

OBREDON (hydrocodone/guaifenesin, oral solution)

Diagnosis Considered for Coverage:

- Relief of non-productive cough

Coverage Criteria:

For diagnosis listed above:

- Not being used in patient younger than 12 years old, **and**
- Inadequate response or intolerable side effect to guaifenesin/codeine oral solution, **and**
- Dose does not exceed 6 doses of 10 ml per day, **and**
- For patients younger than 18 years: Provider is aware this medication can be potentially harmful in pediatric patients, and provider has monitoring plan for adverse side effects.

Coverage Duration: 7 days

Effective: 1/01/2019