

Opioid Medication Management

In 2016, the State Fee for Service and the other Medicaid Managed Care Entities implemented consistent prescribing limits for opioid management. CareSource became a Medicaid Managed Care Entity, implementing on 1/1/2017. At that time, CareSource implemented the consistent opioid criteria. These common criteria balance the clinical need for opioid pain medications, while helping to minimize the number of members on opioid medications for longer than medically necessary. The limits support both CDC Guideline for Prescribing Opioids for Chronic Pain and the Indiana Pain Management Prescribing Rules.

Opioid Plan Restrictions – *Note differences for Opioid Naïve and Chronic Opioid users*

- **Opioid Naïve members** (Members with claim history showing less than 90 day supply of opioids in last 120 days)
 - Daily morphine equivalence limit of 60 MED (see chart below)
 - Limit of 7 day supply of short-acting opioid. May have an additional 7 day supply within a rolling 45 day window. PA will be required for prescriptions with greater than 7 day supply, or for greater than 14 days of total opioid therapy in a rolling 45 day window.
 - PA for all long acting opioids
 - All long-acting opioids will require a PA regardless of the quantity or day supply.
 - Preferred opioids must be tried first unless there is a clinical reason to use non-preferred long-acting opioids
 - Limit of 1 long-acting and 1 short-acting agent at one time
- **Chronic Opioid users** (members with claim history showing greater than or equal to 90 day supply of opioids in last 120 days)
 - Limit 1 long-acting and 1 short-acting agent at one time
 - 60 MED and 7 day limits **do not** apply to chronic opioid users

*Prior Authorization is available when there is medical necessity to prescribe opioids longer than the limits would allow.

- PA Criteria:
 - Diagnosis of moderate to severe chronic pain; *and*
 - Failure of at least two non-opioid ancillary treatments (NSAIDs, anticonvulsants, antidepressants, etc. at maximum tolerated doses); *and*
 - If request is for long-acting agent, must have failed mono-therapy with short-acting agent
 - **Cancer, palliative care and sickle cell crisis will be excluded from the opioid limits**