



Drug Name: Jublia (efinaconazole)

Date: 9-2017

Drug Name:	Jublia (efinaconazole)
Prescriber Restrictions:	
Age Restrictions:	18 years or older
Exclusion Criteria:	
Required Medical Information:	<ul style="list-style-type: none"> • Patient is an adult at least 18 years of age who is being treated for onychomycosis of the toe-nail(s) and has a medical record documenting all of the following: <ul style="list-style-type: none"> • Confirmed causative organism is EITHER: trichophyton rubrum or trichophyton mentagrophytes; AND • Patient is immunocompetent and has failed an adequate treatment trial (e.g., 12 weeks in duration) of oral terbinafine or itraconazole and further treatment is warranted after adequate reevaluation (3-6 months after treatment initiation) unless ONE of the following applies: <ul style="list-style-type: none"> ○ Patient experienced a significant adverse drug event while on oral agents; or ○ Has documented contraindication to use of oral agent as evidenced by: <ul style="list-style-type: none"> ▪ Pre-existing liver disease (terbinafine and itraconazole) ▪ Evidence of ventricular dysfunction such as heart failure or history of heart failure (itraconazole); • OR Individual has evidence of being non-immunocompetent and hence is not a candidate for terbinafine or itraconazole therapy.
Coverage duration:	12 months