



Drug Name: Pimecrolimus cream 1%

Effective date: 6/1/2020

Reviewed: 3/2020, 1/2021

Required Medical Information:	The member has trialed and experienced an inadequate treatment response or intolerance to formulary tacrolimus ointment
Quantity Limit:	30 grams per fill and 120 grams per 30 days
Coverage Duration:	12 months
Coding Logic for Step Therapy:	Pimecrolimus cream 1% will pay if there is at least one paid claim within the last 365 days of formulary tacrolimus ointment 0.03% or 0.1%