

# CARE N' CARE HEALTH PLAN

## 2020 Step Therapy Criteria

### PPI

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#### Products Affected

**Step 2:**

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

#### Details

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<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.
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# CARE N' CARE HEALTH PLAN

2020 Step Therapy Criteria

## ULORIC

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### Products Affected

#### Step 2:

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

### Details

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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.

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### 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