



Step Therapy Criteria

Step Therapy Group

ESOMEPRAZOLE

Drug Names

ESOMEPRAZOLE MAGNESIUM

Step Therapy Criteria

Coverage will be provided if two of the following generic alternatives: omeprazole capsules, pantoprazole tablets, or lansoprazole capsules have been tried (at least a 30 day supply in the prior 180 days).

Step Therapy Group

URINARY ANTISPASMODICS

Drug Names

TOLTERODINE TARTRATE, TOLTERODINE TARTRATE ER

Step Therapy Criteria

Coverage will be provided if oxybutynin, oxybutynin extended-release, fesoterodine, trospium immediate-release or mirabegron has been tried (at least a 30 day supply in the prior 180 days).

This information is available in other formats, such as Braille, large print, and audio.