



Step Therapy Criteria  
2020 MCORE PH  
Last Updated: 4/1/2020

## ATYPICAL ANTIPSYCHOTIC THERAPY - UHCMR

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### Products Affected

- Fanapt
- Fanapt Titration Pack
- Vraylar

### Details

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<b>Criteria</b>	Step 1: One of the following oral, single-ingredient, generic atypical antipsychotics: olanzapine, quetiapine, risperidone, ziprasidone. Step 2: Fanapt, Vraylar
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# DULOXETINE THERAPY - UHCMR

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## Products Affected

- Drizalma Sprinkle

## Details

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<b>Criteria</b>	Step 1: Generic duloxetine. Step 2: Drizalma
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# FILGRASTIM NON - PREFERRED THERAPY - UHCMR

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## Products Affected

- Granix
- Neupogen

## Details

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<b>Criteria</b>	Step 1: Zarxio. Step 2: Neupogen or Granix
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# LEUKOTRIENE MODIFIER ASTHMA THERAPY - UHCMR

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## Products Affected

- Zileuton Er
- Zyflo

## Details

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<b>Criteria</b>	Step 1: Generic montelukast. Step 2: Zyflo, zileuton ER
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# RHO KINASE INHIBITOR THERAPY - UHCMR

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## Products Affected

- Rhopressa
- Rocklatan

## Details

<b>Criteria</b>	Step 1: One of the following: Lumigan, generic latanoprost, Vyzulta, Zioptan, generic travoprost. Step 2: Rhopressa, Rocklatan
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# RIVASTIGMINE PATCH THERAPY - UHCMR

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## Products Affected

- Rivastigmine Transdermal System

## Details

<b>Criteria</b>	Step 1: Formulary generic, oral rivastigmine capsule. Step 2: Rivastigmine transdermal systems
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# RYTARY THERAPY - UHCMR

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## Products Affected

- Rytary

## Details

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<b>Criteria</b>	Step 1: One of the following: generic carbidopa/levodopa IR, generic carbidopa/levodopa ER tablets, or carbidopa/levodopa ODT. Step 2: Rytary
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# SNRI THERAPY - UHCMR

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## Products Affected

- Fetzima
- Fetzima Titration Pack

## Details

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<b>Criteria</b>	Step 1: Generic venlafaxine extended release capsules. Step 2: Fetzima
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# TOPICAL IMMUNOMODULATOR THERAPY - UHCMR

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## Products Affected

- Pimecrolimus
- Tacrolimus OINT

## Details

<b>Criteria</b>	Step 1: Any two of the following formulary topical agents: desonide ointment, hydrocortisone 2.5% cream or ointment, generic aug betamethasone 0.05%, fluocinonide 0.05%. Step 2: pimecrolimus, tacrolimus topical
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# UCERIS ORAL THERAPY - UHCMR

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## Products Affected

- Budesonide Er

## Details

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<b>Criteria</b>	Step 1: One of the following: Apriso, generic mesalamine capsule 0.375 gm or generic mesalamine 1.2g, AND generic sulfasalazine. Step 2: Generic budesonide ER tablet
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# ULORIC THERAPY - UHCMR

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## Products Affected

- Febuxostat

## Details

Criteria	Step 1: Oral, generic allopurinol. Step 2: Generic febuxostat
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Formulary ID# 00020053MZ  
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