

Impetigo Agents:

Altabax(retapamulin), Bactroban_Centany (mupirocin), Xepi (ozenaxocin) Policy Number: C8409-A

CRITERIA EFFECTIVE DATES:

ORIGINAL EFFECTIVE DATE	LAST REVIEWED DATE	NEXT REVIEW DUE
		BY OR BEFORE
11/1/2015	3/3/2021	4/26/2022
J CODE	TYPE OF CRITERIA	LAST P&T
		APPROVAL/VERSION
NA	RxPA	Q2 2021
	KXPA	20210428C8409-A

PRODUCTS AFFECTED:

Bactroban (mupirocin), mupirocin, Centany(mupirocin), XEPI (ozenoxacin 1% cream), Altabax (retapamulin)

DRUG CLASS:

Antibiotics - Topical

ROUTE OF ADMINISTRATION:

External

PLACE OF SERVICE:

Retail Pharmacy

The recommendation is that medications in this policy will be for pharmacy benefit coverage and patient self-administered

AVAILABLE DOSAGE FORMS:

Bactroban Nasal OINT 2%, Mupirocin OINT 2%, Centany OINT 2%, Bactroban 2% oint, Centany AT KIT 2% Bactroban CREAM 2%, Mupirocin Calcium CREA 2% ALTABAX 1% (15gram, 30 gram), XEPI 1% cream- 30-gram tube

FDA-APPROVED USES:

Mupirocin 2% ointment is indicated for the treatment of impetigo due to Staphyloccoccus aureus and Streptococcus pyogenes.

Mupirocin 2% cream is indicated for the treatment of secondarily infected traumatic skin lesions (up to 10 cm in length or100 cm2 in area) caused by susceptible strains of S. aureus and Streptococcus pyogenes. Retapamulin 1% ointment (Altabax) is indicated for the topical treatment of impetigo due to Staphylococcus aureus (methicillin-susceptibleisolates only) or Streptococcus pyogenes in adults and children 9 months and older.

Ozenoxacin 1% cream (Xepi) is indicated for the topical treatment of impetigo due to S. aureus or S. pyogenes in adult and pediatricpatents 2 months of age and older.

COMPENDIAL APPROVED OFF-LABELED USES:

None



COVERAGE CRITERIA: INITIAL AUTHORIZATION

DIAGNOSIS:

Impetigo, secondarily infected traumatic skin lesion and eradication of nasal colonization of MRSA

REQUIRED MEDICAL INFORMATION:

A. FOR ALL INDICATIONS:

- Documentation member is being treated for impetigo or infection suspected to be S. aureus or S. pyogenes susceptible to mupirocin for the topical treatment AND
- Documentation of a trial/failure to a 5-day course of mupirocin ointment 2% within the last 28 days or labeled contraindication or documented allergy to one or more inactive ingredients present in the ointment formulation AND
- 3. FOR CENTANY, XEPI AND MUPRIOCIN CREAM REQUESTS ONLY: Documentation of a trial and failure or absolute FDA labeled contraindication to mupirocin ointment

DURATION OF APPROVAL:

BACTROBAN (mupirocin) Nasal Ointment 2%: 5 days. Initial authorization: 30 days, Continuation of therapy: NA

QUANTITY:

None

PRESCRIBER REQUIREMENTS:

No requirement

AGE RESTRICTIONS:

ALTABAX (Retapamulin 1% ointment): 9 months and older.

XEPI (Ozenoxacin 1% cream): 2 months and older.

MUPIROCIN: no restriction

CONTINUATION OF THERAPY:

NA

CONTRAINDICATIONS/EXCLUSIONS/DISCONTINUATION:

All other uses of Bactroban/Centany (mupirocin) are considered experimental/investigational and therefore, will follow Molina's Off-Label policy.

OTHER SPECIAL CONSIDERATIONS:

None

BACKGROUND:

None

APPENDIX:

None

Prior Authorization Criteria



- 1. Altabax (retapamulin) [prescribing information]. Research Triangle Park, NC: GlaxoSmithKline; September 2019.
- 2. Bactroban (mupirocin calcium) ointment [prescribing information]. Research Triangle Park, NC: GlaxoSmithKline; March 2017.
- 3. Bactroban (mupirocin calcium) cream [prescribing information]. Research Triangle Park, NC: GlaxoSmithKline; March 2017.
- 4. Bactroban (mupirocin) cream [prescribing information]. Research Triangle Park, NC: GlaxoSmithKline; February 2020.
- 5. Centany (mupirocin) ointment [prescribing information]. Allegan, MI: Medimetriks Pharmaceuticals Inc; May 2017.
- 6. Mupirocin [prescribing information]. Mahwah, NJ: Glenmark Pharmaceuticals Inc; July 2017.
- 7. Stevens DL, et al. Practice Guidelines for the Diagnosis and Management of Skin and Soft-Tissue Infections: 2014 Updated by the Infectious Disease Society of America. Clin Infect Dis. 2014 Jul 15;59(2):e10-52.
- 8. Baddour LM. Impetigo. UptoDate,® accessed 2014 October; available from http://uptodate.com
- 9. Xepi (ozenoxacin) [prescribing information]. Woburn, MA: Biofrontera Inc; January 2020.