

2018 STEP THERAPY CRITERIA

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Step Therapy Group – Topical Nsaid ST

Drug Name(s):

diclofenac gel 1%

Criteria:

Criteria for approval require ONE of the following:

1. Patient is 75 years of age or over OR
2. Patient's medication history includes evidence of a claim within the past 90 days for a prescription generic oral NSAID (non-steroidal anti-inflammatory drug) product OR
3. Patient has a documented intolerance, ineffective treatment response, FDA labeled contraindication, or hypersensitivity to a prescription generic oral NSAID product

Medications subject to step therapy will be covered when the above criteria are met.

Step Therapy Group – Uloric ST

Drug Name(s):

ULORIC

Criteria:

Criteria for approval require ONE of the following:

1. Patient's medication history includes evidence of a claim within the past 90 days for generic allopurinol OR
2. Patient has a documented intolerance, ineffective treatment response, FDA labeled contraindication, or hypersensitivity to generic allopurinol

Medication subject to step therapy will be covered when the above criteria are met.