

# 2026 6 Tier Standard – First Choice VIP Care SC

## 2026 Step Therapy Criteria

CURRENT AS OF 02/01/2026

### anticonvulsant step therapy

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#### Products Affected

- FYCOMPA SUSPENSION 0.5 MG/ML ORAL
- *perampanel suspension 0.5 mg/ml oral*
- *perampanel tablet 10 mg oral*
- *perampanel tablet 12 mg oral*
- *perampanel tablet 2 mg oral*
- *perampanel tablet 4 mg oral*
- *perampanel tablet 6 mg oral*
- *perampanel tablet 8 mg oral*
- SPRITAM TABLET DISINTEGRATING SOLUBLE 250 MG ORAL
- SPRITAM TABLET DISINTEGRATING SOLUBLE 500 MG ORAL
- SYMPAZAN FILM 10 MG ORAL
- SYMPAZAN FILM 20 MG ORAL
- SYMPAZAN FILM 5 MG ORAL
- XCOPRI (250 MG DAILY DOSE) TABLET THERAPY PACK 100 & 150 MG ORAL
- XCOPRI (350 MG DAILY DOSE) TABLET THERAPY PACK 150 & 200 MG ORAL
- XCOPRI TABLET 100 MG ORAL
- XCOPRI TABLET 150 MG ORAL
- XCOPRI TABLET 200 MG ORAL
- XCOPRI TABLET 25 MG ORAL
- XCOPRI TABLET 50 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 150 MG & 14 X200 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 50 MG & 14 X100 MG ORAL
- ZONISADE SUSPENSION 100 MG/5ML ORAL

#### Details

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Criteria
Step 1: First line therapy should be a documented trial, failure, or contraindication of two generic anticonvulsants. Step 2: Once two generic anticonvulsants have been tried, failed, or contraindicated patients can receive therapy with Spritam, Sympazan, Xcopri, Fycompa, generic perampanel or Zonisade oral solution.

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# antidepressant step therapy

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## Products Affected

- EXXUA TABLET EXTENDED RELEASE 24 HOUR 18.2 MG ORAL
- EXXUA TABLET EXTENDED RELEASE 24 HOUR 36.3 MG ORAL
- EXXUA TABLET EXTENDED RELEASE 24 HOUR 54.5 MG ORAL
- EXXUA TABLET EXTENDED RELEASE 24 HOUR 72.6 MG ORAL
- EXXUA TITRATION PACK TABLET EXTENDED RELEASE 24 HOUR 18.2 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 120 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 20 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 40 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 80 MG ORAL
- FETZIMA TITRATION CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG ORAL

## Details

<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of either (1) two generic antidepressants OR (2) Drizalma and one generic antidepressant. Step 2: Once two step one antidepressants have been tried, failed, or contraindicated patient can receive therapy with Fetzima or Exxua.
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# brinzolamide and dorzolamide-timolol PF step therapy

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## Products Affected

- *brinzolamide suspension 1 % ophthalmic*
- *dorzolamide hcl-timolol mal pf solution 2-0.5 % ophthalmic*

## Details

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<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of formulary dorzolamide or dorzolamide/timolol ophthalmic solution. Step 2: Once dorzolamide or dorzolamide/timolol ophthalmic solution has been tried, failed, or contraindicated the patient can receive therapy with brinzolamide or Dorzolamide-Timolol PF Ophthalmic Solution.
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# drizalma step therapy

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## Products Affected

- DRIZALMA SPRINKLE CAPSULE  
DELAYED RELEASE SPRINKLE 20  
MG ORAL
- DRIZALMA SPRINKLE CAPSULE  
DELAYED RELEASE SPRINKLE 30  
MG ORAL
- DRIZALMA SPRINKLE CAPSULE  
DELAYED RELEASE SPRINKLE 40  
MG ORAL
- DRIZALMA SPRINKLE CAPSULE  
DELAYED RELEASE SPRINKLE 60  
MG ORAL

## Details

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<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of generic formulary duloxetine. Step 2: Once generic formulary duloxetine has been tried, failed, or contraindicated the patient can receive therapy with drizalma.
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# febuxostat step therapy

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## Products Affected

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

## Details

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<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of allopurinol tablet. Step 2: Once allopurinol tablet has been tried, failed, or contraindicated patients can receive therapy with Febuxostat.
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# netarsudil step therapy

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## Products Affected

- RHOPRESSA SOLUTION 0.02 %  
OPHTHALMIC
- ROCKLATAN SOLUTION 0.02-0.005 %  
OPHTHALMIC

## Details

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<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of latanoprost or travoprost. Step 2: Once latanoprost or travoprost has been tried, failed, or contraindicated patients can receive therapy with Rhopressa or Rocklatan.
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# ongentys step therapy

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## Products Affected

- ONGENTYS CAPSULE 25 MG ORAL
- ONGENTYS CAPSULE 50 MG ORAL

## Details

<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of entacapone or carbidopa-levodopa-entacapone. Step 2: Once entacapone or carbidopa-levodopa-entacapone has been tried, failed, or contraindicated patients can receive therapy with Ongentys.
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# savella step therapy

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## Products Affected

- SAVELLA TABLET 100 MG ORAL
- SAVELLA TABLET 12.5 MG ORAL
- SAVELLA TABLET 25 MG ORAL
- SAVELLA TABLET 50 MG ORAL
- SAVELLA TITRATION PACK 12.5 & 25 & 50 MG ORAL

## Details

<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication to duloxetine or pregabalin. Step 2: Once duloxetine or pregabalin has been tried, failed or contraindicated patients can receive therapy with Savella.
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# topical immunomodulators step therapy

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## Products Affected

- *pimecrolimus cream 1 % external*
- *tacrolimus ointment 0.03 % external*
- *tacrolimus ointment 0.1 % external*

## Details

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<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of two topical corticosteroids. Step 2: Once two topical corticosteroids have been tried, failed, or contraindicated patients can receive therapy with generic pimecrolimus or generic topical tacrolimus.
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# urinary incontinence agents step therapy

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## Products Affected

- *darifenacin hydrobromide er tablet extended release 24 hour 15 mg oral*
- *darifenacin hydrobromide er tablet extended release 24 hour 7.5 mg oral*
- *trospium chloride er capsule extended release 24 hour 60 mg oral*

## Details

<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure or contraindication of 2 of the following: oxybutynin, oxybutynin ER, trospium, tolterodine, tolterodine ER, fesoterodine ER, or solifenacin. Step 2: Once two of the medications listed in Step 1 have been tried, failed, or contraindicated, patients can receive therapy with trospium ER or darifenacin ER
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# xhance

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## Products Affected

- XHANCE EXHALER SUSPENSION 93 MCG/ACT NASAL

## Details

<b>Criteria</b>	Step 1: First line therapy should be a documented trial, failure, or contraindication of generic fluticasone or mometasone nasal spray. Step 2: Once generic fluticasone or mometasone nasal spray have been tried, failed, or contraindicated patients can receive therapy with Xhance.
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DRIZALMA SPRINKLE CAPSULE  
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DRIZALMA SPRINKLE CAPSULE  
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MG ORAL ..... 4

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EXXUA TABLET EXTENDED RELEASE  
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XCOPRI (350 MG DAILY DOSE)  
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