

## Commercial/Healthcare Exchange PA Criteria

*Effective: March 1, 2009*

**Prior Authorization:** Antimalarials

**Products Affected:** Coartem (artemether and lumefantrine) oral tablet, mefloquine hydrochloride oral tablet, chloroquine phosphate oral tablet

**Medication Description:** Mefloquine is an antimalarial agent. Its exact mechanism of action is not known.

**Covered Uses:**

1. Coartem: Treatment of acute, uncomplicated malaria infections due to Plasmodium falciparum (P. falciparum) in patients 2 months of age and older with a bodyweight of 5 kg and above.
2. Mefloquine hydrochloride: Treatment of mild to moderate acute malaria caused by mefloquine-susceptible strains of P. falciparum (both chloroquine-susceptible and resistant strains) or by Plasmodium vivax.
3. Chloroquine phosphate: Suppressive treatment and for acute attacks of malaria due to P. vivax, P. malariae, P. ovale, and susceptible strains of P. falciparum. The drug is also indicated for the treatment of extraintestinal amebiasis.

**Exclusion Criteria:**

1. Coartem:
  - a. Coadministration of strong inducers of CYP3A4 such as rifampin, carbamazepine, phenytoin, and St. John's wort
  - b. Patients with severe or complicated P. falciparum malaria.
2. Mefloquine hydrochloride: Patients with a known hypersensitivity to mefloquine or related compounds (e.g., quinine and quinidine)
3. Chloroquine phosphate:
  - a. Patients with retinal or visual field changes either attributable to 4-aminoquinoline compounds or to any other etiology
  - b. Patients with known hypersensitivity to 4-aminoquinoline compounds.

**Required Medical Information:**

1. Diagnosis

**Age Restrictions:**

Coartem: 2 months of age and older

Mefloquine hydrochloride: 6 months of age and older

Chloroquine phosphate: N/A

**Prescriber Restrictions:** N/A

**Coverage Duration:** 2 weeks

**Other Criteria:**

**Coartem**

- A. Patient has a diagnosis of acute, uncomplicated malaria infections due to Plasmodium falciparum (P. falciparum)

***Mefloquine hydrochloride***

- A. Patient has a diagnosis of mild to moderate acute malaria caused by mefloquine-susceptible strains of *P. falciparum* (both chloroquine-susceptible and resistant strains) or by *Plasmodium vivax*.

***Chloroquine phosphate***

- A. Patient has a diagnosis of acute malaria due to *P. vivax*, *P. malariae*, *P. ovale*, and susceptible strains of *P. falciparum* OR extraintestinal amebiasis.

***\*Note: Malaria prevention is a benefit exclusion per the ConnectiCare Membership Agreement***

**References:**

1. MEFLOQUINE HYDROCHLORIDE oral tablets, mefloquine HCl oral tablets. Barr Laboratories Inc. (per DailyMed), Sellersville, PA, 2013
2. COARTEM(R) oral tablets, artemether lumefantrine oral tablets. Novartis Pharmaceuticals Corporation (per FDA), East Hanover, NJ, 2019
3. Chloroquine phosphate oral tablets, chloroquine phosphate oral tablets. West-ward Pharmaceutical Corp, Eatontown, NJ, 2009

**Policy Revision history**

<b>Rev #</b>	<b>Type of Change</b>	<b>Summary of Change</b>	<b>Sections Affected</b>	<b>Date</b>
1	New Policy	New Policy	All	3/2009
2	Update	Moved to updated template Added age restrictions	All	2/7/2020