**SPORANOX ORAL SOLUTION (itraconazole oral solution)**

**Plan Limitations:**
- Does not apply to the following Blue Shield of California Medicare Part D plans:
  - Blue Shield 65 Plus (HMO) in Sacramento County
  - Blue Shield Medicare Basic Plan (PDP)

**Diagnoses Considered for Coverage:**
- All FDA-approved indications not otherwise excluded from Part D
- Sporotrichosis (cutaneous, lymphonodular, osteoarticular, pulmonary, disseminated, or meningeal)
- Tinea corporis, cruris, pedis, manuum, capitis, or versicolor
- Febrile neutropenia

**Coverage Criteria:**

1. **Systemic fungal infection with Blastomycosis, Histoplasmosis, Sporotrichosis, Aspergillosis, OR for prophylaxis against Aspergillosis or Histoplasmosis in immunosuppressed/compromised patients:**
   - Dose does not exceed FDA label maximum, AND
   - Patient has inability to swallow tablet or capsule formulation.

2. **Tinea fungal infection:**
   - Dose does not exceed FDA label maximum, AND
   - Patient has inability to swallow tablet or capsule formulation, AND
   - Treatment failure, intolerance, or contraindication with one formulary alternative (Tinea Capitis: oral terbinafine; Tinea Corporis, Cruris, Pedis or Manuum: topical antifungal, oral terbinafine, or oral Diflucan; Tinea Versicolor: topical ketoconazole or oral Diflucan; Onychomycosis: oral terbinafine).

3. **Allergic bronchopulmonary aspergillosis (ABPA):**
   - Dose does not exceed FDA label maximum, AND
   - Patient has inability to swallow tablet or capsule formulation, AND
   - Itraconazole is being used to taper oral corticosteroids.

4. **Prophylaxis against candidiasis, cryptococcosis, or coccidioidomycosis in immunosuppressed/compromised patients:**
   - Dose does not exceed FDA label maximum, AND
   - Patient has inability to swallow tablet or capsule formulation, AND
   - Treatment failure, intolerance, or contraindication to fluconazole.

**Coverage Duration:**
- Tinea Versicolor: 1 week
- Tinea Capitis: 1 month
- Onychomycosis: 3 months
- All other Tinea diagnoses: 2 weeks
- ABPA: 4 months
- All other diagnoses: annual

Updated 01/2017