

## CY 2011 Step Therapy Record Layout

**Required File Format = ASCII File - Tab Delimited**

**Do not include a header record**

**Filename extension should be “.TXT”**

<b>Field Name</b>	<b>Field Type</b>	<b>Field Length</b>	<b>Field Description</b>	<b>Sample Field Value(s)</b>
Step_Therapy_Group_Desc	CHAR Always Required	100	<p>Description of step therapy drug treatment group. Field should be repeated in the record based upon number of groups declared in Step_Therapy_Total_Groups in the Formulary File submission upload.</p> <p>Description of the step therapy group as it appears on the submitted formulary file. This field must exactly match the value entered in the Step_Therapy_Group_Desc field on the Formulary File.</p> <p>Note: For a given Rx CUI, each Group Description must be unique.</p> <p>Note: For each Step Therapy Group Description, there must be a Rx CUI with a Step Therapy Value equal to 1.</p>	<p>Step_Therapy_Group_Desc = “CHF Therapy”</p> <p>Step_Therapy_Group_Desc = “Angina Therapy”</p> <p>Step_Therapy_Group_Desc = “CVD Therapy”</p>
Step_Therapy_Criteria	CHAR Always Required	4000	Description of the criteria of the step therapy drug.	
ST_Criteria_Change_Indicator	CHAR Always Required	1	If the ST criteria content did not change for this group description compared to CY 2010, please place a “0” in this field. If this group description is new, or the criteria content changed in any way, please place a “1” in this field”.	

**Please Note: Certain characters are restricted from HPMS. The submitted file will be rejected if any of the following characters are included in any field: 1) greater than sign (>), 2) less than sign (<), 3) semi-colon (;), and 4) ampersand (&).**