

## **Pharmacy Drug Policy Checklist**

POLICY NAME Xdemvy (lotilaner) POLICY #
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## Criteria

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