

## delafloxacin (BAXDELA)

### Diagnoses Considered for Coverage:

- Acute Bacterial Skin and Skin Structure Infections (ABSSSI)
- Community acquired pneumonia (CAP)

### Coverage Criteria:

**For diagnosis of acute bacterial skin and skin structure infections (ABSSSI), approve if:**

#### MRSA bacterial infection

- Dose does not exceed 450 mg given twice per day, **and**
- Treatment duration does not exceed 14 days, **and**
- One of the following:
  - Prescribed by or in consultation with an infectious disease (ID) specialist, or
  - Provided C&S documenting MRSA and inadequate response, intolerable side effects, or contraindication to ONE oral antibiotic agent to which the identified organism is sensitive.

#### Non-MRSA bacterial infection

- Dose does not exceed 450 mg given twice per day, **and**
- Treatment duration does not exceed 14 days, **and**
- Prescribed by or in consultation with an infectious disease (ID) specialist, **and**
- Inadequate response, intolerable side effects, or contraindication with TWO formulary oral antibiotic agents to which the identified organism is sensitive on provided culture and sensitivity report.

**For diagnosis of community acquired pneumonia (CAP), approve if:**

- Patient is at least 18 years old, **and**
- Dose does not exceed 450 mg given twice per day, **and**
- Treatment duration does not exceed 10 days, **and**
- One of the following:
  - Patient already started on Baxdela, or
  - Prescribed by or in consultation with an infectious disease (ID) specialist, or
  - Patient is unable to use moxifloxacin and levofloxacin.

**Coverage Duration:** one time

Effective Date: 6/28/2023