Table 2 – Cigna Step Therapy Program Medications

Step 1 Medications*	Step 2 Medications**	Step 3 Medications***
STATIN		
atorvastatin (generic Lipitor®) lovastatin (generic Mevacor®) pravastatin (generic Pravachol®) simvastatin (generic Zocor®)		Altoprev® Crestor® 5mg, 10mg Lipitor® (brand only) Livalo® Mevacor® (brand only) Pravachol® (brand only) Zocor® (brand only)
TOPICAL IMMUNOMODULATORS		
TWO AGENTS REQUIRED alclometasone (generic Aclovate®) amcinonide ApexiCon E® betamethasone (generic Diprosone®/Diprolene®/ Diprolene AF®/Valisone®) clobetasol (generic Clobex® Shampoo & Lotion/ Olux®/Temovate®) desonide (generic Tridesilon®/Desowen®) desoximetasone (generic Topicort®/Topicort LP®) diflorasone (generic ApexiCon®) fluocinolone (generic Synalar™) fluocinonide (generic Lidex®) fluticasone (generic Cutivate®) Halac/Halonate PAC (generic Ultravate PAC® combo oint/lot) halobetasol (generic Ultravate®) hydrocortisone (generic Lacticare-HC®/Nuzon®/ Carmol HC®/Locoid®/Westcort®/Ala-Scalp HP®) mometasone (generic Elocon®) prednicarbate (generic Dermatop®) triamcinolone (generic Kenalog®)	ApexiCon® (brand only) Capex Shampoo® Carmol HC® (brand only) Cloderm® Cordran®/Cordran SP® Derma-Smoothe/FS® Kenalog® aerosol Nucort® Texacort®	Aclovate® (brand only) Ala-Scalp HP® (brand only) Aqua Glycolic® HC Clobex® (brand only) Cutivate® (brand only) Dermatop® (brand only) Desonate® Desowen® (brand only) Diprolene®/Diprolene AF® (brand only) Elidel® Elocon® (brand only) First Hydrocortisone® Halog® Kenalog® (brand only) Locoid® (brand only) Luxiq® Momexin® Olux®/Olux-E® (brand only) Pandel® Pediaderm HC/TA® Protopic® Scalacort DK® Synalar® (brand only) Temovate® (brand only) Topicort®/Topicort LP® (brand only) Ultravate®/Ultravate PAC®/ Ultravate X® (brand only) Vanos® Verdeso® Westcort® (brand only)
ATYPICAL ANTIPSYCHOTIC AGENTS		
clozapine (generic Clozaril®) clozapine ODT 12.5mg, 25mg, 100mg, (generic Fazaclo®) olanzapine/olanzapine ODT (generic Zyprexa®/Zyprexa Zydis®) quetiapine (generic Seroquel®) risperidone (generic Risperdal®/Risperdal M®) risperidone ODT ziprasidone (generic Geodon®)	Seroquel XR®	Clozaril® (brand only) Fanapt® Fazaclo® (brand only) Geodon® (brand only) Invega® Latuda® Risperdal®/Risperdal M® (brand only) Saphris® Seroquel® (brand only) Zyprexa®/Zyprexa Zydis® (brand only)

*Step 1 medications are typically generics but may vary based on benefit plan.
**Step 2 medications are typically Preferred Brand medications but may vary based on benefit plan.
***Step 3 medications are typically Non-Preferred Brand medications but may vary based on benefit plan.

Cigna.

Table 2 – Cigna Step Therapy Program Medications

Step 1 Medications*	Step 2 Medications**	Step 3 Medications***
ACEI/ARB		
TWO AGENTS REQUIRED benazepril (generic Lotensin®) benazepril/HCTZ (generic Lotensin HCT®) candesartan/HCTZ (generic Atacand HCT®) captopril (generic Capoten®) captopril/HCTZ (generic Capozide®) enalapril (generic Vasotec®) enalapril/HCTZ (generic Vaseretic®) eprosartan (generic Teveten®) fosinopril (generic Monopril®) fosinopril/HCTZ (generic Monopril HCT®) irbesartan (generic Avapro®) irbesartan/HCTZ (generic Avalide®) lisinopril (generic Prinivil®/Zestril®) lisinopril/HCTZ (generic Prinzide®/Zestoretic®) losartan (generic Cozaar®) losartan/HCTZ (generic Hyzaar®) moexipril (generic Univasc®) moexipril/HCTZ (generic Uniretic®) perindopril (generic Aceon®) quinapril (generic Accupril®) quinapril/HCTZ (generic Accuretic®) ramipril (generic Altace®) trandolapril (generic Mavik®) valsartan/HCTZ (generic Diovan HCT®)	Diovan® Diovan HCT® (brand only)	Accupril® (brand only) Accuretic® (brand only) Aceon® (brand only) Altace® (brand only) Atacand® Atacand HCT® (brand only) Avalide® (brand only) Avapro® (brand only) Benicar® Benicar HCT® Cozaar® (brand only) Edarbi™ Edarbyclor™ Hyzaar® (brand only) Lotensin® (brand only) Lotensin HCT® (brand only) Mavik® (brand only) Micardis® Micardis HCT® Monopril® (brand only) Monopril HCT® (brand only) Prinivil®/Zestril® (brand only) Prinzide®/Zestoretic® (brand only) Teveten® (brand only) Teveten HCT® Uniretic® (brand only) Univasc® (brand only) Vaseretic® (brand only) Vasotec® (brand only)
ADHD		
amphetamine/dextroamphetamine (generic Adderall®) d-amphetamine (generic Dexedrine®/Dextrostat®) dexmethylphenidate (generic Focalin®) methamphetamine (generic Desoxyn®) methylphenidate (generic Ritalin®/Ritalin LA® 20mg, 30mg, 40mg/Ritalin SR®/Metadate CD®/ Metadate ER®/Concerta®)	Adderall XR® (brand only) Focalin XR® (brand only) Ritalin LA® 10mg Vyvanse®	Adderall® (brand only) Concerta® (brand only) Daytrana® Desoxyn® (brand only) Dexedrine® (brand only) Focalin® (brand only) Metadate CD® (brand only) Methylin® Ritalin®/Ritalin LA® 20mg, 30mg, 40mg/Ritalin SR® (brand only)
ASTHMA NEBULIZER SOLUTIONS		
albuterol (generic Accuneb®) albuterol sulfate levalbuterol (generic Xopenex®)		Accuneb® (brand only) Brovana® Perforomist® Xopenex® (brand only)

Table 2 – Cigna Step Therapy Program Medications

Step 1 Medications*	Step 2 Medications**	Step 3 Medications***
BONE RESORPTION INHIBITORS		
alendronate (generic Fosamax®) ibandronate (generic Boniva®)		Actonel® Atelvia® Binosto™ Boniva® (brand only) Fosamax® (brand only) Fosamax Plus D® Skelid®
HYPNOTICS		
zaleplon (generic Sonata®) zolpidem (generic Ambien®) zolpidem ER (generic Ambien CR®)	Silenor®	Ambien® (brand only) Ambien CR® (brand only) Edluar® Intermezzo® Lunesta® Rozerem® Sonata® (brand only) ZolpiMist™
ACUTE ORAL NARCOTICS		
TWO AGENTS REQUIRED aspirin w/codeine butorphanol codeine codeine phos/carisoprodol/asa dhcodeine bt/acetaminophen/caff (generic Panlor SS®) hydrocodone w/acetaminophen (generic Lortab®/Lorcet®/Lorcet Plus®/Norco®/ Vicodin®/Vicodin ES®/Vicodin HP®/Xodol®) hydromorphone (generic Dilaudid®) ibuprofen/hydrocod (generic Vicoprofen®) levorphanol tartrate meperidine (generic Demerol®) morphine sulfate (generic MSIR®/Roxanol®) opium tincture opium/belladonna alkaloids (generic B and O Supprettes®) oxycodone (generic Oxecta™/Roxicodone®) oxycodone w/acetaminophen (generic Percocet®/Tylox®/Primlev®/Xolox®) pentazocine-acetaminophen pentazocine-naloxone tramadol (generic Ryzolt®/Ultram®/Ultram ER®) tramadol w/acetaminophen (generic Ultracet®)	Lortab® Solution (brand only) Roxicet®	ConZip™ Demerol® (brand only) Dilaudid® (brand only) Hycet® Lorcet®/Lorcet Plus® (brand only) Lortab® (brand only) Magnacet® Maxidone® Norco® (brand only) Oxecta™ Panlor SS® (brand only) Percocet® (brand only) Percodan® (brand only) Primlev® (brand only) Roxicodone® (brand only) Rybix™ ODT Ryzolt® (brand only) Synalgos-DC® Tylox® (brand only) Ultracet® (brand only) Ultram®/Ultram ER® (brand only) Vicodin®/Vicodin ES®/ Vicodin HP® (brand only) Vicoprofen® (brand only) Xodol® (brand only) Zamicet® Zolvit® Zydone®
NASAL STEROIDS		
flunisolide (generic Nasarel®) fluticasone (generic Flonase®) triamcinolone acetonide nasal spray (generic Nasacort AQ®)	Nasonex® Veramyst®	Beconase AQ® Dymista™ Flonase® (brand only) Nasacort AQ® (brand only) Omnaris® QNASL™ Rhinocort Aqua® Zetonna™

Table 2 – Cigna Step Therapy Program Medications

Step 1 Medications*	Step 2 Medications**	Step 3 Medications***
NSAID		
TWO AGENTS REQUIRED diclofenac (generic Voltaren®/Voltaren-XR®/Cataflam®) diclofenac/misoprostol (generic Arthrotec®) etodolac (generic Lodine®/Lodine XL®) fenoprofen calcium flurbiprofen (generic Ansaid®) ibuprofen (generic Motrin®) indomethacin (generic Indocin®/Indocin SR®) ketoprofen (generic Oruvail®) meclofenamate sodium mefenamic acid (generic Ponstel®) meloxicam (generic Mobic®) nabumetone naproxen (generic Naprosyn®/EC-Naprosyn®/Anaprox®) oxaprozin (generic Daypro®) piroxicam (generic Feldene®) sulindac (generic Clinoril®) tolmetin (generic Tolectin®/Tolectin DS®)	Celebrex® Indocin® Oral Susp Indocin® Suppos Vimovo®	Anaprox® (brand only) Ansaid® (brand only) Arthrotec® (brand only) Cambia® Cataflam® (brand only) Clinoril® (brand only) Daypro® (brand only) Duexis® Feldene® (brand only) Flector® Mobic® (brand only) Motrin® (brand only) Nalfon® Naprelan® Naprosyn®/EC-Naprosyn® (brand only) Pennsaid® Ponstel® (brand only) Voltaren®/Voltaren-XR® (brand only) Voltaren® Gel Zipsor®
URINARY TRACT ANTISPASMODIC AGENTS		
flavoxate (generic Urispas®) oxybutynin (generic Ditropan®/Ditropan XL®) tolterodine (generic Detrol®) trospium (generic Sanctura®/Sanctura XR®)	Detrol LA® Oxytrol® Toviaz® Vesicare®	Detrol® (brand only) Ditropan XL® (brand only) Enablex® Gelnique® Myrbetriq™ Sanctura® (brand only) Sanctura XR® (brand only)
PROTON PUMP INHIBITORS		
lansoprazole (generic Prevacid®) omeprazole (generic Prilosec®) omeprazole/sod bicarb 20mg, 40mg capsules (generic Zegerid®) pantoprazole (generic Protonix®)	Dexilant® (formerly known as Kapidex®)	Aciphex® Nexium® Prevacid® (brand only) Prilosec® (brand only) Protonix® (brand only) Zegerid®
SSRI/SNRI ANTIDEPRESSANTS		
TWO AGENTS REQUIRED bupropion (generic Wellbutrin®/Wellbutrin SR®/ Wellbutrin XL®) citalopram (generic Celexa®) escitalopram (generic Lexapro®) fluoxetine (generic Prozac®/Prozac Weekly®/Sarafem®/ Rapiflux®) fluvoxamine paroxetine (generic Paxil®/Paxil CR®) sertraline (generic Zoloft®) venlafaxine (generic Effexor®/Effexor XR®)	Cymbalta® Pristiq® Wellbutrin XL® (brand only)	Aplenzin® Celexa® (brand only) Effexor® (brand only) Effexor XR® (brand only) Forfivo™ XL Lexapro® (brand only) Paxil®/Paxil CR® (brand only) Pexeva® Prozac® (brand only) Prozac Weekly® (brand only) Sarafem® (brand only) Venlafaxine ER® Viibryd™ Wellbutrin® (brand only) Wellbutrin SR® (brand only) Zoloft® (brand only)