

## Protocol for the Safe and Efficient Use of Opioids

Approved June 2021

**Exclusions:** Cancer, Sickle Cell, Hospice, Palliative, or End of Life care members

Note: Except for special cases, noted below, opioids are only be approved for those older than 18 years

**All prescriptions for opioids will be approved based on the following criteria:**

### **Short-Acting Opioids (SAOs)**

1. All short acting opioids for acute pain (for example, injury, minor surgery, dental procedure) in opioid naïve patients (defined as no opioid therapy in the previous 90 days) is limited to 5 days' supply
2. Daily dose is not greater than **50 morphine milligram equivalents (MME)** for an opioid naïve patient or greater than 90 MME for an opioid tolerant patient. [medical necessity/rationale will be required]
3. Member is being treated for moderate to severe pain (documentation associated with diagnosis/rationale will be required)
4. Member has tried and failed or has an intolerance or contraindication to non-opioid analgesics (such as non-steroidal [NSAIDs], acetaminophen, anticonvulsants, antidepressants, etc.) [documentation will be required]
5. Member is maintained on no more than two short acting opioids
6. Naloxone prescription is provided or offered to patient/patient's family or caretaker for opioid/benzodiazepine combinations, previous history of overdose, or substance use disorder, and when patient is receiving 50 or more MMEs per day

### **Long-Acting Opioids (LAOs)**

1. Member is currently on a short-acting opioid analgesic, including use of opioid analgesia as an inpatient for post-surgical pain, **OR**
2. Member is transitioning from one long-acting opioid analgesic to another
3. Daily dose is not greater than **50 morphine milligram equivalents (MME)** for an opioid naïve patient or greater than 90 MME for an opioid tolerant patient. [medical necessity/rationale will be required]
4. Member is being treated for moderate to severe pain (documentation associated with diagnosis/rationale will be required)
5. Member does not have any of the following:
  - a. Significant respiratory depression
  - b. Acute or severe bronchial asthma or hypercarbia
  - c. Known or suspected paralytic ileus
6. Long-acting opioids are not used in as needed (PRN) analgesia
7. Member is maintained on no more than two long-acting opioids
8. Provider has checked the state's Prescription Monitoring Program/Prescription Drug Monitoring Program for any opioid over dosages or dangerous combinations, and for prescriptions from other providers, benzodiazepine use, or extended release/long-acting use for acute pain

9. Buprenorphine weekly patches:
  - Provider has documented need for opioid with lower risk for abuse and noted concern that member, or member's household is at risk for abuse and diversion
    - Buprenorphine has lower abuse potential compared to other long-acting formulary products
10. Non-formulary agents:
  - Member had inadequate response or intolerance to oxymorphone extended release, and at least 2 formulary long-acting opioids for at least 2 weeks
    - Fentanyl patch, morphine sulfate extended release, or methadone
11. Abuse-Deterrent product requests:
  - Documentation member has tried and failed buprenorphine patches for at least 2 weeks
  - Provider has documented need for abuse deterrent agent and noted concern that member, or member's household is at risk for abuse and diversion
12. Oxymorphone Extended Release:
  - Member had inadequate response or intolerance to at least 2 formulary long-acting opioids; trials of formulary agents were for at least 2 weeks
    - Fentanyl patch, morphine sulfate extended release, or methadone
13. Naloxone prescription is provided or offered to patient/patient's family or caretaker for opioid/benzodiazepine combinations, previous history of overdose, or substance use disorder, and when patient is receiving 50 or more MMEs per day

**Authorization Criteria for Acute Pain in Pediatric Members (less than 18 years of age):**

1. Request is for acute pain such as post-dental procedure
2. Pain assessment was completed
3. Member and their parent(s)/guardian(s) have been screened for previous and current opioid use
4. Concomitant use with benzodiazepines has been appropriately addressed if present
5. Combination therapy with acetaminophen and non-steroidal anti-inflammatory drugs (NSAIDs) were tried and failed, or there are contraindications present for the use of both
6. Opioid therapy will be used in combination with acetaminophen and non-steroidal anti-inflammatory drugs (NSAIDs) unless there are contraindications present for the use of both
7. Member is not less than 12 years of age if medication prescribed is codeine or tramadol  
NOTE: the use of these medications is contraindicated in children younger than 12 and not recommended in those aged 12 – 17
8. Prescription will be limited to 8 – 12 tablets
9. Immediate-release opioids will be prescribed, limited to the lowest effective dose, and no quantity greater than the expected pain duration that is severe enough to require opioids will be given  
NOTE: Three days or fewer is recommended by the CDC. More than seven days will rarely be required

**Initial Approval Duration:**

- Cancer, End-of-Life, Palliative Care: 1 year
- Chronic Pain: 3 months
- Acute Pain: 30 days or less
- Acute Pain in Pediatric Members: 3 days or less
  - Total treatment duration should not exceed 7 days

### **Renewal Approval Duration:**

- Chronic Pain: 6 months
- Acute Pain: 30 days or less

### **References:**

1. Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc. URL. <https://www.clinicalkey.com/pharmacology/> Updated 2020. Accessed March 08, 2020.
2. National Institute for Health and Care Excellence (NICE). Neuropathic pain - pharmacological management. The pharmacological management of neuropathic pain in adults in non-specialist settings. London (UK): National Institute for Health and Care Excellence (NICE). (Clinical guideline; no. 173). Updated July 2019
3. Xtampza ER (oxycodone hydrochloride) extended-release capsule package insert. Cincinnati OH: Patheon Pharmaceuticals. November 2017
4. Butrans (buprenorphine transdermal system) package insert. Stamford, CT: Purdue Pharma L.P Updated October 2019
5. Nucynta (tapentadol extended-release oral tablets) package insert. Titusville, NJ: Janssen Pharmaceuticals, Inc. Updated December 2016
6. Xartemis XR (acetaminophen; oxycodone) extended-release tablets. Hazelwood MO: Mallinckrodt Brand Pharmaceuticals, Inc. Updated December 2016
7. Belbuca (buprenorphine) buccal film package insert. Endo Pharmaceuticals Inc Updated October 2015
8. Embeda (morphine; naltrexone) package insert. New York, NY: Pfizer, Inc December 2016
9. Dowell D, Haegerich TM, et al. CDC Guidelines for Prescribing Opioids for Chronic Pain – United States, 2016. MMWR Recomm Rep 2016; 65(No. RR-1):1-49. Available at: [www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm](http://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm). Accessed March 8, 2020
10. Document- Fax sheet: [www.cdc.gov/drugoverdose/prescribing/guideline.html](http://www.cdc.gov/drugoverdose/prescribing/guideline.html)
11. American Pain Society, Clinical Practice Guidelines. Available at <https://painmed.org/clinician-resources/clinical-guidelines> Accessed on March 8,2020
12. Abuse-Deterrent Formulations of Opioids: Effectiveness and Value. Final Evidence Report, August 8, 2017. Institute for Clinical and Economic Review (ICER).
13. REMS <https://www.accessdata.fda.gov/scripts/cder/remis/index.cfm> 01/03/2020 updated - includes all opioid analgesics
14. American Academy of Pediatric Dentistry. Pain Management in Infants, Children, Adolescents and Individuals with Special Health Care Needs. [https://www.aapd.org/media/Policies\\_Guidelines/BP\\_Pain.pdf](https://www.aapd.org/media/Policies_Guidelines/BP_Pain.pdf). Accessed March 8, 2020.
15. Dr. Robert Bree Collaborative and Washington State Agency Medical Directors' Group. Dental Guideline on Prescribing Opioids for Acute Pain Management. [http://www.breecollaborative.org/wp-content/uploads/2017-10-26-FINAL-Dental-Opioid-Recommendations\\_Web.pdf](http://www.breecollaborative.org/wp-content/uploads/2017-10-26-FINAL-Dental-Opioid-Recommendations_Web.pdf). Accessed March 8, 2020.