

methocarbamol 1000 mg tablet

Diagnoses Considered for Coverage:

- Musculoskeletal pain

Coverage Criteria:

For diagnosis of musculoskeletal pain:

For patient less than 65 years old:

- Dose does not exceed 4000 mg per day, **and**
- Intolerance or contraindication to methocarbamol 750 mg and 500 mg tablet not expected with methocarbamol 1000 mg.

For patient at least 65 years old:

- Dose does not exceed 4000 mg per day, **and**
- Intolerance or contraindication to methocarbamol 750 mg and 500 mg tablet not expected with methocarbamol 1000 mg, **and**
- Prescribing or consulting physician is aware this medication can be potentially harmful or contraindicated in patients 65 years old or older and that the medication is appropriately prescribed for the member, **and**
- Prescribing or consulting physician has monitoring plan for adverse side effects, **and**
- Prescribing or consulting physician has an anticipated treatment duration.

Coverage Duration: 1 year

References:

1. Prescribing Information. Methocarbamol. AustarPharma, LLC. 2022.

Effective Date: 5/31/2023