

POLICY NAME	Winlevi (clascoterone)	POLICY #	2829P
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Criteria

Coverage Criteria for Acne Vulgaris

- ☐ Documented diagnosis of acne vulgaris
- ☐ Documented trial and failure of at least two formulary generic agents (e.g., topical agents such as tretinoin, adapalene, or oral tetracyclines) or documented contraindication to all topical agents and oral tetracyclines

Exclusion Criteria – Any of the following prevents coverage

- ☐ Previous history of hypothalamic-pituitary-adrenal (HPA) axis suppression