

RAYOS (prednisone)

Diagnoses Considered for Coverage:

- Inflammatory conditions
- Immunosuppression therapy
- Endocrine conditions
- Neoplastic conditions - palliative therapy

Coverage Criteria:

For diagnoses listed above:

- Inadequate response or intolerable side effect with TWO preferred oral corticosteroids (e.g., dexamethasone, hydrocortisone, methylprednisone, and prednisone) OR medical rationale why all preferred oral corticosteroids noted above cannot be used.

Coverage Duration: one year

Effective Date: 11/29/2023