

## ANTIDEPRESSANTS - (S)

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### Products Affected

- Auvelity
- Emsam
- Fetzima
- Fetzima Titration Pack
- Sertraline Hydrochloride CAPS
- Venlafaxine Besylate Er

### Details

<b>Criteria</b>	Trial of two generics of the following formulary products: bupropion, mirtazapine, citalopram, desvenlafaxine succinate ER, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline (tablet or solution), venlafaxine. Approve for continuation of prior therapy.
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# ATINIC KERATOSIS - S

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## Products Affected

- Diclofenac Sodium GEL 3%

## Details

<b>Criteria</b>	Trial of either topical fluorouracil or topical imiquimod
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# ATYPICAL ANTIPSYCHOTICS - (S)

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## Products Affected

- Fanapt
- Fanapt Titration Pack
- Lybalvi
- Secuado
- Vraylar

## Details

<b>Criteria</b>	Trial of two of the following oral generic formulary atypical antipsychotic agents: asenapine, aripiprazole, olanzapine, paliperidone, quetiapine, risperidone, ziprasidone. Approve for continuation of prior therapy.
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# DPP4 INHIBITORS NON-PREFERRED - S

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## Products Affected

- Kombiglyze Xr
- Saxagliptin Hydrochloride/metformin Hydrochloride Er

## Details

<b>Criteria</b>	Trial of one of the following: Janumet, Janumet XR, Januvia, Jentadueto, Jentadueto XR, or Tradjenta
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# FILGRASTIM - (S)

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## Products Affected

- Granix
- Neupogen

## Details

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Criteria	Trial or intolerance to Zarxio
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# GLP1 AGONISTS - S

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## Products Affected

- Ozempic
- Trulicity
- Victoza

## Details

<b>Criteria</b>	Trial of one of the following generic formulary metformin or metformin combinations: metformin, metformin ER, glipizide-metformin, glyburide-metformin, pioglitazone-metformin. Ozempic (semaglutide), Trulicity (dulaglutide), Victoza (liraglutide): Step requirements do not apply to members with type 2 diabetes and multiple cardiovascular risk factors or established cardiovascular disease.
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# INVEGA HAFYERA THERAPY - S

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## Products Affected

- Invega Hafyera

## Details

<b>Criteria</b>	Trial of one of the following: Invega Sustenna or Invega Trinza. Step applies to new starts only. Approve for continuation of prior therapy.
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# LEUKOTRIENE MODIFIERS - (S)

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## Products Affected

- Zileuton Er

## Details

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<b>Criteria</b>	Trial of generic montelukast or generic zafirlukast
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# NAMZARIC - S

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## Products Affected

- Namzarin

## Details

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<b>Criteria</b>	Trial of generic memantine extended-release
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# RELISTOR-(S)

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## Products Affected

- Relistor

## Details

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<b>Criteria</b>	Trial of lubiprostone or lactulose
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# ZONISADE SUSPENSION

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## Products Affected

- Zonisade

## Details

<b>Criteria</b>	Trial of generic zonisamide capsule. Step applies to new starts only. Approve for continuation of prior therapy.
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