

POLICY NAME	Xdemvy (lotilaner)	POLICY #	3206P
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Criteria

Coverage Criteria

- ☐ Diagnosis of demodex blepharitis infection as evidenced by presence of mites on eyelashes or eyelids
- ☐ Age 18 years or older
- ☐ Documented previous trial and failure with oral (by mouth) doxycycline