



Step Therapy Criteria

Step Therapy Group

LEVALBUTEROL

Drug Names

LEVALBUTEROL TARTRATE HFA

Step Therapy Criteria

Coverage will be provided if albuterol HFA or Ventolin HFA have been tried (at least a 30-day supply) in the prior 180 days.

Step Therapy Group

PPI

Drug Names

ESOMEPRAZOLE MAGNESIUM

Step Therapy Criteria

Coverage will be provided if two of the following generic alternatives: omeprazole capsules, pantoprazole tablets, or lansoprazole capsules have been tried (at least a 30 day supply in the prior 180 days).

Step Therapy Group

URINARY ANTISPASMODICS

Drug Names

TOLTERODINE TARTRATE ER

Step Therapy Criteria

Coverage will be provided if fesoterodine, mirabegron, oxybutynin, oxybutynin extended-release, solifenacin tablets, tolterodine tablets, trospium immediate-release, or vibegron has been tried (at least a 30-day supply in the prior 180 days).

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