

**BREXAFEMME
(ibrexafungerp)**

Patients who have filled at least a 1-day supply of fluconazole in the last 30 days are exempt from these Prior Authorization (PA) requirements.

Pre - PA Allowance

None

Prior-Approval Requirements

Patients who have filled at least a 1-day supply of fluconazole in the last 30 days are exempt from these Prior Authorization (PA) requirements.

Age 18 years of age or older **OR** post onset of menses

Diagnoses

Patient must have **ONE** of the following:

1. Vulvovaginal candidiasis (VVC)
2. Recurrent vulvovaginal candidiasis (RVVC)
 - a. Used to reduce the incidence of RVVC

AND ALL of the following:

1. Inadequate treatment response, intolerance, or contraindication to fluconazole
2. **NOT** being used in a footbath
3. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Brexafemme and for 4 days after the last dose

Prior - Approval Limits

Indication	Quantity	Duration
Vulvovaginal candidiasis (VVC)	4 tablets	7 days
Recurrent vulvovaginal candidiasis (RVVC)	12 tablets per 90 days	6 months

Prior – Approval *Renewal* Requirements

**BREXAFEMME
(ibrexafungerp)**

Each prior authorization (PA) request for Vulvovaginal candidiasis (VVC) is considered initiation of therapy due to the acute nature of the infection

Age 18 years of age or older **OR** post onset of menses

Diagnosis

Patient must have the following:

1. Recurrent vulvovaginal candidiasis (RVVC)
 - a. Used to reduce the incidence of RVVC

AND ALL of the following:

1. Prescriber has determined that the patient will benefit from an additional 6 months of therapy for prevention of RVVC
2. **NOT** being used in a footbath
3. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Brexafemme and for 4 days after the last dose

Prior - Approval *Renewal* Limits

Each prior authorization (PA) request for Vulvovaginal candidiasis (VVC) is considered initiation of therapy due to the acute nature of the infection

Indication	Quantity	Duration
Recurrent vulvovaginal candidiasis (RVVC)	12 tablets per 90 days	6 months (ONE renewal only)