



# SmartPA Criteria Proposal

<b>Drug/Drug Class:</b>	Opioid and Select Alcohol Dependence Agents PDL Edit
<b>First Implementation Date:</b>	April 2, 2015
<b>Revised Date:</b>	July 7, 2022
<b>Prepared For:</b>	MO HealthNet
<b>Prepared By:</b>	MO HealthNet/Conduent
<b>Criteria Status:</b>	<input type="checkbox"/> Existing Criteria <input checked="" type="checkbox"/> Revision of Existing Criteria <input type="checkbox"/> New Criteria

## Executive Summary

**Purpose:** The MO HealthNet Pharmacy Program will implement a state-specific preferred drug list.

**Why Issue Selected:** According to the U.S. Department of Health and Human Services (HHS), in 2019, 10.1 million people misused prescription opioids. Of those, 1.6 million were diagnosed with an opioid use disorder (OUD); 48,006 deaths were attributed to overdosing on synthetic opioids other than methadone. In Missouri in 2018, nearly 3.1 persons died each day from an opioid overdose. OUD is a complex health condition that requires long-term treatment.

Medication Assisted Treatment (MAT) for opioid addiction is effective in facilitating recovery from opioid addiction and has become the standard of care. Use of these pharmacologic agents can help in withdrawal symptoms and reduce cravings of opioids. Buprenorphine, in particular, has a significantly lower risk of respiratory depression unless combined with benzodiazepines. The majority of data suggests that counseling helps to improve treatment outcomes while on buprenorphine/naloxone. Getting affected persons into treatment saves lives and is more likely to lead to full recovery.

MO HealthNet has modified its policies to improve access to Medication-Assisted-Treatment as part of the MO Opioid State Targeted Response (STR) Project.

Total program savings for the PDL classes will be regularly reviewed.

Program-Specific Information:	Preferred Agents	Non-Preferred Agents
	<ul style="list-style-type: none"> <li>Buprenorphine SL Tabs</li> <li>Buprenorphine/Naloxone SL Tabs</li> <li>Naltrexone Tabs</li> <li>Sublocade®</li> <li>Suboxone® Film</li> <li>Vivitrol®</li> </ul>	<ul style="list-style-type: none"> <li>Buprenorphine/Naloxone SL Film</li> <li>Probuphine®</li> <li>Zubsolv®</li> </ul>

**Type of Criteria:**  Increased risk of ADE  Preferred Drug List  
 Appropriate Indications  Clinical Edit

**Data Sources:**  Only Administrative Databases  Databases + Prescriber-Supplied

## Setting & Population

- Drug class for review: Opioid and Select Alcohol Dependence Agents
- Age range: All appropriate MO HealthNet participants

## Approval Criteria

- Failure to achieve desired therapeutic outcomes with a trial on 3 preferred agents
  - Documented trial period for preferred agents **OR**
  - Documented ADE/ADR to preferred agents **OR**
  - Documented compliance on a current non-preferred therapy regimen (90/120 days) **AND**
- For Probuphine:
  - Documented diagnosis of opioid use disorder **AND**
  - Participant claim history demonstrates at least 30 days of stable therapy on  $\leq 8$  mg/day of buprenorphine in the last 90 days **AND**
  - Participant is currently not pregnant **AND**
- For Sublocade:
  - Documented diagnosis of opioid use disorder **AND**
  - Participant claim history demonstrates at least **7 days** of stable therapy on buprenorphine in the last 90 days **AND**  
~~◦ Claim frequency for 300 mg strength does not exceed 2 claims every 6 months~~
- For Vivitrol:
  - Documented diagnosis of alcohol dependence, opioid use disorder or substance use disorder **AND**
  - Participant is currently not pregnant **AND**
- For all other agents not listed above:
  - Claim does not exceed max dosing limitations (see Appendix A) **AND**
  - Participant claim history plus incoming claim demonstrates  $\leq 24$  mg/day of buprenorphine in the past 25 days

## Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if all approval criteria are not met
- Claim exceeds maximum dosing limitations for the following:

Drug Description	Generic Equivalent	Max Units per Day
BUNAVAIL 2.1-0.3 MG FILM BUCCAL	BUPRENORPHINE HCL/NALOXONE HCL	6 films
BUNAVAIL 4.2-0.7 MG FILM BUCCAL	BUPRENORPHINE HCL/NALOXONE HCL	3 films
BUNAVAIL 6.3 MG-1 MG FILM BUCCAL	BUPRENORPHINE HCL/NALOXONE HCL	2 films
RE VIA 50 MG TABLET	NALTREXONE HCL	1 tablet
SUBOXONE 12 MG-3 MG SL FILM	BUPRENORPHINE HCL/NALOXONE HCL	2 films
SUBOXONE 2 MG-0.5 MG SL FILM	BUPRENORPHINE HCL/NALOXONE HCL	12 films
SUBOXONE 2 MG-0.5 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	12 tablets
SUBOXONE 4 MG-1 MG SL FILM	BUPRENORPHINE HCL/NALOXONE HCL	6 films
SUBOXONE 8 MG-2 MG SL FILM	BUPRENORPHINE HCL/NALOXONE HCL	3 films
SUBOXONE 8 MG-2 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	3 tablets
SUBUTEX 2 MG SL TABLET	BUPRENORPHINE HCL	12 tablets
SUBUTEX 8 MG SL TABLET	BUPRENORPHINE HCL	3 tablets
ZUBSOLV 0.7-0.18 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	24 tablets
ZUBSOLV 1.4-0.36MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	12 tablets
ZUBSOLV 11.4-2.9 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	1 tablet
ZUBSOLV 2.9-0.71 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	6 tablets

### SmartPA PDL Proposal Form

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ZUBSOLV 5.7-1.4 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	3 tablets
ZUBSOLV 8.6-2.1 MG SL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2 tablets

Drug Description	Generic Equivalent	Claim Frequency Limitation
PROBUPHINE 74.2 MG IMPLANT	BUPRENORPHINE HCL	1 every 162 days
SUBLOCADE 100 MG/0.5ML SYRINGE	BUPRENORPHINE	1 every 26 days
SUBLOCADE 300 MG/1.5ML SYRINGE	BUPRENORPHINE	1 every 26 days
VIVITROL 380 MG VIAL	NALTREXONE MICROSPHERES	1 every 21 days

### Required Documentation

Laboratory Results:   
 MedWatch Form:

Progress Notes:   
 Other:

### Disposition of Edit

Denial: Exception Code "0160" (Preferred Drug List)  
 Rule Type: PDL

### Default Approval Period

180 days

### References

- Evidence-Based Medicine and Fiscal Analysis: "Opiate Dependence Agents – Therapeutic Class Review", Conduent Business Services, L.L.C., Richmond, VA; November 2021.
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- National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use. American Society of Addiction Medicine (ASAM). Adopted by the ASAM Board of Directors, June 1, 2015.
- Drug Effectiveness Review Project – Briefing Paper: "Opioid Dependency Treatment". Center for Evidence-Based Policy, Oregon Health & Science University; July 2019.
- Medicaid Evidence-based Decisions Project (MED) Report. "Best Practices for State Medication-Assisted Treatment Programs". November 2017" - Center for Evidence-Based Policy, Oregon Health & Science University; November 2017.
- Missouri Opioid State Target Response (STR) Project. <https://missouriopioidstr.org/>. Accessed December 2018.
- USPDI, Micromedex; 2021.
- Drug Facts and Comparisons On-line; 2021.