

deflazacort tablet and oral suspension (EMFLAZA)

Diagnosis Considered for Coverage:

- Duchenne muscular dystrophy (DMD)

Coverage Criteria:

For Duchenne muscular dystrophy (DMD):

- Patient is at least 2 years of age, **and**
- Medical rationale why prednisone cannot be used, **and**
- Dose does not exceed 0.9 mg/kg daily.

Coverage Duration: one year

Effective Date: 09/27/2023