

MEDICAID DUR BOARD-APPROVED STEP THERAPY PRIOR AUTHORIZATIONS

STEP THERAPIES DUR APPROVED IN LATE 2016

- ADLYXIN™
- ANTI-CONSTIPATION AGENTS
- ARB/CCB COMBINATIONS
- BB/ARB COMBINATIONS
- BOTULINUM TOXINS
- DPP-4 INHIBITOR COMBINATIONS
- ENTYVIO®
- INTRANASAL ANTIHISTAMINE/CORTICOSTEROID COMBINATION AGENTS
- METFORMIN ER
- NSAID PLUS PROTON PUMP INHIBITOR/H2 BLOCKING AGENTS
- SERNIVO®
- SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR COMBINATIONS (SGLT2 INHIBITOR COMBINATIONS)

STEP THERAPIES DUR APPROVED IN 2017

- AMRIX®
- ASPIRIN-PPI COMBINATION
- EXONDYS 51™
- HEP-C: DAKLINZA®, EPCLUSA®, HARVONI®, OLYSIO®, SOLVALDI®, TECHNIVIE®, VIEKIRA®, VIEKIRA XR®, VOSEVI®, ZEPATIER®
- MOTOFEN®
- NITROGLYCERIN SUBLINGUAL
- SULFONYLUREA/THIAZOLIDINEDIONE
- TROKENDI XR®
- ZEGERID®
- ZOLPIMIST®

STEP THERAPIES DUR APPROVED IN 2018

- AIMOVIG™
- CARBINOXAMINE PRODUCTS (ARBINOXA®, KARBINAL™ ER, RYVENT™)
- CONSENSI™
- GLP-1 RECEPTOR AGONIST
- LONG-ACTING INSULIN/GLP-1 RECEPTOR AGONIST
- PROTON PUMP INHIBITORS
- SGLT-2 INHIBITORS
- TOPICAL IMMUNOMODULATORS

MEDICAID DUR BOARD-APPROVED STEP THERAPY PRIOR AUTHORIZATIONS

STEP THERAPIES DUR APPROVED IN 2019

- ADULT RHEUMATOID ARTHRITIS
- ANKYLOSING SPONDYLITIS
- ANTICONSTIPATION AGENTS
- ANTIDEPRESSANTS (SPRAVATO®)
- ANTIPSYCHOTICS (ABILIFY MYCITE®)
- ARIKAYCE®
- ASTHMA
- ATOPIC DERMATITIS
- BOTULINUM TOXINS
- CGRP ANTAGONISTS
- CALCIMIMETICS
- CROHN'S DISEASE
- IL-5 RECEPTOR ANTAGONISTS (*superseded by Asthma 7/10/19*)
- JUVENILE IDIOPATHIC ARTHRITIS
- PLAQUE PSORIASIS
- PSORIATIC ARTHRITIS
- TOPIRAMATE ER
- ULCERATIVE COLITIS

STEP THERAPIES DUR APPROVED IN 2020

- ANTIPSYCHOTICS (APLENZIN®, CAPLYTA®, FORFIVO®, TRINTELLIX, VIIBRYD®)
- ANTIDEPRESSANTS – (SPRAVATO®)
- LYRICA CR®
- NARCOLEPSY (SUNOSI®, WAKIX®, XYREM®, XYWAV™)
- MIGRAINE PROPHYLAXIS (BOTOX®, CGRP, TOPIRAMATE ER)
- MIGRAINE ACUTE (ELYXYB™, NURTEC ODT™, REYVOW™, UBRELVY®)
- TYPE 2 DIABETES MELLITUS (METFORMIN ER, SGLT2, GLP1, AND COMBINATIONS)
- DUCHENNE MUSCULAR DYSTROPHY (EMFLAZA®)
- ATOPIC DERMATITIS
- ULCERATIVE COLITIS
- PLAQUE PSORIASIS

MEDICAID DUR BOARD-APPROVED STEP THERAPY PRIOR AUTHORIZATIONS

STEP THERAPIES DUR APPROVED IN 2021

- MULTIPLE SCLEROSIS (VUMERITY®AND BAFIERTAM®)
- JUVENILE IDIOPATHIC ARTHRITIS (SIMPONI ARIA® AND XELJANZ® TABLETS AND ORAL SOLUTION)
- PSORIATIC ARTHRITIS (AVSOLA®)
- HYPERCHOLESTEROLEMIA (JUXTAPID®, NEXLETOL®, NEXLIZET®, EVKEEZA®)
- ADHD (QELBREE®)
- ANTIPSYCHOTIC (SECUADO®)
- MIGRAINE PROPHYLAXIS (NURTEC ODT®, QULIPTA®)
- ULCERATIVE COLITIS (ZEPOSIA®)
- ANKYLOSING SPONDYLITIS (TALTZ®)
- CROHN'S DISEASE (AVSOLA®)

✚ Not all step therapies listed above are still effective as listed. Some have merged to a class prior authorization and some have been removed altogether.