

**Step Therapy Requirements**  
**Effective July 1, 2024**

# **ADLARITY**

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## **Products Affected**

### **Step 2:**

- Adlarity 10 mg/24 hour weekly transdermal patch
- Adlarity 5 mg/24 hour weekly transdermal patch

## **Details**

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<b>Criteria</b>	Coverage of Adlarity requires a trial of generic donepezil tablets or donepezil ODT. If the required drug appears in the prescription profile in the last 365 days, then additional documentation is not required.
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# ARB STEP

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## Products Affected

### Step 2:

- Edarbi 40 mg tablet
- Edarbi 80 mg tablet
- Edarbyclor 40 mg-12.5 mg tablet
- Edarbyclor 40 mg-25 mg tablet

## Details

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<b>Criteria</b>	Coverage of certain branded Angiotensin-Receptor Blockers (ARB) and ARB combos requires a trial of two generic ARB or ARB combinations. If the required drugs appear in the prescription profile in the last 365 days, then additional documentation is not required.
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# **PENICILLAMINE STEP**

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## **Products Affected**

### **Step 2:**

- penicillamine 250 mg capsule
- trientine 250 mg capsule
- trientine 500 mg capsule

## **Details**

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<b>Criteria</b>	Coverage of penicillamine capsules or trientine capsules requires a trial of penicillamine tablets (generic for Depen). If the required drug appears in the prescription profile in the last 365 days, then additional documentation is not required.
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# SAVELLA STEP

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## Products Affected

### Step 2:

- Savella 100 mg tablet
- Savella 12.5 mg (5)-25 mg(8)-50mg(42) tablets in a dose pack
- Savella 12.5 mg tablet
- Savella 25 mg tablet
- Savella 50 mg tablet

## Details

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<b>Criteria</b>	Coverage of Savella requires a trial of duloxetine. If the required drug appears in the prescription profile in the last 365 days, then additional documentation is not required.
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**Step Therapy Requirements**  
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# **ZELAPAR STEP**

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## **Products Affected**

### **Step 2:**

- Zelapar 1.25 mg disintegrating tablet

## **Details**

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<b>Criteria</b>	Coverage of Zelapar requires a trial of oral selegiline. If the required drug appears in the prescription profile in the last 365 days, then additional documentation is not required.
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# ZYFLO, ZILEUTON ER STEP

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## Products Affected

### Step 2:

- zileuton ER 600 mg tablet, extended release 12hr mphase
- Zyflo 600 mg tablet

## Details

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<b>Criteria</b>	Coverage of Zyflo or zileuton er requires trials of both oral montelukast and zafirlukast. If the required drugs appear in the prescription profile in the last 365 days, then additional documentation is not required.
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