Step Therapy Criteria

2020

For information on obtaining an updated coverage determination or an exception to a coverage determination please contact Optimum HealthCare Member Services at 1-866-245-5360 or, for TTY/TDD users 711. Our hours are October 1 to February 14 from 8:00 am to 8:00 pm 7 days a week and February 15 to September 30 from 8:00 am to 8:00 pm Monday through Friday or visit www.youroptimumhealthcare.com.

For an indexed list of drugs please go to page 7.
Aptiom - B

Products Affected

- APTIOM TABLET 200 MG ORAL
- APTIOM TABLET 400 MG ORAL
- APTIOM TABLET 600 MG ORAL
- APTIOM TABLET 800 MG ORAL

Details

| Criteria | If the patient has tried a Step 1 drug, then authorization for a Step 2 drug may be given. Step 1 Drug(s): Lamotrigine IR, Levetiracetam IR\XR, Oxcarbazepine IR, Topiramate IR/XR, Zonisamide. Step 2 Drug(s): Aptiom (eslicarbazepine). Applies to New Starts Only. |
## Cycloset

### Products Affected

- CYCLOSET TABLET 0.8 MG ORAL

### Details

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the patient has tried a Step 1 drug, then authorization for a Step 2</td>
<td>Step 1 Drug(s): metformin. Step 2 Drug(s): Cycloset (bromocriptine mesylate)</td>
</tr>
<tr>
<td>drug may be given.</td>
<td></td>
</tr>
</tbody>
</table>
Nexium Generic - OTC

Products Affected
• esomeprazole magnesium capsule delayed release 40 mg oral

Details

| Criteria | If the patient has tried TWO Step 1 drug (RX/OTC), then authorization for a Step 2 drug may be given. Step 1 Drugs (RX/OTC): omeprazole, pantoprazole, lansoprazole, or OTC esomeprazole. Step 2 Drug (RX): Esomeprazole. New Starts |
### NP NSA - OTC

#### Products Affected
- CLARINEX-D 12 HOUR TABLET EXTENDED RELEASE 12 HOUR 2.5-120 MG ORAL
- desloratadine tablet 5 mg oral
- desloratadine tablet dispersible 2.5 mg oral
- desloratadine tablet dispersible 5 mg oral

#### Details

<table>
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<tr>
<td>If the patient has tried TWO Step 1 drug (RX/OTC), then authorization for a Step 2 drug may be given. Step 1 Drugs (RX/OTC): Cetirizine, cetirizine D, fexofenadine, fexofenadine D, levocetirizine, loratadine, loratadine D. Step 2 Drug(s): Clarinex D, desloratadine. For diagnosis of perennial allergic rhinitis, only cetirizine needs to be tried.</td>
</tr>
</tbody>
</table>
# Ranexa

## Products Affected

- **RANEXA TABLET EXTENDED RELEASE 12 HOUR 1000 MG ORAL**
- **RANEXA TABLET EXTENDED RELEASE 12 HOUR 500 MG ORAL**
- **ranolazine er tablet extended release 12 hour 1000 mg oral**
- **ranolazine er tablet extended release 12 hour 500 mg oral**

## Details

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<tbody>
<tr>
<td>If the patient has tried a Step 1 drug, then authorization for a Step 2 drug may be given. Step 1 Drug(s): any formulary Beta-blocker, Calcium-channel blocker, or Long-acting nitrate. Step 2 Drug(s): Ranexa (ranolazine)</td>
<td></td>
</tr>
</tbody>
</table>
## Uloric

### Products Affected
- ULORIC TABLET 40 MG ORAL
- ULORIC TABLET 80 MG ORAL

### Details

<table>
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<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the patient has tried a Step 1 drug, then authorization for a Step 2 drug may be given. Step 1 Drug(s): allopurinol. Step 2 Drug(s): Uloric. Approve without trial of step 1 drug if Patient has contraindication to allopurinol use.</td>
</tr>
</tbody>
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APTIOM TABLET 800 MG ORAL........ 1
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