

# **2019**

# **Step Therapy Criteria**

Last Updated: 10/09/2018

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2019 Medicare Formulary

## DPP-4 Inhibitors

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### Products Affected

- KOMBIGLYZE XR TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG ORAL
- KOMBIGLYZE XR TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG ORAL
- KOMBIGLYZE XR TABLET EXTENDED RELEASE 24 HOUR 5-500 MG ORAL
- ONGLYZA TABLET 2.5 MG ORAL
- ONGLYZA TABLET 5 MG ORAL
- QTERN TABLET 10-5 MG ORAL

### Details

Criteria	Trial of Metformin
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# GLP-1 Agonists

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## Products Affected

- BYDUREON BCISE AUTO-INJECTOR 2 MG/0.85ML SUBCUTANEOUS
- BYDUREON PEN-INJECTOR 2 MG SUBCUTANEOUS
- BYDUREON SUSPENSION RECONSTITUTED ER 2 MG SUBCUTANEOUS
- BYETTA 10 MCG PEN SOLUTION PEN-INJECTOR 10 MCG/0.04ML SUBCUTANEOUS
- BYETTA 5 MCG PEN SOLUTION PEN-INJECTOR 5 MCG/0.02ML SUBCUTANEOUS
- VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS

## Details

Criteria	Trial of Metformin
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# ICS/LABA/LAMA

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## Products Affected

- TRELEGY ELLIPTA AEROSOL  
POWDER BREATH ACTIVATED 100-  
62.5-25 MCG/INH INHALATION

## Details

Criteria	Trial of a LABA or LAMA containing product
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# Renin Inhibitors

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## Products Affected

- TEKTURNA TABLET 150 MG ORAL
- TEKTURNA TABLET 300 MG ORAL

## Details

Criteria	Trial of an ARB
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# SGLT-2 Inhibitors

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## Products Affected

- FARXIGA TABLET 10 MG ORAL
- FARXIGA TABLET 5 MG ORAL
- QTERN TABLET 10-5 MG ORAL
- XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG ORAL
- XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 10-500 MG ORAL
- XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG ORAL
- XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG ORAL
- XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 5-500 MG ORAL

## Details

<b>Criteria</b>	Trial of Metformin
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# Topical PDE-4 Inhibitors

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## Products Affected

- EUCRISA OINTMENT 2 % EXTERNAL

## Details

<b>Criteria</b>	Trial of topical corticosteroid
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  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
  
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  - Qualified Interpreters
  - Information written in other languages

If you need these services, contact:

- FHCP Medicare : 1-833-866-6559

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Civil Rights Coordinator  
1340 Ridgewood Avenue  
Holly Hill, FL 32117  
Phone: 1-844-219-6137  
TTY: 1-800-955-8770  
Fax: 386-676-7149  
Email: [rights@fhcp.com](mailto:rights@fhcp.com)

You can file grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

**ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call **1-833-866-6559**. (TTY: **1-800-955-8770**)

**ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-833-866-6559** (TTY: **1-800-955-8770**).

**ATANSYON:** Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-833-866-6559 (TTY: 1-800-955-8770).

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-833-866-6559 (TTY: 1-800-955-8770).

**ATENÇÃO:** Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-833-866-6559 (TTY: 1-800-955-8770).

**注意：**如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-833-866-6559  
( TTY : 1-800-955-8770 )

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**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-833-866-6559 (TTY: 1-800-955-8770).

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-833-866-6559 (телетайп: 1-800-955-8770).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-833-866-6559 (رقم هاتف الصم والبكم: 1-800-955-8770).

**ATTENZIONE:** In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-833-866-6559 (TTY: 1-800-955-8770).

**ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-833-866-6559 (TTY: 1-800-955-8770).

**주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-833-866-6559 (TTY: 1-800-955-8770)번으로 전화해 주십시오.

**UWAGA:** Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-833-866-6559 (TTY: 1-800-955-8770).

**સુચના:** જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-833-866-6559 (TTY: 1-800-955-8770).

**เรียน:** ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-833-866-6559 (TTY: 1-800-955-8770).