



An Anthem Company

Empire BlueCross BlueShield HealthPlus (Empire) **Hot Tip: Topical Corticosteroid**

Your Empire patients on nonpreferred products may experience a pharmacy claim rejection. To avoid additional steps or delays at the pharmacy, consider prescribing preferred products whenever possible. Prior authorization and step therapy may apply to select preferred products. Coverage should be verified by reviewing the *Preferred Drug List (PDL)* on the Empire provider website. The *PDL* is subject to change quarterly.

Preferred topical corticosteroids <i>Low potency</i>	Preferred topical corticosteroids <i>Medium potency</i>
<p><u>Cream:</u> Hydrocortisone 0.5% Cream Hydrocortisone 1% Cream Hydrocortisone 2.5% Cream Hydrocortisone-Aloe 1% Cream</p> <p><u>Ointment:</u> Hydrocortisone 0.5% Ointment Hydrocortisone 1% Ointment Hydrocortisone 2.5% Ointment</p> <p><u>Solution; non-oral:</u> Scalpicin 1% Anti-Itch Solution Scalp Relief 1% Solution Texacort 2.5% Solution</p>	<p><u>Cream:</u> Betamethasone Valerate 0.1% Cream Triamcinolone 0.025% Cream Triamcinolone 0.1% Cream Triderm 0.1% Cream Mometasone 0.1% Cream Fluticasone 0.025% Cream</p> <p><u>Ointment:</u> Triamcinolone 0.025% Ointment Triamcinolone 0.1% Ointment Trianex 0.05% Ointment Mometasone 0.1% Ointment Fluticasone 0.025% Ointment Prednicarbate 0.1% Ointment</p> <p><u>Solution; non-oral:</u> Mometasone 0.1% Solution</p>
Preferred topical corticosteroids <i>High potency</i>	Preferred topical corticosteroids <i>Very high potency</i>
<p><u>Cream:</u> Betamethasone Dipropionate Augmented 0.05% Cream Diflorasone 0.05% Cream Fluocinonide-E 0.05% Cream Triamcinolone 0.5% Cream</p> <p><u>Ointment:</u> Amcinonide 0.1% Ointment Betamethasone Valerate 0.1% Ointment Triamcinolone 0.5% Ointment</p> <p><u>Lotion:</u> Amcinonide 0.1% Lotion Betamethasone Dipropionate 0.05% Lotion</p>	<p><u>Cream:</u> Clobetasol 0.05% Cream Clobetasol Emollient 0.05% Cream Halobetasol 0.05% Cream</p> <p><u>Ointment:</u> Clobetasol 0.05% Ointment Halobetasol 0.05% Ointment</p> <p><u>Gel:</u> Clobetasol 0.05% Gel</p> <p><u>Solution; non-oral:</u> Clobetasol 0.05% Solution Cormax 0.05% Solution</p>

If you have questions regarding this *Hot Tip*, call Provider Services at **1-800-450-8753**.

PDL: <https://mediproviders.empireblue.com/ny/pages/formularies.aspx>

www.empireblue.com/nymedicaidoc

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