

Apple Health (Medicaid) Opioid Clinical Policy Q&A for Prescribers

Why a clinical policy?

Opioid use disorder (misuse and addiction) is a public health crisis in Washington and around the country. Approximately 700 Washingtonians die each year because of opioid overdose. Our state must take steps to prevent misuse and addiction.

www.doh.wa.gov/Portals/1/Documents/Pubs/346-083-SummaryOpioidOverdoseData.pdf

A recent study suggests a correlation between the length of an initial opioid prescription and the likelihood of continuing to use opioids for one year or longer.

www.cdc.gov/mmwr/volumes/66/wr/mm6610a1.htm

The Health Care Authority's (HCA) opioid clinical policy is a tool to help prevent opioid misuse and addiction, an opportunity to promote safe prescribing practices, and a direct response to Governor Inslee's **Executive Order 16-09**.

Whose prescriptions does this policy affect? When?

All patients covered under Washington Apple Health (Medicaid), both managed care and fee-for-service (FFS). This policy takes effect **November 1, 2017.**

What does the policy do?

The policy limits the number of pills prescribed for short-term use:

- For children age 20 or younger: 18 doses (1 tablet or 1 capsule or 1 suppository or 5 mL of a liquid)
- For adults age 21 or older: 42 doses

You can indicate an exception to these limits if the condition requires it. For patients transitioning to long-term opioid use (beyond 6 weeks), you must attest to the patient's health plan that you are following best practices and that the medication continues to be safe and effective for that patient.

Certain patients are exempt from the policy. Patients being treated for cancer pain, or in hospice, palliative care, or end of life care, are exempt through expedited authorization.

Patients already on chronic opioid therapy will be grandfathered automatically through the pharmacy system, and these limits won't apply.

Which opioids prescriptions does the policy affect?

Butorphanol; Codeine; Fentanyl; Hydrocodone; Hydromorphone; Levorphanol; Meperidine; Morphine; Oxycodone; Oxymorphone; Pentazocine; Tapentadol; and Tramadol.

Buprenorphine and methadone are covered under different policies.

What do I need to do?

Follow the policy for your patients who have Apple Health (Medicaid) coverage, complete an attestation when needed, and seek exceptions when appropriate. Review the policy and other information available on HCA's opioid page for prescribers and pharmacies:

www.hca.wa.gov/billers-providers/programs-andservices/opioids

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How does this policy fit with other guidance on opioid prescribing?

HCA aligned this policy with the 2015 prescribing guideline from the Washington State Agency Medical Directors Group (AMDG) and the 2016 Centers for Disease Control (CDC) opioid guidelines.

What if I don't believe that all of the elements of the attestation apply to my patient?

The elements of the attestation represent best practices around opioid prescribing, based on the CDC and other recommendations. However, certain elements may not be appropriate for certain patients. For example, a patient with acute pain from a fracture would not need a trial of physical therapy. In these cases, simply document in the chart why these elements don't apply.

You may want to review the examples of different prescribing situations that are available on HCA's website:

www.hca.wa.gov/assets/billers-and-providers/providerprescribing-examples-opioids.pdf

Do I have to send in documentation of all the elements in the attestation form?

No. You only need to send in the signed attestation form. However, the elements contained in the attestation do need to be documented in the chart and available if an audit were performed.

Can my nurse sign the PA/attestation?

Only the provider who is prescribing the medications can sign the attestation.

Where can I read the full policy?

The policy is on the HCA website, along with the attestation form and other resources. Visit www.hca.wa.gov/billers-providers/programs-and-services/opioids

A final note

We expect that some patients may ask their pharmacy whether they can pay out of pocket in situations where the provider prescribes above the policy limits and doesn't indicate the patient is exempt.

The answer is no. In most circumstances it is unlawful for an Apple Health patient to pay cash for opioid prescriptions.

