

<b>Policy Name:</b>	<b>Jublia (efinaconazole) and Kerydin (tavaborole)</b>	<b>Policy#:</b>	<b>2314P</b>
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## Purpose of the Policy

The purpose of this policy is to define coverage criteria for Jublia (efinaconazole) and Kerydin (tavaborole).

## Statement of the Policy

Health Alliance Medical Plans will approve the use of Jublia (efinaconazole) and Kerydin (tavaborole) if the following criteria are met.

## Criteria

### 1. Coverage Criteria

- 1.1 Limited to the treatment of confirmed complex fungal nail infections as supported by:
  - Documented diagnosis of onychomycosis of the toenails due to *Trichophyton rubrum* or *Trichophyton mentagrophyte*, confirmed by KOH testing, PAS stain, or fungal culture
  - Photos showing that two or more nails are involved
  - Documentation that a co-morbid condition is present (e.g. diabetes, presently on a chemotherapy regimen, immunocompromised state)
  - Documentation that the patient is experiencing pain and discomfort from infected nails, which impedes daily functions such as walking and wearing shoes
- 1.2 Ordered by a Podiatrist (foot doctor) or Dermatologist (skin doctor)
- 1.3 Documented failure after 12 weeks, intolerance, or contraindication to terbinafine tablet
- 1.4 Documented failure after 48 weeks, intolerance, or contraindication to ciclopirox topical solution
- 1.5 Documented failure after 12 weeks, intolerance, or contraindication to itraconazole capsule

### 2. Approval Period

- 2.1 Approve for 1 year at a time

## CPT Codes

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## HCPCS Codes

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## References

1. Jublia [Prescribing Information]. Bridgewater, NJ: Bausch Health Companies LLC; March 2022.
2. Kerydin [Prescribing Information]. Palo Alto, CA: Anacor Pharmaceuticals Inc; August 2018.
3. de Berker D. Clinical practice. Fungal nail disease. *N Engl J Med* 2009; 360:2108.
4. Gupta AK, Mays RR, Versteeg SG, et al. Global perspectives for the management of onychomycosis. *Int J*

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5. Crawford F, Young P, Godfrey C, et al. Oral treatments for toenail onychomycosis: a systematic review. Arch Dermatol 2002; 138:811.
6. Kreijkamp-Kaspers S, Hawke K, Guo L, et al. Oral antifungal medication for toenail onychomycosis. Cochrane Database Syst Rev 2017; 7: 31.
7. Havu V, Heikkilä H, Kuokkanen K, et al. A double-blind, randomized study to compare the efficacy and safety of terbinafine (Lamisil) with fluconazole (Diflucan) in the treatment of onychomycosis. Br J Dermatol 2000; 142:97.

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#### DISCLAIMER

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