

## halobetasol 0.05% lotion (ULTRAVATE LOTION)

### Diagnoses Considered for Coverage:

- Psoriasis
- Inflammatory skin conditions (dermatoses)
- Atopic dermatitis

### Coverage Criteria:

#### For diagnoses listed above:

- Inadequate response or intolerable side effect with halobetasol 0.05% cream or ointment AND one other preferred topical steroid in the very high potency class.

<b>Preferred Very-high Potency</b>	<ul style="list-style-type: none"> <li>• augmented betamethasone dipropionate 0.05% gel, ointment, lotion (Diprolene)</li> <li>• clobetasol 0.05% cream, ointment, solution, gel, cream emollient (Temovate)</li> <li>• halobetasol 0.05% cream, ointment (Ultravate)</li> </ul>
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### Coverage Duration: 1 year

Effective Date: 11/30/2022