in the previous 130 days.
Ribasphere	Use of Pegasys, Peg-Intron, Harvoni, Olysio, Technivie, Epclusa, Zepatier, Daklinza, or Sovaldi in the previous 5 days to assure that patients are taking ribavirin with other appropriate hepatitis C medications and not as monotherapy.
Rozerem	Use of BOTH zolpidem and zaleplon in the previous 130 days.
Savella	Use of duloxetine in the previous 130 days.
SGLT2 Inhibitors: Invokana Invokamet	Use of metformin for at least 90 days in the previous 130 days.
Simvastatin 80 mg	Use of simvastatin 80 mg in the previous 180 days.
Spinosad Susp 0.9%	Use of pyrethrin or permethrin in the previous 60 days.
Stiolto Respimat	Use of at least 1 of the following Incruse Ellipta, Tudorza Pressair, Anoro Ellipta or Spiriva/Spiriva Respimat in the previous 130 days.
Topical Antivirals: Acyclovir Ointment	Use of acyclovir tablets in the previous 130 days.
Topical Calcineurin Inhibitors: Elidel tacrolimus	Use of at least 2 topical corticosteroids for at least 60 days duration in the previous 130 days.
Tretinoin cream/gel 0.1 %, 0.05 %, 0.025 %	Use of Differin gel OTC in the previous 130 days.
Uloric	Use of allopurinol in the previous 130 days.
Zafirlukast	Use of montelukast in the previous 130 days.
Zetia	Use of at least 2 of the following: atorvastatin, simvastatin, or Crestor in the previous 130 days.