

2021 Step Therapy Criteria

bisphosphonates

Products Affected

- FOSAMAX PLUS D 70 MG-2,800 UNIT TABLET
- FOSAMAX PLUS D 70 MG-5,600 UNIT TABLET

Details

Criteria	Coverage will be provided if alendronate or risedronate has been tried (at least a 30 day supply in the prior 180 days).
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Formulary ID: 21436
Version Number: 7
Last Updated: 10/05/2020

esomeprazole

Products Affected

- *esomeprazole magnesium 20 mg capsule, delayed release*
- *esomeprazole magnesium 40 mg capsule, delayed release*

Details

Criteria	Coverage will be provided if two of the following generic alternatives: omeprazole capsules, pantoprazole tablets, or lansoprazole capsules have been tried (at least a 30 day supply in the prior 180 days).
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Formulary ID: 21436
Version Number: 7
Last Updated: 10/05/2020

hmg-coa inhibitors

Products Affected

- ALTOPREV 20 MG TABLET,EXTENDED RELEASE
- ALTOPREV 40 MG TABLET,EXTENDED RELEASE
- ALTOPREV 60 MG TABLET,EXTENDED RELEASE
- LIVALO 1 MG TABLET
- LIVALO 2 MG TABLET
- LIVALO 4 MG TABLET
- ZYPITAMAG 1 MG TABLET
- ZYPITAMAG 2 MG TABLET
- ZYPITAMAG 4 MG TABLET

Details

Criteria	Coverage will be provided if atorvastatin, ezetimibe/simvastatin, fluvastatin, fluvastatin extended-release, lovastatin, pravastatin, rosuvastatin, simvastatin tablets, or amlodipine/atorvastatin has been tried (at least a 30 day supply in the prior 180 days).
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Formulary ID: 21436
Version Number: 7
Last Updated: 10/05/2020

urinary antispasmodics

Products Affected

- *tolterodine 1 mg tablet* *release 24 hr*
- *tolterodine 2 mg tablet*
- *tolterodine er 2 mg capsule, extended* *release 24 hr*
- *tolterodine er 4 mg capsule, extended* *release 24 hr*

Details

Criteria	Coverage will be provided if oxybutynin, oxybutynin extended-release, fesoterodine, trospium immediate-release or mirabegron has been tried (at least a 30 day supply in the prior 180 days).
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