

# 2026 AmeriHealth Caritas VIP Care MI (HMO-DSNP)

## 2026 Step Therapy Criteria

CURRENT AS OF 06/01/2026

### anticonvulsant step therapy

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#### Products Affected

- *levetiracetam tablet disintegrating soluble 250 mg oral*
- *levetiracetam tablet disintegrating soluble 500 mg 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*
- RELGAABI CAPSULE 200 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 X 200 MG ORAL
- XCOPRI TABLET THERAPY PACK 14 X 50 MG & 14 X 100 MG ORAL
- ZONISADE SUSPENSION 100 MG/5ML ORAL

#### Details

|                 |   |
|-----------------|---|
| <b>Criteria</b> | ST applies to new starts only: 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, generic perampanel, Relgaabi, or Zonisade oral solution. |
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Formulary ID 26326

Last Updated: 05/21/2026

# 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 two generic antidepressants. Step 2: Once two generic 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*                      *% ophthalmic*
- *dorzolamide hcl-timolol mal pf solution 2-0.5*

## 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

|                 |   |
|-----------------|---|
| <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 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, milnacipran or pregabalin. Step 2: Once duloxetine, milnacipran 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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| Criteria | 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

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|                 |   |
|-----------------|---|
| <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.<br>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

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|-----------------|--|
| <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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Formulary ID 26326  
Last Updated: 05/21/2026

**Index**

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|---|----|--|----|
| <i>brinzolamide suspension 1 % ophthalmic</i> ..... | 3  | <i>levetiracetam tablet disintegrating soluble</i> |    |
| <i>darifenacin hydrobromide er tablet</i>           |    | <i>500 mg oral</i> .....                           | 1  |
| <i>extended release 24 hour 15 mg oral</i> .....    | 10 | ONGENTYS CAPSULE 25 MG ORAL.....                   | 7  |
| <i>darifenacin hydrobromide er tablet</i>           |    | ONGENTYS CAPSULE 50 MG ORAL.....                   | 7  |
| <i>extended release 24 hour 7.5 mg oral</i> .....   | 10 | <i>perampanel suspension 0.5 mg/ml oral</i> .....  | 1  |
| <i>dorzolamide hcl-timolol mal pf solution 2-</i>   |    | <i>perampanel tablet 10 mg oral</i> .....          | 1  |
| <i>0.5 % ophthalmic</i> .....                       | 3  | <i>perampanel tablet 12 mg oral</i> .....          | 1  |
| DRIZALMA SPRINKLE CAPSULE                           |    | <i>perampanel tablet 2 mg oral</i> .....           | 1  |
| DELAYED RELEASE SPRINKLE 20 MG                      |    | <i>perampanel tablet 4 mg oral</i> .....           | 1  |
| ORAL.....   | 4  | <i>perampanel tablet 6 mg oral</i> .....           | 1  |
| DRIZALMA SPRINKLE CAPSULE                           |    | <i>perampanel tablet 8 mg oral</i> .....           | 1  |
| DELAYED RELEASE SPRINKLE 30 MG                      |    | <i>pimecrolimus cream 1 % external</i> .....       | 9  |
| ORAL.....   | 4  | RELGAABI CAPSULE 200 MG ORAL.....                  | 1  |
| DRIZALMA SPRINKLE CAPSULE                           |    | RHOPRESSA SOLUTION 0.02 %                          |    |
| DELAYED RELEASE SPRINKLE 40 MG                      |    | OPHTHALMIC.....                                    | 6  |
| ORAL.....   | 4  | ROCKLATAN SOLUTION 0.02-0.005 %                    |    |
| DRIZALMA SPRINKLE CAPSULE                           |    | OPHTHALMIC.....                                    | 6  |
| DELAYED RELEASE SPRINKLE 60 MG                      |    | SAVELLA TITRATION PACK 12.5 & 25                   |    |
| ORAL.....   | 4  | & 50 MG ORAL.....                                  | 8  |
| EXXUA TABLET EXTENDED                               |    | SPRITAM TABLET DISINTEGRATING                      |    |
| RELEASE 24 HOUR 18.2 MG ORAL.....                   | 2  | SOLUBLE 250 MG ORAL.....                           | 1  |
| EXXUA TABLET EXTENDED                               |    | SPRITAM TABLET DISINTEGRATING                      |    |
| RELEASE 24 HOUR 36.3 MG ORAL.....                   | 2  | SOLUBLE 500 MG ORAL.....                           | 1  |
| EXXUA TABLET EXTENDED                               |    | SYMPAZAN FILM 10 MG ORAL.....                      | 1  |
| RELEASE 24 HOUR 54.5 MG ORAL.....                   | 2  | SYMPAZAN FILM 20 MG ORAL.....                      | 1  |
| EXXUA TABLET EXTENDED                               |    | SYMPAZAN FILM 5 MG ORAL.....                       | 1  |
| RELEASE 24 HOUR 72.6 MG ORAL.....                   | 2  | <i>tacrolimus ointment 0.03 % external</i> .....   | 9  |
| EXXUA TITRATION PACK TABLET                         |    | <i>tacrolimus ointment 0.1 % external</i> .....    | 9  |
| EXTENDED RELEASE 24 HOUR 18.2                       |    | <i>trospium chloride er capsule extended</i>       |    |
| MG ORAL.....  | 2  | <i>release 24 hour 60 mg oral</i> .....            | 10 |
| <i>febuxostat tablet 40 mg oral</i> .....           | 5  | XCOPRI (250 MG DAILY DOSE)                         |    |
| <i>febuxostat tablet 80 mg oral</i> .....           | 5  | TABLET THERAPY PACK 100 & 150                      |    |
| FETZIMA CAPSULE EXTENDED                            |    | MG ORAL.....                                       | 1  |
| RELEASE 24 HOUR 120 MG ORAL.....                    | 2  | XCOPRI (350 MG DAILY DOSE)                         |    |
| FETZIMA CAPSULE EXTENDED                            |    | TABLET THERAPY PACK 150 & 200                      |    |
| RELEASE 24 HOUR 20 MG ORAL.....                     | 2  | MG ORAL.....                                       | 1  |
| FETZIMA CAPSULE EXTENDED                            |    | XCOPRI TABLET 100 MG ORAL.....                     | 1  |
| RELEASE 24 HOUR 40 MG ORAL.....                     | 2  | XCOPRI TABLET 150 MG ORAL.....                     | 1  |
| FETZIMA CAPSULE EXTENDED                            |    | XCOPRI TABLET 200 MG ORAL.....                     | 1  |
| RELEASE 24 HOUR 80 MG ORAL.....                     | 2  | XCOPRI TABLET 25 MG ORAL.....                      | 1  |
| FETZIMA TITRATION CAPSULE ER 24                     |    | XCOPRI TABLET 50 MG ORAL.....                      | 1  |
| HOUR THERAPY PACK 20 & 40 MG                        |    | XCOPRI TABLET THERAPY PACK 14                      |    |
| ORAL.....   | 2  | X 12.5 MG & 14 X 25 MG ORAL.....                   | 1  |
| <i>levetiracetam tablet disintegrating soluble</i>  |    | XCOPRI TABLET THERAPY PACK 14                      |    |
| <i>250 mg oral</i> .....                            | 1  | X 150 MG & 14 X200 MG ORAL.....                    | 1  |

|                                |    |
|--------------------------------|----|
| XCOPRI TABLET THERAPY PACK 14  |    |
| X 50 MG & 14 X100 MG ORAL..... | 1  |
| XHANCE EXHALER SUSPENSION 93   |    |
| MCG/ACT NASAL.....             | 11 |
| ZONISADE SUSPENSION 100 MG/5ML |    |
| ORAL.....                      | 1  |