

ADHD STIMULANTS - S(BCRI)

Products Affected

- Daytrana
- Focalin Xr CP24 25MG, 35MG
- Strattera
- Vyvanse

Details

Criteria	Patient needs to have a paid claim for two of the following: generic formulary ADHD stimulant medication, Metadate ER 20 mg, or Zenedi 5 mg or 10 mg. However, if Vyvanse is being prescribed for moderate to severe binge eating disorder, the prerequisite therapy is not required.
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ANDROGEL -C(BCRI)

Products Affected

- Androderm
- Testosterone GEL 1%

Details

Criteria	Member must have tried Androgel .
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ANTIDEPRESSANTS -S(BCRI)

Products Affected

- Aplenzin
- Brintellix
- Fetzima
- Fetzima Titration Pack
- Forfivo XL
- Pexeva
- Pristiq
- Viibryd
- Viibryd Starter Pack

Details

Criteria	Patient needs to have a paid claim for TWO of the following formulary products: bupropion, mirtazapine, generic SSRI, or generic SNRI.
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ANTIFUNGAL (S)-BCRI

Products Affected

- Naftifine Hydrochloride
- Naftin CREA 2%
- Naftin GEL

Details

Criteria	Patient needs to have a paid claim for one formulary generic topical antifungal agent
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ANTISPASMODICS - S(BCRI)

Products Affected

- Enablex
- Myrbetriq
- Toviaz
- Vesicare

Details

Criteria	Patient needs to have a paid claim for one generic formulary antispasmodic agent.
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ARB (S)-BCRI 2016

Products Affected

- Benicar
- Benicar Hct
- Teveten Hct

Details

Criteria	Patient needs to have a paid claim for two generic formulary ARBs or ARB-diuretic combinations
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ARB -S(BCRI)

Products Affected

- Teveten Hct

Details

Criteria	Patient needs to have a paid claim for one generic formulary ARB or ARB-diuretic combination.
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ATOPIC DERMATITIS - S(BCRI)

Products Affected

- Elidel
- Tacrolimus OINT

Details

Criteria	Patient needs to have a paid claim for one formulary topical corticosteroid.
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ATYPICAL ANTIPSYCHOTICS - S(BCRI)

Products Affected

- Abilify SOLN
- Abilify Discmelt TBDP 10MG
- Abilify Maintena
- Fanapt
- Fanapt Titration Pack
- Invega
- Invega Sustenna
- Latuda
- Rexulti
- Saphris

Details

Criteria	Patient needs to have a paid claim for one generic formulary atypical antipsychotic agent.
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BISPHOSPHONATES -S(BCRI)

Products Affected

- Fosamax Plus D

Details

Criteria	Patient needs to have a paid claim for one generic formulary oral bisphosphonate agent.
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DIFICID (S)-BCRI

Products Affected

- Dificid

Details

Criteria	Patient needs to have a paid claim for generic oral vancomycin
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DPP4 INHIBITORS (S)-BCRI

Products Affected

- Janumet
- Janumet Xr
- Januvia
- Jentadueto
- Kombiglyze Xr
- Onglyza
- Tradjenta

Details

Criteria	Patient needs to have a paid claim for metformin or formulary metformin combinations
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FENOFIBRATES - S(BCRI)

Products Affected

- Antara CAPS 30MG, 90MG
- Lipofen

Details

Criteria	Patient needs to have a paid claim for one generic formulary fenofibrate.
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INSULIN -C(BCRI)

Products Affected

- Apidra
- Apidra Solostar
- Novolin 70/30
- Novolin N
- Novolin N U-100
- Novolin R
- Novolin R U-100
- Novolog
- Novolog Flexpen
- Novolog MIX 70/30
- Novolog MIX 70/30 Prefilled Flexpen
- Novolog Penfill

Details

Criteria	Patient needs to have a paid claim for one Lilly insulin product.
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NASAL STEROIDS -S(BCRI)

Products Affected

- Beconase Aq
- Flunisolide
- Nasonex
- Omnaris
- Veramyst

Details

Criteria	Patient needs to have a paid claim for one generic formulary intranasal corticosteroid agent. However, if Nasonex is being prescribed for SAR prophylaxis, the prerequisite therapy is not required.
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NEUPRO -S(BCRI)

Products Affected

- Neupro

Details

Criteria	Patient needs to have a paid claim for one generic formulary dopamine agonist agent
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OPHTHALMIC PROSTAGLANDINS - S(BCRI)

Products Affected

- Lumigan
- Travatan Z

Details

Criteria	Patient needs to have a paid claim for one generic formulary ophthalmic prostaglandin product.
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ORAL ACNE - S(BCRI)

Products Affected

- Oracea

Details

Criteria	Patient needs to have a paid claim for one generic formulary agent in the oral tetracycline class. However, if Oracea is being prescribed for rosacea, the prerequisite therapy is not required.
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PPI (S)-BCRI

Products Affected

- Dexilant
- Zegerid PACK

Details

Criteria	Patient needs to have a paid claim for one generic formulary proton pump inhibitor. However, if Zegerid Suspension is being prescribed for reducing the risk of upper gastrointestinal bleeding in a critically ill patient, the prerequisite therapy is not required.
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SEDATIVE HYPNOTICS - S(BCRI)

Products Affected

- Silenor
- Zolpimist

Details

Criteria	Patient needs to have a paid claim for generic zolpidem or zaleplon or eszopiclone
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SGLT2 - S(BCRI)

Products Affected

- Synjardy

Details

Criteria	Patient needs to have a paid claim for metformin or formulary metformin/sulfonylurea combinations
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STATINS (S)-BCRI 2016

Products Affected

- Advicor
- Altoprev
- Crestor
- Livalo
- Simcor
- Vytorin TABS 10MG; 10MG, 10MG; 20MG, 10MG; 40MG

Details

Criteria	Patient needs to have a paid claim for two generic formulary HMG-CoA reductase inhibitors (statin)
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TRIPTANS - S(BCRI)

Products Affected

- Frova
- Relpax
- Treximet
- Zomig SOLN 2.5MG
- Zomig Nasal Spray

Details

Criteria	Patient needs to have a paid claim for one generic formulary serotonin 5-HT1 receptor antagonist (triptans).
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ULORIC - S(BCRI)

Products Affected

- Uloric

Details

Criteria	Patient needs to have a paid claim for allopurinol.
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INDEX

A

Abilify	9
Abilify Discmelt	9
Abilify Maintena	9
Adhd Stimulants - S(bcri)	1
Advicor	22
Altoprev	22
Androderm	2
Androgel -c(bcri)	2
Antara	13
Antidepressants -s(bcri)	3
Antifungal (s)-bcri	4
Antispasmodics - S(bcri)	5
Apidra	14
Apidra Solostar	14
Aplenzin	3
Arb (s)-bcri 2016	6
Arb -s(bcri)	7
Atopic Dermatitis - S(bcri)	8
Atypical Antipsychotics - S(bcri)	9

B

Beconase Aq	15
Benicar	6
Benicar Hct	6
Bisphosphonates -s(bcri)	10
Brintellix	3

C

Crestor	22
---------------	----

D

Daytrana	1
Dexilant	19
Difacid	11
Difacid (s)-bcri	11
Dpp4 Inhibitors (s)-bcri	12

E

Elidel	8
Enablex	5

F

Fanapt	9
Fanapt Titration Pack	9
Fenofibrates - S(bcri)	13
Fetzima	3
Fetzima Titration Pack	3
Flunisolide	15
Focalin Xr	1
Forfivo XL	3
Fosamax Plus D	10
Frova	23

I

Insulin -c(bcri)	14
Invega	9
Invega Sustenna	9

J

Janumet	12
Janumet Xr	12
Januvia	12
Jentaduo	12

K

Kombiglyze Xr	12
---------------------	----

L

Latuda	9
Lipofen	13
Livalo	22
Lumigan	17

M

Myrbetriq	5
-----------------	---

N	
Naftifine Hydrochloride	4
Naftin.....	4
Nasal Steroids -s(bcri).....	15
Nasonex.....	15
Neupro.....	16
Neupro -s(bcri)	16
Novolin 70/30.....	14
Novolin N.....	14
Novolin N U-100.....	14
Novolin R.....	14
Novolin R U-100.....	14
Novolog.....	14
Novolog Flexpen.....	14
Novolog MIX 70/30.....	14
Novolog MIX 70/30 Prefilled Flexpen	14
Novolog Penfill	14
O	
Omnicar.....	15
Onglyza	12
Ophthalmic Prostaglandins - S(bcri).....	17
Oracea.....	18
Oral Acne - S(bcri).....	18
P	
Pexeva	3
Ppi (s)-bcri.....	19
Pristiq	3
R	
Relpax.....	23
Rexulti.....	9
S	
Saphris.....	9

Sedative Hypnotics - S(bcri).....	20
SglT2 - S(bcri).....	21
Silenor.....	20
Simcor.....	22
Statins (s)-bcri 2016.....	22
Strattera.....	1
Synjardy	21
T	
Tacrolimus	8
Testosterone	2
Teveten Hct.....	6, 7
Toviaz	5
Tradjenta	12
Travatan Z.....	17
Treximet.....	23
Triptans - S(bcri).....	23
U	
Uloric	24
Uloric - S(bcri).....	24
V	
Veramyst.....	15
Vesicare.....	5
Viibryd	3
Viibryd Starter Pack.....	3
Vytorin	22
Vyvanse.....	1
Z	
Zegerid	19
Zolpimist.....	20
Zomig.....	23
Zomig Nasal Spray	23