Jublia (efinaconazole solution) and Ciclodan (ciclopirox solution) 8% Prior Approval
On and Off Health Exchange Plans Only
October 2016

OVERVIEW
Jublia (efinaconazole solution) and Ciclodan (ciclopirox) 8% are antifungal topical treatment for toenail onychomycosis.

POLICY STATEMENT
This prior authorization is intend to allow approval only for indications not excluded under the plan with clinically supported data. This policy only pertains to On and Off Health Exchange plans.

RECOMMENDED AUTHORIZATION CRITERIA
Coverage of Jublia or Ciclodan (ciclopirox) 8% are recommended in those who meet the following criteria:

1. Jublia or Ciclodan (ciclopirox) 8% is not being requested for an excluded use (e.g. weight loss, sexual dysfunction, fertility, onychomycosis); AND
2. Indication requested is FDA approved or supported by compendium data such as: Clinical Pharmacology, Drugdex® Evaluations, AHFS Drug Information, and/or published literature with positive outcomes data (primarily PubMed).

Approval Duration: 365 days (1 year)

References