Criteria Based Consultation Prescribing Program
CRITERIA FOR DRUG COVERAGE
fluvastatin sodium tablet (Lescol XL®)

Non-formulary **fluvastatin sodium tablet (Lescol XL®)** will be covered on the prescription drug benefit when the following criteria are met:

- Allergy to all statins within the recommended statin intensity on the commercial formulary^  
  -OR-
- Intolerance to all statins within the recommended statin intensity on the commercial formulary^  
  -OR-
- Contraindicated drug interaction to all statins within the recommended statin intensity on the commercial formulary^  
  -OR-
- Dose Change Only: Patient previously met criteria and is already taking the drug.

Note(s):
^ Kaiser Permanente Northwest commercial formulary can be found at: https://healthy.kaiserpermanente.org/health-wellness