

METHADONE OVERUTILIZATION EDUCATIONAL LETTER

Mailed September 16, 2015

BACKGROUND

At the Mississippi Division of Medicaid (DOM) Drug Utilization Review Board meeting on August 6, 2015, the MS-DUR presented results from an analysis of methadone utilization. In 2014, 154 unique beneficiaries were treated with methadone with a total of 1,341 prescription claims. Based on figures for the first quarter of 2015 utilization is projected to increase by as much as 45% this year. Results by prescriber type, prescriber location, and pharmacy location indicate that problems exist with respect to heavy use of methadone by some providers and perhaps an overuse of methadone for pain treatment. Dr. Davis made a motion that the recommendations from MS-DUR be accepted. Dr. Parham seconded the motion and the board unanimously voted approval of the following recommendations:

1. The DUR Board requests that the P&T Committee considers changing methadone from preferred to non-preferred due to beneficiary safety concerns.
2. The DUR Board request MS-DUR continue to perform analysis and implement educational interventions.

The DUR Board recommendation for changing methadone to a non-preferred product was presented to and approved by the DOM Pharmacy and Therapeutics (P&T) Committee during the August 11, 2015 meeting. This change in status will go into effect on October 1, 2015. MS-DUR in conducted a mailing to current prescribers of methadone to alert them of this change in status and to inform them of the safety concerns about methadone use for pain management.

MAILING

Beneficiaries in the FFS and CCO programs who had a methadone prescription filled since June 1, 2015 were identified. The 62 providers associated with these prescriptions were mailed the attached letter.



Evidence-Based DUR Initiative

The Mississippi Division of Medicaid Drug Utilization Review Contractor



DATE

MD_NAME,
MD_ADDRESS
MD_ADDRESS, MS MD_ZIP

IMPORTANT INFORMATION ABOUT METHADONE!!

Dear Dr. MD_NAME,

In accordance with the August 11, 2015 Division of Medicaid (DOM) Pharmacy and Therapeutics (P&T) Committee recommendations and effective date of October 1, 2015, **methadone becomes a non-preferred drug** on the MS Universal Preferred Drug List or UPDL. As of October 1, ALL prescriptions for methadone will require a prior authorization unless they meet the current prior authorization criteria. The current prior authorization criteria for non-preferred long-acting narcotic analgesics are:

- having tried at least 2 different preferred agents in the last 6 months
- OR
- having a documented diagnosis of cancer or antineoplastic therapy
- AND 90 consecutive days on the same agent in the past 105 days.

DOM will be consulting with specialists to develop additional criteria that assure methadone is only used for appropriate treatment of addiction and/or pain management. Please note that DOM only covers up to 62 tablets per 31 day period and DEA regulations prohibit split billing between a payer and cash for the same prescription. If a beneficiary requires more than 62 tablets per month, two prescriptions will need to be written; one for Medicaid billing up to the quantity limit and one for remainder of the tablets to be paid for with cash.

WHY THIS ACTION IS BEING TAKEN

A Pew Charitable Trust report was released April 23, 2015, that pointed out methadone was a preferred agent in many state Medicaid programs. The report noted that methadone overdoses kill about 5,000 people every year; six times many as in the late 1990's. Methadone is four times as likely to cause an overdose death as oxycodone and more than twice as likely as morphine. A recent MS-DUR analysis of methadone prescribing in Mississippi Medicaid predicted a significant increase in use with pain management accounting for most of the use (<http://www.medicaid.ms.gov/wp-content/uploads/2015/07/DURPacket080615.pdf>). Both the DOM Drug Utilization Review Board and the DOM Pharmacy and Therapeutics Committee reviewed this report and determined this was a problem that needs to be addressed due to concerns about patient safety.

WHAT WE ASK OF YOU?

You have been identified as having Medicaid patients on methadone therapy in the last six months. We ask that you refer to the UPDL to identify the preferred drugs in this therapeutic class and consider changing your patients taking methadone for pain to other, safer medications. The full UPDL can be found at:

<http://www.medicaid.ms.gov/providers/pharmacy/preferred-drug-list/>

Sincerely

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Project Director
MS-DUR

Judith P. Clark, R.Ph., B.S. Pharmacy
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