

Roszet (rosuvastatin-ezetimibe)

Diagnoses Considered for Coverage:

- Hyperlipidemia
- Homozygous familial hypercholesterolemia (HoFH)

Coverage Criteria:

For coverage review, approve if:

- Patient is CURRENTLY receiving BOTH ezetimibe AND rosuvastatin as separate tablets, **and**
- Request is to reduce pill burden, **and**
- Dose does not exceed 10mg ezetimibe along with 40mg rosuvastatin.

Coverage Duration: length of benefit

Effective: 09/01/2021