# blue 🗑 of california

# meclofenamate capsule

## Diagnosis Considered for Coverage:

- Arthralgia
- Dysmenorrhea
- Fever
- Headache
- Pain
- Osteoarthritis
- Rheumatoid arthritis

#### **Coverage Criteria**:

#### For diagnoses listed above:

- Dose does not exceed 400 mg per day, and
- Inadequate response to two NSAIDS OR intolerable side effect or contraindication to all the NSAIDs not expected with meclofenamate.

## Preferred NSAIDs

flurbiprofen ibuprofen indomethacin SR indomethacin ketorolac tablet meloxicam nabumetone naproxen 250 mg, 375 mg, 500 mg tablet, 125 mg/5 ml suspension piroxicam sulindac

#### Coverage Duration: one year

Effective Date: 8/2/2023