

Vitamins, Formulary



Included Products: vitamins and minerals, prenatal vitamins

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All Diagnoses

Initial Criteria		If yes	If no
1.	Which type of multivitamin product is requested? a. Pre-natal: continue to #3. b. Combination with fluoride: continue to #2. c. AquADEKs or DEKAs: Continue to #4 d. Other (no fluoride, not prenatal): continue to #5.		
2.	Is the member under the age of 3?	Approve until age 3.	Do not approve. Not FDA approved. For kids age less than 19, fluoride+MV chew tabs covered.
3.	Does the member meet both of the following? a. Female Gender AND b. Age less than 50.	Approve until age 50.	Continue to #5.
4.	Does the member have a diagnosis of cystic fibrosis?	Approve for lifetime.	Do not approve.
5.	Does the member have a documented vitamin deficiency requiring multi-vitamin supplementation?	Approve as long as deficiency is expected to last.	Do not approve. Not FDA approved.