TAZORAC, FABIOR FOAM, TAZAROTENE POWDER
(tazarotene)

Pre - PA Allowance

Age  
Age less than 35 – no restriction
Age 35 or greater – no Pre-PA allowance

Prior-Approval Requirements

Age  
Age less than 35 – no restriction

Diagnoses

Patient must have ONE of the following:

1. Acne vulgaris
   a. Comedones
   b. Cysts (eruptive vellus hair cyst, cystic acne)
   c. Papules
   d. Pustules

2. Acne conglobata

3. Plaque psoriasis

4. Patient is at high risk (ie. immunocompromised, post organ transplant) with one of the following diagnoses:
   a. Actinic keratosis
   b. Basal cell carcinoma
   c. Squamous cell carcinoma

   AND the following for ALL indications:
   a. Female patients of reproductive potential have had a negative pregnancy test within the last 2 weeks AND will be advised to use effective contraception during treatment

Prior - Approval Limits

Duration  
12 months

Prior – Approval Renewal Requirements

Age  
Age less than 35 – no restriction
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(tazarotene)

Diagnoses

Patient must have ONE of the following:

1. Acne vulgaris
2. Acne conglobata
3. Plaque psoriasis
   a. Improvement in lesions
4. Patient is at high risk (ie. immunocompromised, post organ transplant) with one of the following diagnoses:
   a. Actinic keratosis
   b. Basal cell carcinoma
   c. Squamous cell carcinoma

AND the following for ALL indications:
   a. Female patients of reproductive potential are not currently pregnant AND will be advised to use effective contraception during treatment

Prior – Approval Renewal Limits
Same as above