Criteria Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE Diclofenac capsule (Zorvolex)

<u>Initiation (new start) criteria</u>: Non-formulary **diclofenac capsule (Zorvolex)** will be covered on the prescription drug benefit when the following criteria for new therapy, stable or new member coverage are met:

- Prescribed for treatment of mild to moderate pain
- Documented clinically significant intolerance, treatment failure or contraindication to acetaminophen and four formulary NSAIDs (ibuprofen, naproxen, meloxicam, etodolac, nabumetone, indomethacin)
- Documented clinically significant intolerance or treatment failure to diclofenac tablets (e.g. diclofenac sodium DR or 24hr SR) that would be expected to improve with capsule formulation

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Revised: 02/14/19 Effective: 03/21/19 All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest

