

# SIMPRA Advantage (PPO SNP) Medicare Part D Prescription Drug Plan

Step Therapy Criteria  
*Last Updated* 10/3/2018

## Products Affected

APLENZIN 174MG ER TAB

## Details

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Criteria      Step Therapy requires trial of generic bupropion SR or generic bupropion XL in previous 180 days.

**Products Affected**

APLENZIN 348MG ER TAB

**Details**

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Criteria            Step Therapy requires trial of generic bupropion SR or generic bupropion XL in previous 180 days.

**Products Affected**

APLENZIN 522MG ER TAB

**Details**

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Criteria            Step Therapy requires trial of generic bupropion SR or generic bupropion XL in previous 180 days.

**Products Affected**

ARANESP 100MCG/0.5ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 100MCG/ML INJ

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 10MCG/0.4ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCIT or EPOGEN.

**Products Affected**

ARANESP 150MCG/0.3ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCIT or EPOGEN.

**Products Affected**

ARANESP 200MCG/0.4ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.



**Products Affected**

ARANESP 200MCG/ML INJ

**Details**

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Criteria            Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 25MCG/0.42ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 25MCG/ML INJ

**Details**

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Criteria      Step Therapy requires trial of PROCIT or EPOGEN.

**Products Affected**

ARANESP 300MCG/0.6ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 300MCG/ML INJ

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 40MCG/0.4ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCIT or EPOGEN.

**Products Affected**

ARANESP 40MCG/ML INJ

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

**Products Affected**

ARANESP 500MCG/ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCIT or EPOGEN.



**Products Affected**

ARANESP 60MCG/0.3ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of PROCRIT or EPOGEN.

## **Products Affected**

ARANESP 60MCG/ML INJ

## **Details**

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Criteria      Step Therapy requires trial of PROCIT or EPOGEN.

**Products Affected**

donepezil 23mg tab

**Details**

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Criteria      Step Therapy requires trial of generic donepezil 10mg in previous 180 days.

**Products Affected**

DULOXETINE 40MG DR CAP

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

ESTRING 2MG VAGINAL RING

**Details**

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Criteria      Step Therapy requires trial of PREMARIN VAGINAL CREAM OR generic estradiol vaginal cream in previous 180 days.

**Products Affected**

FETZIMA 120MG ER CAP

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

FETZIMA 20MG ER CAP

**Details**

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Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

FETZIMA 40MG ER CAP

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.



**Products Affected**

FETZIMA 80MG ER CAP

**Details**

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Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

FETZIMA PACK

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

## **Products Affected**

fluvoxamine maleate 100mg er cap

## **Details**

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Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

## **Products Affected**

fluvoxamine maleate 150mg er cap

## **Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

LONHALA 0.0025% INH SOLN

**Details**

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Criteria      Step Therapy requires trial of INCRUSE.

**Products Affected**

NAMZARIC 10-21MG ER CAP

**Details**

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Criteria      Patient has tried or was intolerant to generic donepezil AND generic memantine.

## **Products Affected**

NAMZARIC 10-7MG ER CAP

## **Details**

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Criteria Patient has tried or was intolerant to generic donepezil AND generic memantine.

**Products Affected**

NAMZARIC 14-10MG ER CAP

**Details**

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Criteria Patient has tried or was intolerant to generic donepezil AND generic memantine.



**Products Affected**

NAMZARIC 28-10MG ER CAP

**Details**

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Criteria Patient has tried or was intolerant to generic donepezil AND generic memantine.

## **Products Affected**

NAMZARIC TITRATION PACK

## **Details**

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Criteria      Patient has tried or was intolerant to generic donepezil AND generic memantine.

**Products Affected**

PANCREAZE 10500-25000-43750UNIT DR CAP

**Details**

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Criteria      Step Therapy requires trial of CREON in previous 180 days.

**Products Affected**

PANCREAZE 16800-40000-70000UNIT DR CAP

**Details**

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Criteria            Step Therapy requires trial of CREON in previous 180 days.

**Products Affected**

PANCREAZE 21000-37000-61000UNIT DR CAP

**Details**

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Criteria            Step Therapy requires trial of CREON in previous 180 days.

**Products Affected**

PANCREAZE 2600-6200-10850UNIT DR CAP

**Details**

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Criteria            Step Therapy requires trial of CREON in previous 180 days.

**Products Affected**

PANCREAZE 4200-10000-17500UNIT DR CAP

**Details**

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Criteria      Step Therapy requires trial of CREON in previous 180 days.

**Products Affected**

SPIRIVA 1.25MCG RESPIMAT INH

**Details**

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Criteria Step Therapy requires trial of ADVAIR, BREO, DULERA, or FLUTICASONE/SALMETEROL.



## **Products Affected**

TRINTELLIX 10MG TAB

## **Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

TRINTELLIX 20MG TAB

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

TRINTELLIX 5MG TAB

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

ULORIC 40MG TAB

**Details**

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Criteria      Step Therapy requires trial of generic allopurinol in previous 180 days.

**Products Affected**

ULORIC 80MG TAB

**Details**

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Criteria      Step Therapy requires trial of generic allopurinol in previous 180 days.

**Products Affected**

VIIIBRYD 10/20MG STARTER PACK

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

## **Products Affected**

VIIBRYD 10MG TAB

## **Details**

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Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

**Products Affected**

VIIIBRYD 20MG TAB

**Details**

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Criteria      Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.



## **Products Affected**

VIIIBRYD 40MG TAB

## **Details**

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Criteria Step Therapy requires trial of one of the following generic SSRI's in previous 180 days: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.