

CRINONE 4% (progesterone vaginal gel)

Diagnosis Considered for Coverage:
<ul style="list-style-type: none">• Secondary amenorrhea (unusual stopping of menstrual periods)
Coverage Criteria:
For diagnosis listed above: <ul style="list-style-type: none">• Inadequate response or intolerable side effect with medroxyprogesterone (Provera), micronized progesterone (Prometrium), or norethindrone 5mg (Aygestin).
Coverage Duration: 1 month

Effective: 11/15/2012