

ClearScriptSM Step Therapy Program Implementation

Step Therapy is a process that requires the use of one or more first line agents before a medication which is part of a step therapy protocol can be utilized. The goal of step therapy is to ensure that safe and cost effective medications are used based on recognized treatment guidelines and well documented clinical studies. This means that in some instances a patient will need to try one or more medications which are considered first line before they are able to receive a “second step” medication through your pharmacy benefit plan.

Step therapy programs can be designed to be hard edits or soft therapy edits. Edits can be placed on a single drug or a class of drugs. Step-therapy edits can be utilized to require generic or lower cost products be utilized before higher cost products can be utilized. Pharmacies are notified instantaneously at the point of sale the reason for denial and the appropriate course of action. These edits require a pharmacist’s intervention of the written prescription and dialogue with the physician to promote step therapy.

Step Therapy Programs			
PROGRAMS	STEP ONE	STEP TWO	CRITERIA
COX-2 INHIBITOR	Diclofenac sodium, EC naproxen, Etodolac, Fenoprofen, Flurbiprofen, Diflunisal, Choline Magnesium, Salsalate, Ibuprofen, Indomethacin, Ketoprofen, Ketoprofen SR, Ketorolac, Meclofenamate, Nabumetone, Naproxen, Naproxen Sodium, Oxaprozin, Piroxicam, Sulindac, Tolmetin	Celebrex	Two Step One medications for One Month each
ORAL DIABETES MEDICATIONS	Glyburide, Glipizide, Glimepiride, Metformin, Metformin/Sulfonylurea Combination agent	Glyset, Precose*, Starlix, Prandin	Two Step One medications for One Month each
DIPEPTIDYL PEPTIDASE INHIBITORS	Glyburide, Glipizide, Glimepiride, Metformin, Metformin/Sulfonylurea Combination agent	Januvia, Janumet	Two Step One medications for One Month each
ANGIOTENSIN RECEPTOR BLOCKERS (ARBs)	Benazepril, Captopril, Enalapril, Fosinopril, Lisinopril, Quinapril Benazepril HCT, Captopril HCT, Enalapril HCT, Fosinopril HCT, Lisinopril HCT, Quinapril HCT	Hyzaar, Avapro, Avalide, Micardis, Micardis HCT, Diovan, Diovan HCT, Atacand, Atacand HCT, Cozaar, Teveten, Teveten HCT, Benicar, Benicar HCT	One Step One medications for One Month
PROTON PUMP INHIBITORS	OTC Prilosec, omeprazole	Nexium, Prevacid, Aciphex, Protonix*, Prilosec*, Zegerid	One Step One medications for One Month
NON-SEDATING ANTIHISTAMINES	Generic OTC Zyrtec, OTC Claritin or Equivalents, fexofenadine	Zyrtec*, Zyrtec D*, Clarinex, Clarinex D, Allegra*, Allegra D, Xyzal	One Step One medications for One Month
LEUKOTRIENE INHIBITORS-ASTHMA	Atrovent Inhaler, Combivent, Aminophyllin, Beclovent, Azmacort, Flovent, Qvar, Advair, Aerobid, Lufyllin, Ventolin, Proventil, Pulmicort Turbuhaler, albuterol, ipratropium	Zyflo, Singulair, Accolate	One Step One medications for One Month

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<i>Step Therapy Programs</i>			
PROGRAMS	STEP ONE	STEP TWO	CRITERIA
BRAND NAME ACE-INHIBITORS	Benazepril, Enalapril, Captopril, Fosinopril, Lisinopril, Quinapril, Trandolapril	Aceon and brand name ACE inhibitors that have generics available	One Step One medications for One Month
BRAND NAME NSAIDS (USE IN CONJUNCTION WITH COX-2 INHIBITOR PROTOCOL)	Diclofenac sodium, EC naproxen, Etodolac, Fenoprofen, Flurbiprofen, Diflunisal, Choline Magnesium, Salsalate, Ibuprofen, Indomethacin, Ketoprofen, Ketoprofen SR, Ketorolac, Meclofenamate, Meloxicam, Nabumetone, Naproxen, Naproxen Sodium, Oxaprozin, Piroxicam, Sulindac, Tolmetin	Mobic*, Arthrotec, Ponstel*	One Step One medications for One Month
ANTIDEPRESSANTS - BRAND NAME SSRIS	Paroxetine, Fluoxetine, Fluvoxamine, Citalopram, Sertraline	Celexa*, Lexapro, Paxil*, Paxil CR*, Pexeva, Prozac*, Prozac Weekly, Zoloft*	One Step One medications for One Month
ANTIDEPRESSANTS - OTHER	Paroxetine, Fluoxetine, Fluvoxamine, Citalopram, Sertraline, Venlafaxine	Effexor XR	One Step One medications for One Month
OSTEOPOROSIS	Alendronate	Boniva, Actonel, Fosamax*	One Step One medications for One Month
HYPNOTICS/SEDATIVES	Zolpidem	Lunesta, Sonata*, Rozerem, Ambien*, Ambien CR	One Step One medications for One Month
TOPICAL IMMUNOMODULATORS	Aclometasone, triamcinolone, Capex, Clobex, Cloderm, Cordran, fluticasone, amcinonide, Derma-Smoothe/FS, Dermatop, betamethasone, desonide, mometasone, diflorasone, fluocinolone, Halog, hydrocortisone, Kenalog, fluocinonide, hydrocortisone, Luxiq, Olux, Pandel, Psorcon E, clobetasol, desoximetasone, halobetasol, Vanos	Elidel, Protopic	One Step One medications for One Month
BRAND MORPHINE SULFATE EXTENDED RELEASE	Methadone, Morphine Sulfate ER	Avinza, Kadian	One Step One medications for One Month
ANTI-ALLERGY OPHTHALMIC AGENTS	OTC Zaditor, Alaway	Alamast, Alocril, Alomide, Cromolyn, Elestat, Optivar, Pataday, Patanol	One Step One medications for One Month

*Indicates brand name medications with generic equivalents on the market.

Step Therapy Protocols are reviewed by licensed clinical pharmacists and are intended to provide safe and cost-effective therapy to patients. These protocols are developed based on recognized treatment guidelines, side effect profiles, and cost. Any requests for alterations or customization of Step Therapy programs are subject to review by a clinical pharmacist prior to their implementation.