

# **Medica Prime Solution Formulary**

## **Step Therapy Requirements**

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Medica Part D Formulary Step Therapy Requirements

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## **Step Therapy Criteria**

**Step Therapy Group**

ULORIC

**Drug Names**

ULORIC

**Step Therapy Criteria**

Coverage will be provided if allopurinol has been tried (at least a 30-day supply in the prior 180 days)