

Changes to Oregon Health Plan (OHP) opioid coverage criteria effective August 21, 2017

Beginning August 21, 2017, the Oregon Health Authority (OHA) will implement the following changes to coverage criteria:

- Revised prior authorization (PA) criteria, summarized below. You can also find the new PA criteria at www.orpdl.org/drugs under the “Analgesics” category.
- Short-acting opioids for acute conditions will be restricted to 7 days or less. Products prescribed for more than 7 days will require PA.

Changes apply to opioids for management of chronic non-cancer pain

Patients treated for cancer-related pain or who are under palliative care services may be exempt from these changes. Providing the ICD-10 diagnosis code on the prescription order and submitting it on the pharmacy claim may expedite the approval process.

Changes to PA criteria effective August 21, 2017

All opioids will require the following for OHP coverage:

- A prescription that:
 - Is for a diagnosis funded by the OHP,
 - Is not for pain associated with migraine or other type of headache, and
 - Does not exceed a daily opioid dose of 90 morphine milligram equivalents (MME) per day.
- Documented verification that the patient:
 - Is not high-risk for opioid misuse or abuse,
 - Is not concurrently on other short- or long-acting opioids, and
 - Has sustained improvement of at least 30 percent in pain, function, or quality of life in the past 3 months (compared to baseline).

These changes apply to all short-acting and long-acting opioids, including combination products (e.g., hydrocodone/ acetaminophen).

Short-acting opioids for acute pain associated with back or spine conditions will also require:

- A 7-day treatment limitation, and
- Documentation that:
 - One or more alternative first-line pharmacologic therapies such as NSAIDs, acetaminophen, or muscle relaxers have been tried and found not effective or are contraindicated, and
 - The drug is prescribed with a plan to keep active (exercise regimen) and with consideration of additional therapies such as spinal manipulation, physical therapy, yoga, or acupuncture.

Long-acting opioids also require a diagnosis that is not for management of pain associated with back or spine conditions.



Reminder: OHP coverage of opioids for chronic back and spine conditions ends this year

Starting January 1, 2018, OHP will no longer cover any opioids for chronic back or spine conditions. Prescribers must establish a tapering plan for patients currently prescribed opioids for these conditions.

To learn more, read OHA's March 6, 2017, notification on the Medical-Surgical policy page at <http://www.oregon.gov/OHA/HSD/OHP/pages/Policy-Medical-Surgical.aspx> (scroll down to "Announcements").

How to request PA

You can submit PA requests three ways:

1. Call the Oregon Pharmacy Call Center at 888-202-2126;
2. Submit via the secure Provider Web Portal at <https://www.or-medicaid.gov>; or
3. Fax a completed Pharmacy and Oral Nutritional Supplement Request (DMAP 3978) to 888-346-0178. This form is available at <https://apps.state.or.us/Forms/Served/OE3978.pdf>.

Questions?

- **About this announcement or the Provider Web Portal:** Contact the Provider Services Unit at dmap.providerservices@state.or.us or call 800-336-6016 (available Monday through Friday, anytime between 8 a.m. and 5 p.m.).
- **About pharmacy point of sale and prior authorizations for fee-for-service prescriptions:** Call the Oregon Pharmacy Call Center at 888-202-2126.
- **About physical health prescriptions for patients in a coordinated care organization (CCO):** Contact the CCO.

Keep informed:

Find current OHP policies, rules and guidelines at
www.oregon.gov/OHA/HSD/OHP/Pages/Policies.aspx