blue 🗑 of california

ORAVIG (miconazole buccal tablet)

Diagnosis Considered for Coverage:

• Treatment of oropharyngeal candidiasis in adults

Coverage Criteria:

For diagnosis listed above:

- Not being used for esophageal candidiasis, and
- Inadequate response, intolerable side effect, or contraindication to clotrimazole troches (Mycelex Troches), **and**
- Dose does not exceed 50 mg per day for 14 days.

Coverage Duration: one time

Effective Date: 08/30/2023