



SummaCare Secure
A Medicare Advantage Plan

Step Therapy Criteria

Step Therapy Group Description	Antiviral Agents
Step Therapy Criteria	Step therapy approval looks for previous use of Lamivudine-3TC (epivir HBV) in the previous 120 days, before a Baraclude, Hepsera or Tyzeka claim will be approved.
Step Therapy Group Description	Arava
Step Therapy Criteria	Step therapy approval looks for one of the following prescriptions in the last 120 days: methotrexate, sulfasalazine, hydroxychloroquine, penicillamine, gold salts, cyclosporine or azathioprine before Arava will be approved.
Step Therapy Group Description	Byetta
Step Therapy Criteria	A claim for Byetta (exenatide) submitted electronically will be accepted without additional review when the following clinical criteria are fulfilled: Patient has had at least one prescription claim within the most recent 120 days for one of the following medications: metformin or sulfonylureas or combination of metformin/sulfonylurea or thiazolidinediones or combination of metformin/thiazolidinediones.
Step Therapy Group Description	Celebrex
Step Therapy Criteria	A claim for Celebrex submitted electronically will be accepted when the following clinical criteria are fulfilled: prior use within the last 120 days of a Non-steroidal Anti-inflammatory drug or misoprostol containing product or anticoagulant such as warfarin, heparin, dicoumarol, dalteparin, enoxaparin, tinzaparin or fondaparinux or a proton pump inhibitor.

Step Therapy Group Description	Dexilant
Step Therapy Criteria	A prescription claim for Dexilant (dexlansoprazole) enteric coated capsules submitted electronically will be accepted when the following clinical criteria are fulfilled, the patient has had at least one prescription claim within the past 180 days for one proton pump inhibitor such as Nexium, Protonix, pantoprazole, Aciphex, Prevacid, lansoprazole, omeprazole, omeprazole OTC, Zegerid or Prilosec OTC.

Step Therapy Group Description	Hypnotics
Step Therapy Criteria	A claim for Ambien CR (zolpidem), Lunesta (eszopiclone), Sonata (zaleplon), or Edluar (zolpidem Tartrate SL) submitted electronically will be accepted when a claim for zolpidem (generic Ambien) or Ambien (zolpidem) has been paid in the last 120 days.

Step Therapy Group Description	Inspra
Step Therapy Criteria	A claim for Inspra (eplerenone) submitted electronically will be accepted when the following clinical criteria are fulfilled, Aldactone (spironolactone) or Aldactazide (spironolactone/hydrochlorothiazide).

Step Therapy Group Description	Non-Sedating Antihistamines
Step Therapy Criteria	A claim for desloratadine (Clarinet), fexofenadine (Allegra), Cetrizine solution (Zyrtec solution) or levocetirizine (Xyzal) submitted electronically will be accepted when the following clinical criteria are fulfilled Patient has had at least one prescription claim within the most recent 120 days for the step drug(s) OTC loratadine (Claritin) or OTC Cetrizine (Zyrtec).

Step Therapy Group Description	Non-Sedating Antihistamines Combinations
Step Therapy Criteria	A claim for desloratadine and pseudoephedrine (Clarinet-D) or fexofenadine and pseudoephedrine (Allegra-D) submitted electronically will be accepted when the following clinical criteria are fulfilled: Patient has had at least one prescription claim within the most recent 120 days for the step drug(s), OTC loratadine-decongestant combination or OTC Zyrtec-D (cetirizine-pseudoephedrine).

Step Therapy Group Description	Pristiq
Step Therapy Criteria	Prescription claims for Pristiq submitted electronically will be accepted when the following clinical criteria are fulfilled, the patient has had at least two prescription claims within the most recent 365 days for the step drug: Effexor XR (venlafaxine).

Step Therapy Group Description	Proton Pump Inhibitors
Step Therapy Criteria	A claim for Aciphex, Nexium, omeprazole (generic), lansoprazole (generic), pantoprazole (generic), Prevacid, Prilosec, Protonix, or Zegerid submitted electronically will be accepted when the following clinical criteria are fulfilled, Patient has had at least one prescription claim within the most recent 120 days for the step drug omeprazole OTC or Prilosec OTC.

Step Therapy Group Description	Ryzolt
Step Therapy Criteria	A prescription claim for Ryzolt tablets submitted electronically will be accepted when the following clinical criteria are fulfilled, the patient has had at least one prescription claim within the past 120 days for a generic regular release tramadol product.

Step Therapy Group Description	Tekturna- Valturna
Step Therapy Criteria	A claim for Tekturna (aliskiren fumarate) or Tekturna HCT (aliskiren-hct) or Valturna (aliskiren-valsartan) submitted electronically will be accepted when the following clinical criteria are fulfilled, ACE inhibitors OR Angiotensin II receptor antagonists or ACE inhibitor combination products or ARB combination products.

Step Therapy Group Description	Treximet
Step Therapy Criteria	A prescription claim for Treximet (sumatriptan and naproxen sodium) tablets submitted electronically will be accepted when the following clinical criteria are fulfilled, the patient has had at least one prescription claim within the past 180 days for two different 5HT1 Agonist drugs (Tryptans).

Step Therapy Group Description	Uloric
Step Therapy Criteria	A prescription claim for Uloric tablets submitted electronically will be accepted when the following clinical criteria are fulfilled, the patient has had at least one prescription claim within the past 120 days for allopurinol.

Step Therapy Group Description	Xopenex
Step Therapy Criteria	A claim for levalbuterol (generic) or Xopenex (levalbuterol) aerosol solution (for nebulizer) submitted electronically will be accepted without additional review when the following clinical criteria are fulfilled: Patient has had at least one prescription claim within the most recent 120 days for the step drug(s) for Albuterol, metaproterenol, or other short-acting beta agonist - nebulized solution or metered-dose inhaler.

Step Therapy Group Description	Zetia-Vytorin
Step Therapy Criteria	A claim for Zetia (ezetimibe) or Vytorin (ezetimibe/simvastatin) submitted electronically will be covered when the following clinical criteria are fulfilled, Patient has had at least one prescription claim within the most recent 120 days for any HMG CoA-reductase inhibitor such as Lipitor, Crestor, Pravastatin, Lovastatin and Simvastatin.