Cox-2 Inhibitors (Proposed Criteria)

Cox-2 Inhibitors are a covered benefit of Nevada Medicaid subject to prior authorization.

1. Coverage

   a. Approved diagnoses: osteoarthritis, degenerative joint disease, rheumatoid arthritis, juvenile rheumatoid arthritis, dysmenorrheal, familial adenomatous polyposis (FAP) or acute pain in adults.

   b. One of the following criteria must be met:

      1. Patient has a documented history of gastrointestinal bleeding, ulceration or perforation of the stomach, small intestine or large intestine.
         Note: Patient should also be receiving protective PPI therapy.

      2. Concurrent use of oral corticosteroids or anticoagulants.
         Note: Patient should also be receiving protective PPI therapy.

      3. Therapeutic trial and failure on a minimum of two (2) different non-COX-2 NSAIDs.
         Note: At least one of the trials must include concomitant protective PPI therapy.

      4. Aged 65 or older
         Note: Patient should also be receiving protective PPI therapy if for chronic use

2. Limitations (Exclusionary Criteria)

   a. History of allergies to sulfonamides, aspirin or other NSAIDs (non-steroidal anti-inflammatory drugs).

   b. Patient is being treated with daily aspirin therapy for cardioprophylaxis.
      Exception: Patients receiving protective PPI therapy.

   c. Patient has a documented history of cardiac events; e.g. stroke, myocardial infarction, or has undergone coronary artery bypass graft procedure in the past 6 months.

3. Authorization Period

   Initial Coverage Period:    FAP 400mg BID for 6 months initially, then 1 year
                              All other indications: 1 year

4. PA Guidelines:

   The PA must be initiated by the prescriber or the prescriber's agent.