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| **Clinical Policy Title:** | ivermectin |
| **Policy Number:** | RxA.482 |
| **Drug(s) Applied:** | Soolantra® |
| **Original Policy Date:** | 03/06/2020 |
| **Last Review Date:** | 01/01/2024 |
| **Line of Business Policy Applies to:** | All lines of business (except Medicare) |

## Criteria

**I. Initial Approval Criteria**

**A. Rosacea** (must meet all)**:**

1. Diagnosis of rosacea;
2. Trail and failure of a ≥ 6 consecutive weeks of at least one (1) of the following (oral doxycycline, oral minocycline, topical metronidazole, or topical azelaic acid) unless contraindicated or clinically significant adverse effects are experienced.

**Approval Duration**

**All Lines of Business (except Medicare):** 12 months

**II. Continued Therapy Approval**

**A. Rosacea** (must meet all):

1. Member currently receiving medication, excluding manufacturer samples.

**Approval Duration**

**All Lines of Business (except Medicare):** 12 months

**References**


1. Stein L, Kircik L, Fowler J, et al. Efficacy and safety of ivermectin 1% cream in treatment of papulopustular rosacea: results of two randomized, double-blind, vehicle-controlled pivotal studies. J Drugs Dermatol. 2014:13(3):316-323. Available at: https://pubmed.ncbi.nlm.nih.gov/24595578/. Accessed October 23, 2023.
2. Oge' LK, Muncie HL, and Phillips-Savoy AR. Rosacea: diagnosis and treatment. American Family Physician. Am Fam Physician 2015;92(3):187-196. Available at: https://pubmed.ncbi.nlm.nih.gov/26280139/ . Accessed October 23, 2023.
3. Schaller M, Almeida LMC, Bewly A, et al. Recommendations for rosacea diagnosis, classification and management: update from the global ROS acea CO nsensus 2019 panel. Br J Dermatol. 2020;182(5):1269-1276. Available at: https://pubmed.ncbi.nlm.nih.gov/31392722/. Accessed October 23, 2023.
4. Thiboutot D, Anderson R, Cook-Bolden F, et al. Standard management options for rosacea: the 2019 update by the national rosacea society expert committee. Journal of the American Academy of Dermatology. 2020;82(6):1501-1510. Available at: https://pubmed.ncbi.nlm.nih.gov/32035944/. Accessed October 23, 2023.


| Review/Revision History | Review/Revision Date | P&T Approval Date |
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| Policy established. | 01/2020 | 03/06/2020 |

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| Policy was reviewed<br>1. Policy title was updated.<br>2. Line of business policy applies to was updated to All lines of business.<br>3. Continued Therapy criteria II.A.1 was rephrased to "Currently receiving medication that has been authorized by RxAdvance..."<br>4. Approval duration updated as 12 months for initial and continued therapy approval.<br>5. References were reviewed and updated. | 09/04/2020 | 12/07/2020 |
| Policy was reviewed:<br>1. Dosing information was updated to include Hepatic Impairment dosing regimen.<br>2. Dosage form was updated to remove 30 gm and 60 gm.<br>3. Continued Therapy Criteria II.A.1 was rephrased to "Member is currently receiving medication that has been authorized by RxAdvance...".<br>4. References were reviewed and updated. | 08/30/2021 | 12/07/2021 |
| Policy was reviewed:<br>1. References were reviewed and updated. | 04/04/2022 | 07/18/2022 |
| Policy was reviewed:<br>1. Initial Approval Criteria, I.A.3: Updated to remove “at up to maximally indicated doses”. | 06/25/2022 | 07/18/2022 |
| Policy was reviewed:<br>1. References were reviewed and updated. | 06/29/2023 | 07/13/2023 |
| Policy was reviewed:<br>1. Updated Lines of Business Policy Applies to All lines of business (except Medicare).<br>2. Initial Approval Criteria, I.A: Updated to remove prior age criteria “Age ≥ 18 years”.<br>3. Initial and Continued Therapy Approval criteria was updated to remove dosing criteria.<br>4. Approval duration was updated to All Lines of Business (except Medicare): 12 months.<br>5. Continued Therapy Approval Criteria, II.A.1: updated to “Member is currently receiving…”<br>6. References were reviewed and updated. | 09/26/2023 | 10/19/2023 |
| Policy was reviewed:<br>1. Removed reauthorization requirement for positive response to therapy.<br>2. References were reviewed and updated. | 10/23/2023 | 01/01/2024 |