

Candesartan



Included Products: Atacand, Atacand-HCT (candesartan)

Created: 03/31/2016

Revised: 03/09/2023

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Updated: 04/01/2023

Heart Failure

Initial Criteria		If yes	If no
1.	Is the request for the treatment of reduced ejection fraction (systolic) heart failure?	Continue to #2.	Do not approve.
2.	Is documentation of intolerance or failure of an ACE inhibitor included with the request?	Continue to #3.	Do not approve.
3.	Approve for lifetime.		

Hypertension

Initial Criteria		If yes	If no
1.	Is the request for the treatment of hypertension?	Continue to #2.	Do not approve.
2.	Has the patient tried maximum tolerated doses of losartan AND irbesartan AND at least one medication from three of the following classes: a. Calcium channel blockers (amlodipine, nifedipine, diltiazem, verapamil) b. Beta blockers (metoprolol, carvedilol, atenolol) c. Alpha blockers (prazosin, terazosin, doxazosin) d. Thiazides (chlorthalidone, HCTZ) e. Other (clonidine, spironolactone)	Continue to #3	Do not approve.
3.	Approve for lifetime.		

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Migraine Prevention

Initial Criteria		If yes	If no
1.	Is the request for the prevention of migraines?	Continue to #2.	Do not approve.
2.	Approve for lifetime.		