

# CARE N' CARE HEALTH PLAN

## 2020 Step Therapy Criteria

### PPI

---

#### Products Affected

##### Step 2:

- DEXILANT CAPSULE DELAYED RELEASE 30 MG ORAL
- DEXILANT CAPSULE DELAYED RELEASE 60 MG ORAL

#### Details

---

<b>Criteria</b>	Claim will pay automatically for Dexilant if enrollee has a paid claim for at least a 1 days supply of step level 1 agent (lansoprazole, esomeprazole, omeprazole, pantoprazole, or rabeprazole) in the past. Otherwise, Dexilant requires a step therapy exception request indicating: (1) history of inadequate treatment response with step 1 agent, OR (2) history of adverse event with step 1 agent, OR (3) step 1 agent is contraindicated.
-----------------	--

# CARE N' CARE HEALTH PLAN

2020 Step Therapy Criteria

## ULORIC

---

### Products Affected

#### Step 2:

- *febuxostat tablet 40 mg oral*
- *febuxostat tablet 80 mg oral*

### Details

---

Criteria	
	Claim will pay automatically for Febuxostat if enrollee has a paid claim for at least a 1 days supply of Allopurinol in the past. Otherwise, Febuxostat requires a step therapy exception request indicating: (1) history of inadequate treatment response with Allopurinol, OR (2) history of adverse event with Allopurinol, OR (3) Allopurinol is contraindicated.

---

# CARE N' CARE HEALTH PLAN

## 2020 Step Therapy Criteria

### Index

#### D

DEXILANT CAPSULE DELAYED RELEASE 30 MG ORAL .....	1
DEXILANT CAPSULE DELAYED RELEASE 60 MG ORAL .....	1

#### F

febuxostat tablet 40 mg oral.....	2
febuxostat tablet 80 mg oral.....	2