



Montana Healthcare Programs  
Drug Prior Authorization Coverage Criteria

Albenza™ (albendazole)

**Review Criteria**

Member must meet all the following criteria:

- For the treatment of Pinworms:
  - Member 21 years of age or older
    - Approval granted for two 400mg doses (initial dose and repeat dose 2 weeks after)
  - Members under the age of 21 must trial the over-the-counter (OTC) Reese's Pinworm Suspension
    - **Members less than or equal to two years of age:** If documented failure on the covered OTC product, approval will be granted for one 200mg dose.
      - Confirmation of ongoing worms is required for approval of second dose, three weeks after first dose was taken.
    - **Members older than two years of age:** If documented failure on the covered OTC product, approval will be granted for two 400mg doses (initial dose and repeat dose 2-3 weeks after).
- For the treatment of other worms, approval will be granted on a case-by-case basis.