

tadalafil, oral (ADCIRCA)
ALYQ (tadalafil, oral)

Diagnosis Considered for Coverage:

- Pulmonary Arterial Hypertension (WHO Group I)

Coverage Criteria:

For diagnosis listed above:

- Diagnosis is confirmed using right heart catheterization, **and**
- Patient is 18 years of age or older, **and**
- Dose does not exceed FDA label maximum.

For brand-name Adcirca:

- Meets above criteria for generic, **and**
- Allergic or intolerable side effect to the generic formulation.

Coverage Duration: Length of benefit

Effective: 09/01/2021