Ecoza

Description

Ecoza (econazole)

Background
Ecoza topical foam is a prescription medicine used on the skin to treat athlete's foot that is between the toes (interdigital tinea pedis) caused by the organisms *Trichophyton rubrum*, *Trichophyton mentagrophytes* and *Epidermophyton floccosum* in patients 12 years of age and older (1).

Regulatory Status
FDA-approved indications: Ecoza is indicated for the treatment of interdigital tinea pedis caused by *Trichophyton rubrum*, *Trichophyton mentagrophytes*, and *Epidermophyton floccosum* in patients 12 years of age and older (1).

Safety and effectiveness of Ecoza in pediatric patients under 12 years of age has not been established (1).

Related policies
Ertaczo, Exelderm, Jublia, Kerydin, Luzu, Oxistat

Policy
This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Ecoza may be considered medically necessary in patients 12 years of age or older with interdigital tinea pedis with laboratory and clinical documentation of one of the infections:
Ecoza is considered **investigational** in patients less than 12 years of age and for all other indications.

**Prior-Approval Requirements**

**Age**

12 years of age or older

**Diagnosis**

Patient must have the following:

1. Interdigital Tinea Pedis

**AND ALL** of the following:

1. Laboratory and clinical documentation of **ONE** of the infections:
   a. *Trichophyton rubrum*
   b. *Trichophyton mentagrophytes*
   c. *Epidermophyton floccosum*
2. Inadequate treatment response, intolerance, or contraindication to a topical or oral antifungal legend medication

**Prior – Approval Renewal Requirements**

**Age**

12 years of age or older

**Diagnosis**

Patient must have the following:

1. Interdigital Tinea Pedis

**AND ALL** of the following:

1. Laboratory and clinical documentation of **ONE** of the infections:
   a. *Trichophyton rubrum*
   b. *Trichophyton mentagrophytes*
   c. *Epidermophyton floccosum*
2. **NOT** used in a previously treated location within last 12 months
### Section: Prescription Drugs  
**Effective Date:** October 1, 2019

### Subsection: Topical Products  
**Original Policy Date:** May 29, 2015

### Subject: Ecoza  
**Page:** 3 of 3

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#### Policy Guidelines

**Pre - PA Allowance**

None

**Prior - Approval Limits**

| Duration | 1 month |

**Prior – Approval Renewal Limits**

| Duration | 1 month |

#### Rationale

**Summary**

Ecoza is antifungal cream used topically to treat interdigital tinea pedis caused by the organisms *Trichophyton rubrum, Trichophyton mentagrophytes and Epidermophyton floccosum*. Safety and effectiveness of Ecoza in pediatric patients under the age of 12 has not been established (1).

Prior approval is required to ensure the safe, clinically appropriate and cost effective use of Ecoza while maintaining optimal therapeutic outcomes.

**References**


#### Policy History

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<td>June 2015</td>
<td>Addition to PA</td>
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<tr>
<td>December 2016</td>
<td>Annual editorial review and reference update</td>
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<td>Addition of age to the renewal section</td>
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<td>September 2017</td>
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#### Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on September 13, 2019 and is effective October 1, 2019.