



**BlueCross  
BlueShield**

Federal Employee Program.

## **TAZAROTENE**

**Tazorac (tazarotene), Arazlo (tazarotene), Fabior (tazarotene), tazarotene powder**

### **Pre - PA Allowance**

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

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### **Prior-Approval Requirements**

**Age**     35 years of age or older  
              No PA needed for age < 35

#### **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 (i.e., 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 will be advised to use effective contraception during treatment

### **Prior - Approval Limits**

**Duration**     12 months

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### **Prior – Approval *Renewal* Requirements**

**Age**     35 years of age or older  
              No PA needed for age < 35



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### **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
  - a. Improvement in lesions
4. Patient is at high risk (i.e., 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