

**Enbrel for Psoriasis  
Prior Authorization Criteria**

- 1. Psoriasis affects  $\geq 10\%$  of body surface area (moderate to severe psoriasis).**
- 2. Psoriasis has significant impact on the patient's quality of life and/or patient is disabled or has psoriatic arthritis.**
- 3. Systemic treatment has been previously required.**
- 4. Phototherapy is contraindicated, unavailable, or psoriasis is resistant to phototherapy.**
- 5. Documentation of previous treatment is present.**
- 6. Patient must be 18 years or older.**
- 7. Initial treatment plan must be done in consultation with a dermatologist or rheumatologist.**

Adopted 9/15/04