

2025

STEP THERAPY CRITERIA

1-866-535-8343 (TTY: 711)
[KelseyCareAdvantage.com](https://www.KelseyCareAdvantage.com)

ACTINIC KERATOSIS

Products Affected

- Diclofenac Sodium GEL 3%

Details

Criteria	Trial of either topical fluorouracil or topical imiquimod
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ANTIDEPRESSANTS

Products Affected

- Auvelity
- Emsam
- Fetzima
- Fetzima Titration Pack

Details

Criteria	Trial of two generics of the following formulary products: bupropion, mirtazapine, citalopram (tablet or solution), desvenlafaxine succinate ER, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline (tablet or solution), venlafaxine hydrochloride. Approve for continuation of prior therapy.
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ATYPICAL ANTIPSYCHOTICS

Products Affected

- Fanapt
- Fanapt Titration Pack
- Lybalvi
- Secuado

Details

Criteria	Trial of two of the following oral generic formulary atypical antipsychotic agents: asenapine, aripiprazole, olanzapine, paliperidone, quetiapine, risperidone, ziprasidone. Approve for continuation of prior therapy.
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INVEGA HAFYERA THERAPY

Products Affected

- Invega Hafyera

Details

Criteria	Trial of one of the following: Invega Sustenna or Invega Trinza. Step applies to new starts only. Approve for continuation of prior therapy.
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RELISTOR

Products Affected

- Relistor

Details

Criteria	Trial of lubiprostone, Constulose, Enulose, Generlac, or lactulose
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RYTARY

Products Affected

- Rytary

Details

Criteria	Trial of one generic carbidopa/levodopa containing formulation
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ZONISADE SUSPENSION

Products Affected

- Zonisade

Details

Criteria	Trial of generic zonisamide capsule. Step applies to new starts only. Approve for continuation of prior therapy.
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Index Of Drugs

A

Actinic Keratosis	1
Antidepressants.....	2
Atypical Antipsychotics	3
Auvelity.....	2

D

Diclofenac Sodium.....	1
------------------------	---

E

Emsam	2
-------------	---

F

Fanapt	3
Fanapt Titration Pack	3
Fetzima.....	2
Fetzima Titration Pack.....	2

I

Invega Hafyera	4
Invega Hafyera Therapy.....	4

L

Lybalvi	3
---------------	---

R

Relistor.....	5
Rytary.....	6

S

Secuado.....	3
--------------	---

Z

Zonisade	7
Zonisade Suspension.....	7