

PRIOR AUTHORIZATION POLICY

- POLICY:** Topical Retinoids – Tazarotene Products Prior Authorization Policy
- Arazlo™ (tazarotene 0.045% lotion – Bausch Health US, LLC)
 - Fabior® (tazarotene 0.1% foam – Mayne Pharma)
 - Tazorac® (tazarotene 0.05% cream, 0.05% gel and 0.1% cream [generics], 0.1% gel – Allergan)

REVIEW DATE: 07/01/2020

OVERVIEW

Tazorac gel is indicated for the following uses:¹

- **Plaque psoriasis**, in patients with up to 20% body surface area involvement (0.05% and 0.1% strengths)
- **Facial acne vulgaris**, in patients with mild to moderate severity (0.1% strength only).

Tazorac cream (0.05% and 0.1%) is indicated for the following uses:²

- **Plaque psoriasis** involvement (0.05% and 0.1% strengths).
- **Acne vulgaris** (0.1% strength only).

Arazlo lotion is indicated for the topical treatment of acne vulgaris in patients ≥ 9 years of age.³

Fabior foam is indicated for the topical treatment of acne vulgaris use in patients ≥ 12 years of age.⁴

In addition to acne vulgaris and plaque psoriasis, topical tazarotene has been used to treat other medical skin conditions, such as basal cell carcinoma and congenital ichthyoses.⁵ Topical tazarotene has also been used to treat cosmetic skin conditions such as wrinkles, premature aging, and treatment of photo-aged or photo-damaged skin.

Avage® (tazarotene 0.1% cream) is indicated as an adjunctive agent for the mitigation (palliation) of facial fine wrinkling, facial mottled hyper- and hypo-pigmentation, and benign facial lentiginosities in patients who use comprehensive skin care and sunlight avoidance programs.⁶ Avage is not included in this Prior Authorization policy.

POLICY STATEMENT

Prior Authorization is recommended for prescription benefit coverage of Arazlo, Fabior, and Tazorac. All approvals are provided for the duration noted below.

Automation: None.

RECOMMENDED AUTHORIZATION CRITERIA

Coverage of topical tazarotene products is recommended for those who meet the following criteria:

FDA-Approved Indications

1. **Acne Vulgaris.** Approve for 3 years.
2. **Plaque Psoriasis (Psoriasis Vulgaris).** Approve for 3 years.

Other Uses with Supportive Evidence

3. **Treatment of Other Non-Cosmetic Conditions Not Listed Above.** Approve for 1 year.
Note: Examples of other non-cosmetic conditions include: psoriasis of fingernails or toenails, oral lichen planus, congenital ichthyoses (X-linked recessive ichthyosis, non-erythrodermic autosomal recessive lamellar ichthyosis, autosomal dominant ichthyosis vulgaris), basal cell carcinoma, mycosis fungoides, cutaneous T-cell lymphoma, keratosis pilaris (atrophicans), actinic keratoses, skin neoplasms, warts, dermatitis/eczema, folliculitis, acne rosacea, cystic acne, comedonal acne.

CONDITIONS NOT RECOMMENDED FOR APPROVAL

Coverage of topical tazarotene products is not recommended in the following situations:

1. **Cosmetic Conditions.** Cosmetic use is not recommended for coverage as this indication is excluded from coverage in a typical pharmacy benefit.
Note: Examples of cosmetic conditions include: alopecia, hyperpigmentation, liver spots, melasma/cholasma, seborrheic keratosis, stretch marks, scarring, wrinkles, premature aging, photo-aged or photo-damaged skin, mottled hyper- and hypopigmentation, benign facial lentigines, roughness, telangiectasia, skin laxity, keratinocytic atypia, melanocytic atypia, dermal elastosis.
2. Coverage is not recommended for circumstances not listed in the Recommended Authorization Criteria. Criteria will be updated as new published data are available.

REFERENCES

1. Tazorac topical gel 0.05%, 0.1% [prescribing information]. Irvine, CA: Allergan, Inc.; April 2018.
2. Tazorac cream 0.05%, 0.1% [prescribing information]. Irvine, CA: Allergan, Inc.; July 2017.
3. Arazlo™ lotion [prescribing information]. Bridgewater, NJ: Bausch Health US, LLC; December 2019.
4. Fabior foam 0.1% [prescribing information]. Greenville, NC: Mayne Pharma; November 2016.
5. DRUGDEX® System. Thomson Reuters (Healthcare) Inc. Available at: <http://www.micromedexolutions.com/home/dispatch>. Accessed on June 25, 2020. Search term: tazarotene.
6. Avage cream 0.1% [prescribing information]. Irvine, CA: Allergan, Inc.; September 2016.