

Medica Central Health Plan  
Medica Advantage (HMO-POS)

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# 2025 Step Therapy (ST) Criteria

## **Please Read**

This document contains information about our Step Therapy Criteria.

## **Step Therapy**

In some cases, Medica Central Health Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition Medica Central Health Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Medica Central Health Plan will then cover Drug B

## **Additional Resources to Help**

For more recent information or other questions, please contact Medica Central Health Plan Customer Service at **1 (877) 301-3326 (TTY:711)**, 8 am – 8 pm, weekdays (year-round) and weekends (Oct. 1 – Mar. 31), or visit **Central.Medica.Com/Medicare**

This document was updated on 01/01/2025.

# Medica Central Health Plan Medicare Part D Plan

Step Therapy Criteria  
*Last Updated* 11/15/2024

## Products Affected

febuxostat 40mg tab

## Details

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Criteria      Step Therapy requires trial of generic allopurinol.

## **Products Affected**

febuxostat 80mg tab

## **Details**

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Criteria	Step Therapy requires trial of generic allopurinol.
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## **Products Affected**

LEVALBUTEROL 45MCG/ACT INHALER

## **Details**

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Criteria	Step Therapy requires trial of a formulary albuterol HFA product.
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**Products Affected**

PROLIA 60MG/ML SYRINGE

**Details**

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Criteria      Step Therapy requires trial of one (1) formulary bisphosphonate. Step not required for the treatment of: 1) Bone loss in men receiving androgen deprivation therapy for prostate cancer or 2) Bone loss in women receiving adjuvant aromatase inhibitor therapy for breast cancer.

## **Products Affected**

TRINTELLIX 10MG TAB

## **Details**

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Criteria	Step therapy requires trial of one of the following generic antidepressants: escitalopram, sertraline, fluoxetine, citalopram, paroxetine, fluvoxamine, bupropion, venlafaxine, desvenlafaxine, or duloxetine.
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## **Products Affected**

TRINTELLIX 20MG TAB

## **Details**

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Criteria	Step therapy requires trial of one of the following generic antidepressants: escitalopram, sertraline, fluoxetine, citalopram, paroxetine, fluvoxamine, bupropion, venlafaxine, desvenlafaxine, or duloxetine.
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## **Products Affected**

TRINTELLIX 5MG TAB

## **Details**

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Criteria	Step therapy requires trial of one of the following generic antidepressants: escitalopram, sertraline, fluoxetine, citalopram, paroxetine, fluvoxamine, bupropion, venlafaxine, desvenlafaxine, or duloxetine.
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## Medica Customer Services

For more recent information or other questions, please contact Medica Central Health Plan Customer Service.

Local: **1 (608) 828-1978**

Toll-free: **1 (877) 301-3326 (TTY: 711)**

### Year-round

8 a.m. – 8 p.m. weekdays

### Oct. 1–March 31

8 a.m. – 8 p.m. weekends

Visit: [Central.Medica.Com/Medicare](https://Central.Medica.Com/Medicare)

### Medica Central Health Plan

### Medica Advantage

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