

IMVEXXY (estradiol, vaginal insert)

Diagnosis Considered for Coverage:

- Moderate to severe painful intercourse (dyspareunia) due to menopause

Coverage Criteria:

For diagnosis listed above:

- Dose does not exceed 8 inserts per 28 days, **and**
- Inadequate response, intolerable side effect, or contraindication with TWO vaginal estrogen drugs

Examples of Vaginal Estrogens
estradiol vaginal cream
estradiol vaginal tablet
Estring
Premarin vaginal cream

Coverage Duration: one year

Effective Date: 09/27/2023