



Quartz Medicare Advantage (HMO)

Part D Medication Step-Therapy Criteria

These step-therapy criteria apply to Quartz Medicare Advantage members for medications when filled under Medicare Part D.

ANTIDEPRESSANT THERAPY

Products Affected

Step 2:

- FETZIMA 120 MG CAPSULE,EXTENDED RELEASE
- FETZIMA 20 MG (2)-40 MG (26) CAPSULE,EXTENDED RELEASE,24 HR,DOSE PACK
- FETZIMA 20 MG CAPSULE,EXTENDED RELEASE
- FETZIMA 40 MG CAPSULE,EXTENDED RELEASE
- FETZIMA 80 MG CAPSULE,EXTENDED RELEASE
- TRINTELLIX 10 MG TABLET
- TRINTELLIX 20 MG TABLET
- TRINTELLIX 5 MG TABLET
- VIIBRYD 10 MG (7)-20 MG (23) TABLETS IN A DOSE PACK
- VIIBRYD 10 MG TABLET
- VIIBRYD 20 MG TABLET
- VIIBRYD 40 MG TABLET

Details

Criteria	STEP 1: Trial of two formulary generic SSRIs or SNRIs, or paroxetine suspension.
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ANTIDIABETIC

Products Affected

Step 2:

- BYDUREON 2 MG/0.65 ML SUBCUTANEOUS PEN INJECTOR
- BYDUREON BCISE 2 MG/0.85 ML SUBCUTANEOUS AUTO-INJECTOR
- BYETTA 10 MCG/DOSE(250 MCG/ML)2.4 ML SUBCUTANEOUS PEN INJECTOR
- BYETTA 5 MCG/DOSE (250 MCG/ML)1.2 ML SUBCUTANEOUS PEN INJECTOR
- JANUMET 50 MG-1,000 MG TABLET
- JANUMET 50 MG-500 MG TABLET
- JANUMET XR 100 MG-1,000 MG TABLET,EXTENDED RELEASE
- JANUMET XR 50 MG-1,000 MG TABLET,EXTENDED RELEASE
- JANUMET XR 50 MG-500 MG TABLET,EXTENDED RELEASE
- JANUVIA 100 MG TABLET
- JANUVIA 25 MG TABLET
- JANUVIA 50 MG TABLET
- TRULICITY 0.75 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR
- TRULICITY 1.5 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR
- TRULICITY 3 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR
- TRULICITY 4.5 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR

Details

Criteria	STEP 1: Trial of metformin, glipizide, glimepiride, or pioglitazone. (Dulaglutide only): Step not required when used to reduce the risk of major adverse cardiovascular events in adults with type 2 diabetes mellitus and established cardiovascular disease or multiple cardiovascular risk factors.
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ANTIDIABETIC (NONPREFERRED SGLT2)

Products Affected

Step 2:

- SEGLUROMET 2.5 MG-1,000 MG TABLET
- SEGLUROMET 2.5 MG-500 MG TABLET
- SEGLUROMET 7.5 MG-1,000 MG TABLET
- SEGLUROMET 7.5 MG-500 MG TABLET
- STEGLATRO 15 MG TABLET
- STEGLATRO 5 MG TABLET

Details

Criteria	STEP 1: Trial of metformin, glimepiride, glipizide, or pioglitazone AND a preferred formulary SGLT2 inhibitor (Farxiga, Xigduo XR, Jardiance, Synjardy, Synjardy XR)
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ANTIGOUT

Products Affected

Step 2:

- *febuxostat 40 mg tablet*
- *febuxostat 80 mg tablet*

Details

Criteria	STEP 1: Trial of allopurinol
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ANTI-PARKINSON AGENTS

Products Affected

Step 2:

- RYTARY 23.75 MG-95 MG
CAPSULE,EXTENDED RELEASE
- RYTARY 36.25 MG-145 MG
CAPSULE,EXTENDED RELEASE
- RYTARY 48.75 MG-195 MG
CAPSULE,EXTENDED RELEASE
- RYTARY 61.25 MG-245 MG
CAPSULE,EXTENDED RELEASE

Details

Criteria	STEP 1: Trial of generic immediate-release or extended-release carbidopa/levodopa
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ASENAPINE (SECUADO)

Products Affected

Step 2:

- SECUADO 3.8 MG/24 HOUR
TRANSDERMAL 24 HOUR PATCH
- SECUADO 5.7 MG/24 HOUR
TRANSDERMAL 24 HOUR PATCH
- SECUADO 7.6 MG/24 HOUR
TRANSDERMAL 24 HOUR PATCH

Details

Criteria	STEP 1: Trial of asenapine maleate (Saphris)
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ATOPIC DERMATITIS

Products Affected

Step 2:

- EUCRISA 2 % TOPICAL OINTMENT

Details

Criteria	STEP 1: Trial of a topical corticosteroid, topical tacrolimus, or topical pimecrolimus
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ATYPICAL ANTIPSYCHOTICS

Products Affected

Step 2:

- *aripiprazole 10 mg disintegrating tablet*
- *aripiprazole 15 mg disintegrating tablet*
- CAPLYTA 42 MG CAPSULE
- FANAPT 1 MG TABLET
- FANAPT 10 MG TABLET
- FANAPT 12 MG TABLET
- FANAPT 1MG(2)-2 MG(2)-4MG(2)-6 MG(2) TABLETS IN A DOSE PACK
- FANAPT 2 MG TABLET
- FANAPT 4 MG TABLET
- FANAPT 6 MG TABLET
- FANAPT 8 MG TABLET
- LATUDA 120 MG TABLET
- LATUDA 20 MG TABLET
- LATUDA 40 MG TABLET
- LATUDA 60 MG TABLET
- LATUDA 80 MG TABLET
- SAPHRIS 10 MG SUBLINGUAL TABLET
- SAPHRIS 2.5 MG SUBLINGUAL TABLET
- SAPHRIS 5 MG SUBLINGUAL TABLET
- VRAYLAR 1.5 MG (1)-3 MG (6) CAPSULES IN A DOSE PACK
- VRAYLAR 1.5 MG CAPSULE
- VRAYLAR 3 MG CAPSULE
- VRAYLAR 4.5 MG CAPSULE
- VRAYLAR 6 MG CAPSULE

Details

Criteria	STEP 1: Trial of one preferred formulary oral generic atypical antipsychotic.
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BLOOD PRESSURE (BETA BLOCKERS)

Products Affected

Step 2:

- BYSTOLIC 10 MG TABLET
- BYSTOLIC 2.5 MG TABLET
- BYSTOLIC 20 MG TABLET
- BYSTOLIC 5 MG TABLET

Details

Criteria	STEP 1: Trial of two alternative generic formulary beta-blockers
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BREXPIPRAZOLE (REXULTI)

Products Affected

Step 2:

- REXULTI 0.25 MG TABLET
- REXULTI 0.5 MG TABLET
- REXULTI 1 MG TABLET
- REXULTI 2 MG TABLET
- REXULTI 3 MG TABLET
- REXULTI 4 MG TABLET

Details

Criteria	
	STEP 1: Trial of generic oral aripiprazole

CLOMIPRAMINE

Products Affected

Step 2:

- *clomipramine 25 mg capsule*
- *clomipramine 50 mg capsule*
- *clomipramine 75 mg capsule*

Details

Criteria	STEP 1: Trial of two formulary generic SSRIs OR TCAs
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DULOXETINE (DRIZALMA)

Products Affected

Step 2:

- DRIZALMA SPRINKLE 20 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 30 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 40 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 60 MG CAPSULE,DELAYED RELEASE

Details

Criteria	STEP 1: Trial of generic duloxetine capsules
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FIBROMYALGIA

Products Affected

Step 2:

- SAVELLA 100 MG TABLET
- SAVELLA 12.5 MG TABLET
- SAVELLA 12.5 MG (5)-25 MG(8)-50MG(42) TABLETS IN A DOSE PACK
- SAVELLA 25 MG TABLET
- SAVELLA 50 MG TABLET

Details

Criteria	STEP 1: Trial of two of the following: duloxetine capsules, amitriptyline tablets, pregabalin (capsules or solution).
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MEMANTINE ER

Products Affected

Step 2:

- *memantine 14 mg capsule
sprinkle,extended release 24hr*
- *memantine 21 mg capsule
sprinkle,extended release 24hr*
- *memantine 28 mg capsule
sprinkle,extended release 24hr*
- *memantine 7 mg capsule
sprinkle,extended release 24hr*

Details

Criteria	STEP 1: Trial of memantine IR
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PEGFILGRASTIM

Products Affected

Step 2:

- FULPHILA 6 MG/0.6 ML SUBCUTANEOUS SYRINGE
- UDENYCA 6 MG/0.6 ML SUBCUTANEOUS SYRINGE
- ZIEXTENZO 6 MG/0.6 ML SUBCUTANEOUS SYRINGE

Details

Criteria	STEP 1: Trial of Nivestym
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STATINS

Products Affected

Step 2:

- *fluvastatin 20 mg capsule*
- *fluvastatin 40 mg capsule*
- *fluvastatin er 80 mg tablet, extended release 24 hr*

Details

Criteria	STEP 1: Trial of two alternative formulary statins
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VITAMIN D ANALOGS

Products Affected

Step 2:

- *doxercalciferol 0.5 mcg capsule*
- *doxercalciferol 1 mcg capsule*
- *doxercalciferol 2.5 mcg capsule*
- *paricalcitol 1 mcg capsule*
- *paricalcitol 2 mcg capsule*
- *paricalcitol 4 mcg capsule*
- RAYALDEE 30 MCG CAPSULE,EXTENDED RELEASE

Details

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