

tafenoquine (ARAKODA)

Diagnoses Considered for Coverage:

- Malaria - prevention

Coverage Criteria:

For prevention of malaria:

- Dose does not exceed FDA label maximum, **and**
- Patient is at least 18 years of age, **and**
- Intolerable side effect or contraindication to atovaquone 250 mg/proguanil 100 mg (Malarone).

Coverage Duration: varies

References:

1. Prescribing Information. Arakoda. Sixty Degrees Pharmaceuticals Inc. 2018.

Effective Date: 08/30/2023