



Louisiana Department of Health
Health Plan Advisory 17-7
Revised April 24, 2017

Updated Opioid Edits for Pharmacy Claims

Louisiana Medicaid Opioid Prescription Policy		
Date	Population	Policy
Jan. 10, 2017	Fee for Service (FFS) Patients: Acute & Chronic Pain	<ul style="list-style-type: none"> ● Medicaid opioid 15-day quantity limits
March 22, 2017	Managed Care Organization Patients: Acute Pain	<ul style="list-style-type: none"> ● Implement 15-day quantity limit for opioid-naïve recipients
May 2017	FFS and Managed Care Organization Patients: Acute & Chronic Pain	<ul style="list-style-type: none"> ● Alert to notify providers of upcoming Morphine Equivalent Dosing (MED) limit of 120 mg per day for all opioid prescriptions
July 10, 2017	FFS and Managed Care Organization Patients: Acute Pain	<ul style="list-style-type: none"> ● 7-day quantity limit for opioid-naïve recipients or Morphine Equivalent Dosing (MED) limit of 120 mg per day, whichever is less
July 10, 2017	FFS and Managed Care Organization Patients: Chronic Pain	<ul style="list-style-type: none"> ● Morphine Equivalent Dosing (MED) limit of 120 mg per day for all opioid prescriptions

In response to the opioid epidemic, the Louisiana Department of Health (LDH) is implementing updated short-acting opioid quantity limits for Medicaid pharmacy claims for opioid **naïve** recipients. Opioid prescriptions for **chronic and naïve** recipients will be subject to 120 mg per day Morphine Equivalent Dosing (MED) limits. LDH opioid requirements should not supersede any more stringent limits already implemented by the MCO.

Effective July 10, 2017, LDH will implement seven-day quantity limits for short-acting (SA) opioids for opioid *naïve* recipients enrolled in Healthy Louisiana Managed Care Organizations (MCO) and Fee for Service (FFS). MCOs are directed to implement the following opioid quantity limits at the Point of Sale (POS) on July 10, 2017 for opioid **naïve** recipients (no opioids in the most current 90-day period). Override provisions must be implemented to allow for medically necessary quantities above limits.

To mitigate administrative burden for prescribing providers, LDH is mandating the use of a standardized *Opioid Analgesic Treatment Worksheet* to request overrides and prior authorizations for medically necessary quantities of opioids in excess of the following limits.

In addition to the use of a standard form, LDH is also requiring MCOs to implement POS exemptions for selected medical conditions. For these conditions, it will not be necessary to request a prior authorization to exceed the seven-day quantity limits. Pharmacy claims for all opioids, except fentanyl immediate release, should process at POS when the pharmacist enters appropriate diagnosis codes for the exemptions listed below.

Quantity Limits for Immediate Release Fentanyl Products
Only payable for cancer diagnosis (C00.*-C96.*)

Description	Dosage Form	Units / 30 day	Representative Brand
Fentanyl Citrate Immediate Release	Tablet Sublingual, Lozenge HD, Tab Effervescence, Film	120 units	Abstral®, Actiq®, Fentora®, Onsolis®

Diagnosis Code Exemptions

Diagnosis Code	Description
C00.*-C96.*	Cancer
Z51.5	Palliative Care

*Any number or letter or combination of UP TO FOUR numbers and letters of an assigned ICD-10-CM diagnosis code.

Short-Acting (SA) Opioid Quantity Limits

Units per 7-day supply within a 30-day period for opioid naïve patients

Description	Dosage Form	Proposed Units / 7 days	Representative Brand
Codeine/Acetaminophen	Tablet	28	Tylenol® with Codeine
Hydrocodone/Acetaminophen	Tablet	28	Lortab®, Vicodin®
Hydrocodone/Ibuprofen	Tablet	28	Vicoprofen®
Hydromorphone HCl	Tablet	28	Dilaudid®
Meperidine	Tablet	28	Demerol®
Morphine Sulfate	Tablet	28	
Oxycodone Oxycodone/Acetaminophen Oxycodone/Aspirin Oxycodone/Ibuprofen	Tablet/Capsule	28	Roxicodone® Endocet®, Percocet®, Roxicet®

Oxymorphone HCl	Tablet	28	Opana®
Tapentadol	Tablet	28	Nucynta®
Tramadol Tramadol/Acetaminophen	Tablet	28	Ultram® Ultracet®

Morphine Equivalent Dosing (MED) – for both opioid naïve and opioid tolerant patients

Morphine equivalents should be programmed with a limit of 120 mg per day and should be implemented as an educational alert May 1, 2017. The 60-day Continuity of Care (COC) should allow processing until July 10, 2017 when the hard halt denials begin. During the 60-day COC, prescribers of the claims that hit the edit shall be notified to encourage tapering/discontinuation or requesting a PA for MED override. MED should apply to opioid tolerant and naïve recipients. This will be an additional layer for the opioid naïve recipients in addition to the quantity limits.

Recipients with a diagnosis of cancer and palliative care shall be exempt from the MED requirements.

The Opioid Analgesic Treatment Worksheet will be modified for prescribers to request prescriptions that would exceed the 120 mg per day MED limit.

Provider Educational Resources

Provider education on prescribing opioids is mandated through the MCO Drug Utilization Review process, or any other avenue available. The Department has developed [online resources for providers](#).

[Use this link to visit the Opioid web page.](#)

Please communicate any concerns with this policy to the LDH Medicaid’s pharmacy unit.

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