

## CONSTIPATION AGENTS - PST

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### **MEDICATION(S) SUBJECT TO STEP THERAPY**

MOTEGRITY

### **CRITERIA**

If the patient has tried one Step 1 product, approve the requested step 2 drug.

## DEXTROMETHORPHAN/BUPROPION

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### **MEDICATION(S) SUBJECT TO STEP THERAPY**

AUVELITY

### **CRITERIA**

Approve if the patient has tried a generic SSRI OR SNRI AND separately tried bupropion. Approve Auvelity if the patient has suicidal ideation without a trial of a Step 1 drug. Approve Auvelity if the patient is currently receiving Auvelity or has taken Auvelity in the past.

## HMG CO-A REDUCTASE INHIBITORS

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### **MEDICATION(S) SUBJECT TO STEP THERAPY**

LIVALO

### **CRITERIA**

If the patient has tried one step 1 drug, approve Livalo. If the patient has tried a brand name version of the step 1 generic drug in the past, approve Livalo without a trial of a step 1 drug.

## ORAL BISPHOSPHONATES

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### **MEDICATION(S) SUBJECT TO STEP THERAPY**

FOSAMAX PLUS D

### **CRITERIA**

If the patient has tried two Step 1 drugs, approve the requested Step 2 drug.