

## STEP THERAPY POLICY

- POLICY:** Topical Vitamin D Analogs Step Therapy Policy
- Calcipotriene 0.005% foam– Trifluent Pharma (authorized generic)
  - Calcipotriene 0.005% solution (generic only)
  - Enstilar<sup>®</sup> (calcipotriene 0.005% and betamethasone dipropionate 0.064% foam – LEO Pharma)
  - Dovonex<sup>®</sup> (calcipotriene cream 0.005% – LEO Pharma, generic)
  - Sorilux<sup>®</sup> (calcipotriene foam 0.005% – Mayne Pharma)
  - Taclonex<sup>®</sup> (calcipotriene 0.005% and betamethasone dipropionate 0.064% ointment – LEO Pharma, generic)
  - Wyzora<sup>®</sup> (calcipotriene 0.005% and betamethasone dipropionate 0.064% cream – MC2 Therapeutics)

**REVIEW DATE:** 11/09/2022

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### OVERVIEW

The topical vitamin D analog products are indicated for the treatment of **plaque psoriasis**. The specific indications are as follows:<sup>1-10</sup>

- Calcipotriene cream and ointment are indicated for the treatment of **plaque psoriasis of the body in adults**.
- Calcipotriene solution is indicated for the treatment of **plaque psoriasis of the scalp in adults**.
- Dovonex cream is indicated for the treatment of **plaque psoriasis in adults**.
- Enstilar is indicated for the topical treatment of **plaque psoriasis in patients ≥ 12 years** of age.
- Calcipotriene foam 0.005% (authorized generic) and Sorilux is indicated for the topical treatment of **plaque psoriasis of the scalp and body in adults and pediatric patients ≥ 4 years** of age.
- Taclonex ointment is indicated for the topical treatment of **plaque psoriasis in patients ≥ 12 years** of age.
- Wyzora cream is indicated for the topical treatment of **plaque psoriasis in patients ≥ 18 years** of age.

Several of the topical vitamin D analogs are indicated for use in patients < 18 years of age: calcipotriene foam (authorized generic), generic calcipotriene-betamethasone dipropionate ointment, Enstilar foam, Sorilux foam, and Taclonex ointment.

### POLICY STATEMENT

This program has been developed to encourage the use of a Step 1 Product prior to the use of a Step 2 Product. If the Step Therapy rule is not met for a Step 2 Product at the point of service, coverage will be determined by the Step Therapy criteria below. All approvals are provided for 1 year in duration.

**Automation:** A patient with a of one Step 1 Product within the 130-day look-back period is excluded from Step Therapy.

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**Step 1:** generic calcipotriene cream, generic calcipotriene ointment, generic calcipotriene solution

**Step 2:** generic calcipotriene-betamethasone dipropionate ointment, calcipotriene foam (authorized generic), Dovonex cream, Enstilar foam, Sorilux foam, Taclonex ointment, Wyzora cream

### CRITERIA

1. If the patient has tried one Step 1 Product, approve a Step 2 Product.
2. If the patient is < 18 years of age, approve calcipotriene foam (authorized generic), generic calcipotriene-betamethasone dipropionate ointment, Enstilar foam, Sorilux foam, or Taclonex ointment.
3. No other exceptions are recommended.

### REFERENCES

1. Calcipotriene cream [prescribing information]. Mahwah, NJ: Glenmark; March 2021.
2. Calcipotriene and betamethasone propionate ointment [prescribing information]. Allegan, MI: Perrigo; January 2020.
3. Dovonex<sup>®</sup> cream [prescribing information]. Madison, NJ: LEO Pharma.; June 2021.
4. Calcipotriene foam [prescribing information]. San Antonio, TX: Trifluent Pharma; August 2020.
5. Sorilux<sup>®</sup> foam [prescribing information]. Greenville, NC: Mayne Pharma; November 2019.
6. Taclonex<sup>®</sup> ointment [prescribing information]. Madison, NJ: LEO Pharma; March 2020.
7. Taclonex<sup>®</sup> suspension [prescribing information]. Madison, NJ: LEO Pharma; June 2020.
8. Wyzora<sup>®</sup> cream [prescribing information]. Dover, DE: MC2 Therapeutics; November 2020.
9. Enstilar<sup>®</sup> foam [prescribing information]. Madison, NJ: LEO Pharma; August 2021.
10. Calcipotriene solution [prescribing information]. Gurnee, IL: Akorn; June 2022.