



Drug Name: Cimzia (certolizumab pegol)
 Date: 9-2017

Drug Name:	Cimzia (certolizumab pegol)
Prescriber Restrictions:	
Age Restrictions:	
Exclusion Criteria:	
Required Medical Information:	<ul style="list-style-type: none"> • Patient is being treated for moderate to severe RA and has failed a trial with at least one DMARD and/or Enbrel or Humira due to inadequate response and/or intolerance or • Patient is at least 18 years of age and diagnosed with active ankylosing spondylitis as defined by a BASDAI greater than 4 and <ul style="list-style-type: none"> ○ Patient has axial disease and has failed at least two different NSAIDs used at anti-inflammatory doses for a minimum of 3 months due to due to inadequate response and/or intolerance, unless otherwise contraindicated, and has failed a trial of Enbrel or Humira or ○ Patient has non-axial disease and has failed at least two different NSAIDs used at anti-inflammatory doses for a minimum of 3 months due to due to inadequate response and/or intolerance, unless otherwise contraindicated, and patient has failed an adequate dose and duration of sulfasalazine or local corticosteroid injection due to inadequate outcome and/or intolerance, unless otherwise contraindicated , and has failed a trial of Enbrel or Humira • Patient is being treated for Crohn’s disease and <ul style="list-style-type: none"> ○ Patient has failed a trial with conventional therapy such as DMARD, mesalamine and/or steroids due to inadequate response and/or intolerance and • Patient has failed a trial of adequate dose and appropriate duration of Humira.
Coverage duration:	Initial: 4 months Renewals: 9 months