

## dexchlorpheniramine oral solution (RYCLORA)

## Diagnosis Considered for Coverage:

• Cold and allergy symptoms

## **Coverage Criteria:**

## For diagnosis listed above:

- For patient < 65 years old: Inadequate response, intolerable side effect, or contraindication to either carbinoxamine oral solution or cyproheptadine oral syrup, and
- For patient at least 65 years old: Provider is aware this medication can be potentially harmful, AND provider has a treatment plan and monitoring plan for adverse side effects.

Coverage Duration: one year

Effective Date: 09/27/2023