Dean Advantage
Prevea360 Medicare Advantage

Medicare Coverage from Dean Health Plan

Dean Health Plan
2022 Step Therapy Criteria (ST)

Please read: This document contains information about our Step Therapy Criteria

Step Therapy: In some cases, Dean Health Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition Dean Health Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Dean Health Plan will then cover Drug B.

This document was updated on **12/01/2022**. For more recent information or other questions, please contact Dean Health Plan, Inc. at **1-877-232-7566 (TTY: 711)**, 8 am – 8 pm, weekdays (year-round) and weekends (Oct. 1 – Mar. 31), or visit **exploreyouradvantage.com**

DeanHealthPlan®
A member of SSM Health

Dean Advantage Medicare Part D Plan

Step Therapy Criteria

Last Updated 12/1/2022

Products Affected

DRIZALMA 20MG DR CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

DRIZALMA 30MG DR CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

DRIZALMA 40MG DR CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

DRIZALMA 60MG DR CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

EMSAM 12MG/24HR PATCH

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

EMSAM 6MG/24HR PATCH

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

EMSAM 9MG/24HR PATCH

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

febuxostat 40mg tab

Details

Criteria	Step Therapy requires trial of generic allopurinol.

Products Affected

febuxostat 80mg tab

Details

Criteria	Step Therapy requires trial of generic allopurinol.

Products Affected

FETZIMA 120MG ER CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA 20MG ER CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA 40MG ER CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA 80MG ER CAP

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

FETZIMA PACK

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

LEVALBUTEROL 45MCG INHALER

Details

Criteria	Step Therapy requires trial of VENTOLIN HFA.

Products Affected

oxybutynin chloride 10mg er tab

Details

Criteria	Step Therapy Requires trial of one (1) of the following: darifenacin, flavoxate, oxybutynin ir, tolterodine tartrate ir or trospium chloride ir.

Products Affected

oxybutynin chloride 15mg er tab

Details

Criteria	Step Therapy Requires trial of one (1) of the following: darifenacin, flavoxate, oxybutynin ir, tolterodine tartrate ir or trospium chloride ir.

Products Affected

oxybutynin chloride 5mg er tab

Details

Criteria	Step Therapy Requires trial of one (1) of the following: darifenacin, flavoxate, oxybutynin ir, tolterodine tartrate ir or trospium chloride ir.

Products Affected

SPIRIVA RESPIMAT 1.25MCG/ACT INH

Details

Criteria	Step Therapy requires trial of ADVAIR (HFA or Diskus), BREO, DULERA, or SYMBICORT.

Products Affected

SYMPAZAN 10MG ORAL FILM

Details

Criteria	Step therapy requires trial of generic clobazam tablets.

Products Affected

SYMPAZAN 20MG ORAL FILM

Details

Criteria	Step therapy requires trial of generic clobazam tablets.

Products Affected

SYMPAZAN 5MG ORAL FILM

Details

Criteria	Step therapy requires trial of generic clobazam tablets.

Products Affected

tolterodine tartrate 2mg er cap

Details

Criteria	Step Therapy Requires trial of one (1) of the following: darifenacin, flavoxate, oxybutynin ir, tolterodine tartrate ir or trospium chloride ir.

Products Affected

tolterodine tartrate 4mg er cap

Details

Criteria	Step Therapy Requires trial of one (1) of the following: darifenacin, flavoxate, oxybutynin ir, tolterodine tartrate ir or trospium chloride ir.

Products Affected

TRINTELLIX 10MG TAB

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

TRINTELLIX 20MG TAB

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

TRINTELLIX 5MG TAB

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

trospium chloride 60mg er cap

Details

Criteria	Step Therapy Requires trial of one (1) of the following: darifenacin, flavoxate, oxybutynin ir, tolterodine tartrate ir or trospium chloride ir.

Products Affected

VIIBRYD 10/20MG STARTER PACK

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

vilazodone 10mg tab

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

vilazodone 20mg tab

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

vilazodone 40mg tab

Details

Criteria	Step Therapy requires trial of one of the following generic SSRI's: escitalopram, sertraline, fluoxetine, citalopram, paroxetine or fluvoxamine. If request is for duloxetine, step not required for diabetic peripheral neuropathy, fibromyalgia, or chronic musculoskeletal pain.

Products Affected

ZENPEP 105000-25000-79000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZENPEP 14000-3000-10000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZENPEP 24000-5000-17000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZENPEP 40000-126000-168000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZENPEP 42000-10000-32000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZENPEP 63000-15000-47000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZENPEP 84000-20000-63000UNIT DR CAP

Details

Criteria	Step Therapy requires trial of CREON.

Products Affected

ZIOPTAN 0.0015% OPHTH SOLN

Details

Criteria	Step Therapy requires trial of generic latanoprost.

Dean Medicare Advantage

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Toll-free:
1-877-232-7566 (TTY: 711)
deancare.com/medicare

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