

# 2024 Medicare Part D Step Therapy Requirements

Effective: December 1<sup>st</sup>, 2024

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## MEDICATION(S) SUBJECT TO STEP THERAPY

MUPIROCIN 2% CREAM

#### CRITERIA

PRIOR USE OF MUPIROCIN OINTMENT WITHIN THE PREVIOUS 12 MONTHS.

### RYTARY

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

#### CRITERIA

PRIOR USE OF CARBIDOPA-LEVODOPA IMMEDIATE RELEASE OR EXTENDED RELEASE WITHIN THE PREVIOUS 12 MONTHS.

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

TAZAROTENE 0.05% CREAM, TAZAROTENE 0.05% GEL, TAZAROTENE 0.1% GEL

#### CRITERIA

PRIOR USE OF TAZAROTENE 0.1% CREAM WITHIN THE PREVIOUS 12 MONTHS.