



Federal Employee Program.

TOPICAL ANTIFUNGALS AND ANTIBIOTICS

Amzeeq 4% foam (minocycline)	Lotrisone* 1%/0.05% lotion (clotrimazole, betamethasone)
Bactroban 2% cream (mupirocin)	Metrocream 0.75% cream Rosadan 0.75% cream (metronidazole)
Bactroban 2% ointment (mupirocin)	Neo-Synalar 0.5%/0.025% cream (neomycin, fluocinolone)
Ciclodan 0.77% cream Loprox 0.77% cream (ciclopirox)	Naftin 1% gel, cream (naftifine)
Ciclodan nail lacquer 8% topical solution Penlac nail lacquer 8% Topical Solution (ciclopirox)	Naftin 2% gel, cream (naftifine)
Cleocin T 1% solution (clindamycin)	Nizoral 2% cream (ketoconazole)
Clindamax 1% gel Cleocin T 1% gel Glindagel 1% gel (clindamycin)	Nydamax 0.75% gel Rosadan 0.75% gel (metronidazole)
Clindamax 1% lotion Cleocin T 1% lotion (clindamycin)	Nystatin 100,000 unit/g cream
Clotrimazole 1% cream	Nystatin 100,000 unit/g ointment
Corticosporin cream (neomycin 3.5mg/1g, polymyxin B 10,000IU/1g, hydrocortisone 0.5%)	Nystatin-Triamcinolone 100,000 unit/g-0.1% cream
Corticosporin ointment (neomycin 3.5mg/1g, polymyxin B 5,000IU/1g, bacitracin 400IU/1g, hydrocortisone 1%)	Nystatin-Triamcinolone 100,000 unit/g-0.1% ointment
Econazole Nitrate 1% cream	Ovace* (sodium sulfacetamide) 10% cream
Emgel 2% gel (erythromycin)	Ovace* 10% and Ovace Plus* 9.8% (sodium sulfacetamide) foam
Erythromycin 2% solution	Ovace* and Ovace Plus Wash* (sodium sulfacetamide) 10% gel/cleansing gel
Evoclin 1% foam (clindamycin)	Ovace Plus Wash* (sodium sulfacetamide) 10% liquid
Gentamicin 0.1% cream	Ovace Plus* (sodium sulfacetamide) 9.8% lotion
Gentamicin 0.1% ointment	Ovace Plus* (sodium sulfacetamide) 10% shampoo
Ketoconazole 2% shampoo	Plexion NS (sodium sulfacetamide) 9.8% shampoo
Ketodan 2% foam Extina* 2% foam (ketoconazole)	Vusion topical ointment (miconazole 0.25%-zinc oxide 15%-white petrolatum 81.35%)
Loprox 0.77% gel (ciclopirox)	Xolegel* 2% gel (ketoconazole)
Loprox 0.77% suspension (ciclopirox)	Zilxi 1.5% foam (minocycline)
Lotrisone* 1%/0.05% cream (clotrimazole, betamethasone)	

Topical Antifungals and Antibiotics that do not have separate criteria



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* Prior authorization for the brand formulation applies only to formulary exceptions due to being a non-covered medication.

Pre - PA Allowance

Quantity

Drug	Quantity
Sodium sulfacetamide cleansing gel	355 units per 90 days
Sodium sulfacetamide shampoo	237 units per 90 days
Plexion NS shampoo	
Zilxi 1.5% foam	90 units per 90 days
Ketoconazole 2% shampoo	360 units per 90 days
All other products included in this policy	180 units per 90 days

Prior-Approval Requirements

Diagnosis

Patient must have the following:

1. FDA-approved indication supporting the use of topical product
2. Requested drug is **NOT** being used in a footbath

Prior - Approval Limits

Quantity

Drug	Quantity
Sodium sulfacetamide cleansing gel	355 units per 90 days
Sodium sulfacetamide shampoo	237 units per 90 days
Plexion NS shampoo	
Zilxi 1.5% foam	90 units per 90 days
Ketoconazole 2% shampoo	360 units per 90 days
All other products included in this policy	180 units per 90 days*

***Prior Authorization for more than one product at an individual quantity of 180 units per 90 days is allowed if being used to treat different indications.**



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Drug with Approved Formulary Exception Only	Quantity
Extina 2% foam	180 units per 90 days
Lotrisone 1%/0.05% cream, lotion	180 units per 90 days
Ovace cream, foam, gel, liquid, lotion	180 units per 90 days
Ovace cleansing gel	355 units per 90 days
Ovace shampoo	237 units per 90 days
Xolegel 2% gel	180 units per 90 days

Duration 6 months

Prior – Approval *Renewal Requirements*

Same as above

Prior-Approval *Renewal Limits*

Same as above