



AETNA BETTER HEALTH®  
Coverage Policy/Guideline

Name: Onychomycosis

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Effective Date: 2/13/2025

Last Review Date: 1/2025

Applies to:	<input checked="" type="checkbox"/> Illinois	<input type="checkbox"/> Florida	<input type="checkbox"/> Michigan
	<input checked="" type="checkbox"/> New Jersey	<input checked="" type="checkbox"/> Maryland	<input checked="" type="checkbox"/> Florida Kids
	<input checked="" type="checkbox"/> Pennsylvania Kids	<input type="checkbox"/> Virginia	

**Intent:**

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for onychomycosis under the patient's prescription drug benefit.

**Description:**

**Jublia**

Jublia topical solution, 10% is an azole antifungal indicated for the topical treatment of onychomycosis of the toenail(s) due to *Trichophyton rubrum* and *Trichophyton mentagrophytes*.

**Kerydin**

Kerydin topical solution, 5% is an oxaborole antifungal indicated for the treatment of onychomycosis of the toenails due to *Trichophyton rubrum* or *Trichophyton mentagrophytes*.

**Applicable Drug List:**

Jublia  
Kerydin

**Policy/Guideline:**

**The requested drug will be covered with prior authorization when the following criteria are met:**

- The requested drug is being prescribed for onychomycosis of the toenail(s) due to *Trichophyton rubrum* or *Trichophyton mentagrophytes*

**AND**

- The patient's diagnosis has been confirmed with a fungal diagnostic test (for example, potassium hydroxide [KOH] preparation, fungal culture, or nail biopsy)

**AND**

- The patient had a trial and failure, or there was a contraindication, with two formulary antifungal agents (for example, itraconazole, oral terbinafine, or ciclopirox)

**Approval Duration and Quantity Restrictions:**

**Approval:** 12 months

**Quantity Level Limit:** Reference Formulary for drug specific quantity level limits



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**References:**

1. Jublia [package insert]. Bridgewater, NJ: Bausch Health US LLC; March 2022.
2. Kerydin [package insert]. Melville, NY: Fougera Pharmaceuticals Inc.; August 2018.
3. Lexicomp Online, AHFS DI (Adult and Pediatric) Online. Waltham, MA: UpToDate, Inc.; 2024. <https://online.lexi.com>. Accessed September 10, 2024.
4. Micromedex (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: 09/10/2024).
5. Frazier WT, Santiago-Delgado ZM, Stupka KC. Onychomycosis: Rapid Evidence Review. American Academy of Family Physicians. 2021;104:359-368.