CATEGORY: PRACTICE POSTER

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DEVELOPMENT AND IMPLEMENTATION OF A SUBOXONE®/SUBUTEX® TREATMENT PROTOCOL EDIT

Background: Treatment guidelines call for use of Suboxone® in an induction phase to safely suppress opioid withdrawal; a stabilization phase where the minimum dose necessary is used to keep the patient in treatment; a maintenance phase to prevent opioid withdrawal symptoms, suppress opioid cravings, and greatly attenuate the use of self-administered opioids; and a medically supervised withdrawal phase where the dose is slowly tapered. In order to promote appropriate use of Suboxone® the Mississippi Division of Medicaid implemented a treatment protocol edit.

Objectives: The major objectives of the protocol were to encourage step therapy with dose reduction over time and to limit cumulative length of time patients can remain on therapy. The new protocol was not intended to reduce access to Suboxone therapy.

Practice Description: The key criteria include: use limited to treatment of opioid dependence; maximum doses for three stages of therapy: (1) 24 mg/day for 1 month; (2) 16 mg/day for next 4 months, and (3) 8 mg/day for remainder of therapy up to a cumulative 24 months of coverage; a refill gap of 60+ days is considered to be discontinuation and requires a restart; beneficiaries are only allowed one restart; and use of opioid products is strictly limited. MS-DUR mailed educational materials to providers explaining the new protocol and how to manage potential prior authorization issues. The protocol was implemented through the electronic prior authorization (EPA) system beginning September 1, 2012.

Outcomes: EPA denials were monitored for the first six months after implementation. Providers having repeated problems with denials were contacted for further education. The most frequent reason for denial was the absence of appropriate diagnosis codes in prior medical claims or submitted by the pharmacy.

Conclusions: The Suboxone® protocol provided a good method for encouraging appropriate treatment patterns, appropriate utilization and less diversion of Suboxone®.