Policy Title  Cyclooxygenase-2 (COX-2) Inhibitors and Meloxicam (Mobic®)

Policy Number  FS.CLIN.36

Application of Pharmacy Policy is determined by benefits and contracts. Benefits may vary based on product line, group or contract. Some medications may be subject to precertification, age, gender or quantity edits. Individual member benefits must be verified.

This Pharmacy Policy document describes the status of pharmaceutical information and/or technology at the time the document was developed. Since that time, new information relating to drug efficacy, interactions, contraindications, dosage, administration routes, safety or FDA approval may have changed. If the Medical/Pharmacy Reviewer is aware of any new information on the subject of this document, please provide it promptly to the Medical/Pharmacy Policy Department. This information may include new FDA approved indications, withdrawals or other FDA alerts. This type of information is relevant not only when considering whether this Policy should be updated, but also when applying it to current requests for coverage.

Members are advised to use participating pharmacies in order to receive the highest level of benefits.

Policy

Cyclooxygenase-2 (COX-2) inhibitors can be used to treat various pain disorders in individuals who cannot tolerate, or who have contraindications to, non-selective non-steroidal anti-inflammatory drugs (NSAIDs). Meloxicam (Mobic®), a preferential inhibitor of the COX-2 enzyme, is indicated to treat the signs and symptoms of osteoarthritis and a variety of other pain disorders.

The use of all COX-2 inhibitors and meloxicam (Mobic®) require prior authorization (ie, clinical pharmacy and/or Medical Director review).

Policy Description

Cyclooxygenase-2 (COX-2) inhibitors and meloxicam (Mobic®) fall into a broad class of agents called non-steroidal anti-inflammatory drugs (NSAIDs). Since COX-2 inhibitors bind selectively to the COX-2 enzyme and not the COX-1 enzyme, these drugs are unique from traditional NSAIDs. Meloxicam (Mobic®), a preferential inhibitor of the COX-2 enzyme, exhibits greater inhibitory activity against COX-2 than COX-1; its selectivity is claimed to confer a lower propensity for adverse gastrointestinal effects compared with traditional NSAIDs.

Blocking the COX-2 enzyme has been shown to impede the production of the chemical messengers (prostaglandins) that cause the pain and swelling associated with arthritis inflammation.

Policy Guideline Inclusion

CELECOXIB (CELEBREX®)

Celecoxib (Celebrex®) is approved when one of the following inclusion criteria is met:

- Documentation of familial adenomatous polyposis (FAP)
- Documentation of the failure of a meloxicam-containing product and one of the following:
  - Documentation of the trial and failure of two additional non-steroidal anti-inflammatory drugs (NSAIDs)
  - Documentation that the individual is 65 years of age or older
  - Documentation of concurrent warfarin use (within the last 90 days)
  - Documentation of a bleeding disorder
  - Documentation of concurrent systemic steroid treatment
- Documentation of a history of gastrointestinal bleed, peptic ulcer, gastroesophageal reflux disease (GERD), or Barrett's esophagus.
- Documentation of a concomitant condition in which celecoxib (Celebrex®) offers a significant advantage over non-COX-2
selective NSAIDs and meloxicam (Mobic®).

**MELOXICAM (MOBIC®)**

**Brand meloxicam (Mobic®)** is approved when the following inclusion criterion is met:

- Documentation of trial and failure or contraindication to generic meloxicam.

**Policy Guideline Exclusion**

**CELECOXIB (CELEBREX®)**

Celecoxib (Celebrex®) is denied when all of the following exclusion criteria are present:

- No documentation of familial adenomatous polyposis (FAP)
- No documentation of a failure of a meloxicam-containing product and one of the following:
  - No documentation of trial and failure of two additional NSAIDs
  - No documentation that the individual is 65 years of age or older
  - No documentation of concurrent warfarin use (within the last 90 days)
  - No documentation of a bleeding disorder
  - No documentation of concurrent systemic steroid treatment
- No documentation of a history of gastrointestinal bleed, peptic ulcer, GERD, or Barrett’s esophagus
- Documentation of a sulfonamide allergy (A sulfonamide allergy is exclusionary for celecoxib [Celebrex®]; documentation of a tolerated trial of sulfonamide is required for approval.)
- Documentation of an aspirin/NSAID allergy
- No documentation of a concomitant condition in which celecoxib (Celebrex®) offers a significant advantage over non-COX-2 selective NSAIDs and meloxicam (Mobic®) MELOXICAM (MOBIC®)

**MELOXICAM (MOBIC®)**

**Brand meloxicam (Mobic®)** is denied when any of the following exclusion criteria are present:

- No documentation of trial and failure or contraindication to generic meloxicam
- Documentation of an aspirin/NSAID allergy

**Policy List of Applicable Drugs**

<table>
<thead>
<tr>
<th>Drug</th>
<th>Osteoarthritis</th>
<th>Rheumatoid Arthritis</th>
<th>Primary Dysmenorrhea</th>
<th>Acute Pain</th>
<th>Familial Adenomatous Polyposis (FAP)</th>
<th>Migraines</th>
<th>Exclude if Sulfonamide Allergy Exists</th>
<th>Exclude if Non-steroidal Anti-inflammatory Drugs (NSAIDs) or Aspirin Allergy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Celebrex®</td>
<td>X</td>
<td>X</td>
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<td>Mobic®</td>
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**COX-2 Inhibitors**

<table>
<thead>
<tr>
<th>Brand Name</th>
<th>Generic Name</th>
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<tbody>
<tr>
<td>Celebrex</td>
<td>celecoxib</td>
</tr>
</tbody>
</table>

**Preferential Inhibitor of COX-2**
**Policy References**


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