Tretinoin

Covered Medication

- Tretinoin Cream (Retin-A®, Avita®)

What it does and How it’s used

- Tretinoin is a derivative of vitamin A.
- Tretinoin is used in the treatment of acne and other skin conditions.
- Tretinoin works by enhancing the skin’s permeability and increasing the production of collagen. Tretinoin also increases skin cell turnover which aids in the expulsion of comedones.

Rationale for Prior Authorization

To reduce exposure to cost associated with use of tretinoin for the treatment of conditions outside the scope of the plan’s benefit e.g., appearance enhancement use such as for the mitigation of wrinkles or photodamaged skin AND to limit coverage to the treatment of skin conditions for which the use of tretinoin has proven effective.

Benefit Design

Coverage is determined through prior authorization for every claim

Prior Authorization Criteria

- Tretinoin is covered for treatment of the following dermatological conditions:
  - Acanthosis nigricans, Pseudoacanthosis nigricans
  - Acne, Acne keloidalis nuchae, Cystic acne, Acne vulgaris, Acne rosacea, Rosacea
  - Actinic Cheilitis/Actinic keratosis/ Actinic dermatitis/ Solar keratosis/ Senile keratosis
  - Darier’s disease
  - Dermal mucinosis
  - Discoid lupus erythematosus
  - Erythrokeratoderma variabilis, Mendes da Costa syndrome, keratosis rubra figurata
  - Fox Fordyce disease
  - Grover’s disease, Transient acantholytic dermatosis
  - Hiradenitis suppurative
  - Hyperkeratosis/ Hyperkeratotic eczema, Tylotic eczema
  - Ichthyoses
  - Keratoderma
  - Kyrie’s disease
  - Leukoplakia
  - Lichen planus
  - Malignancy
  - Molluscum contagiosum
  - Porokeratosis
  - Pseudofollicular barbae
  - Psoriasis
  - Sebaceous cysts, epidermoid cysts
- Tretinoin is also covered for the following dermatological conditions:
  - Favre Raucocet Disease with comedones
  - Folliculitis in the presence of previous failure to topical antibiotics
  - Verucca planae (e.g., flat warts) located on the face
- Benefit approved for 12 months and is renewable.

References

