Effective: 11/01/2025

ACTINIC KERATOSIS - SCORE

Products Affected

• Diclofenac Sodium GEL 3%

Details

Criteria Trial of either topical fluorouracil or topical imiquir	od
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Formulary ID: 25387, Version: 19, Effective Date: 11/01/2025

ANTIDEPRESSANTS - SCORE

Products Affected

- Auvelity
- Emsam
- Exxua

- Exxua Titration Pack
- 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.

Formulary ID: 25387, Version: 19, Effective Date: 11/01/2025

ATYPICAL ANTIPSYCHOTICS - SCORE

Products Affected

- Fanapt
- Fanapt Titration Pack A
- Fanapt Titration Pack B

- Fanapt Titration Pack C
- Lybalvi
- Secuado

Details

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.
risperidone, ziprasidone. Approve for continuation of prior therapy.

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INVEGA HAFYERA THERAPY - SCORE

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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NAMZARIC - SCORE

Products Affected

Memantine/donepezil Hydrochloride • Namzaric CP24

Details

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RELISTOR - SCORE

Products Affected

• Relistor

Details

Criteria	Trial of lubiprostone, Constulose, Enulose, Generlac, or lactulose
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Formulary ID: 25387, Version: 19, Effective Date: 11/01/2025

RYTARY - SCORE

Products Affected

• Rytary

Details

Formulary ID: 25387, Version: 19, Effective Date: 11/01/2025

ZONISADE SUSPENSION - SCORE

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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