



OPIOID PROGRAM



Opioid medications are generally safe and useful for managing acute (short-term) pain when prescribed and used appropriately. In certain patients, such as those with cancer or other conditions, they may also hold value to be used long-term. However, extended or inappropriate use can lead to dependence and/or addiction. Taking these medication not as prescribed greatly increased the chances of severe side effects including overdose and death.

Opioids can be broken down into 2 classes; short- and long-acting opioids. Certain medications may be available as both short- or long-acting products based on the particular formulation. Short-acting opioids are generally used for acute injuries or conditions. These include products such as codeine (Tylenol w/Codeine®), hydrocodone (Lortab®, Norco®, Vicodin®), hydromorphone (Dilaudid®), morphine (MSIR®) and oxycodone (Oxy IR®, Percocet®). Often times these products are also combined with another ingredient such as acetaminophen or ibuprofen to provide additional analgesia. Long-acting products are typically reserved for those in chronic pain due to illnesses such as cancer. These include extended release versions of oxycodone (Oxycontin®), oxymorphone (Opana ER®), and morphine (Kadian®, MS Contin®) along with transdermal fentanyl (Duragesic®).

In order to help address the growing concern over the safe and appropriate use of opioids, ProAct has implemented a program intended to work in conjunction with federal and state programs that are in place. This program will place limits on both the amount of medication and number of fills a member can have over a set time-frame for short-acting opioids. While this program is not intended to prevent members from getting medications when they are appropriate, it will help ensure that these medications are used properly, both in the quantity of medication and duration of treatment. Although the program is focused on short-acting opioids, ProAct also has separate utilization management programs that address long-acting opioids.

SHORT-ACTING OPIOID MANAGEMENT PROGRAM DETAILS

The program is intended to look at 2 categories of members; those who are new to short-acting opioid therapy and those who are treatment experienced.

NEW TO THERAPY

For members who are naïve to therapy (naïve is defined as not having any claims in the most recent 120 days) members will be limited to the following:

- Maximum dose of 49 morphine-equivalent mgs per day of medication (all opioids are measured against morphine as the reference for potency), and
- Maximum of 7 days-supply per fill, with a limit of 2 fills (7 days-supply each) within 60 days.

If a member exceeds these limitations, the claim will reject with the messaging that a prior authorization would be required in order to receive any additional medication. For a member who may be taking a medication used to treat cancer, an exception may be allowed.

TREATMENT EXPERIENCED

For members who are not naïve to therapy and have had opioid fills within 120 days, member will be limited to the following:

- Maximum dose of 90 morphine-equivalent mgs per day of medication and
- Maximum of 2 fills within 60 days of the specific opioid product.

If a member exceeds these limitations, the claim will reject with the messaging that a prior authorization would be required in order to receive any additional medication. For a member who may be taking a medication used to treat cancer, an exception may be allowed.