

A fax bulletin from Molina Healthcare of Utah • April 20, 2018

## PROVIDER MEMORANDUM

### Pain Safety Initiative (PSI)

Opioid toxicity and abuse is a public health concern in the United States due to the alarming increase in the number of opioid-related deaths. Opioid prescribing continues to fuel the epidemic. Benefits of high-dose opioids for chronic pain are not established and at the same time, risks for serious harm related to opioid therapy increase at higher opioid dosages. Because of this, safe and appropriate opioid prescribing and utilization is a priority in health care.<sup>1</sup>

Molina Healthcare of Utah (Molina) is committed to stifling the effects of the opioid epidemic on our Members. To this end, Molina has developed a comprehensive substance use disorder plan that includes a Pain Safety Initiative (PSI). The Pain Safety Initiative (PSI) is composed of over 40 measures that leverage the tools available to us to support judicious prescribing practices, focus on improved member outcomes, identify overuse, misuse and fraud, and support activities that result in safer communities.

**May 1<sup>st</sup> 2018**, Molina Healthcare of Utah (Molina) will begin implementation of three key elements of the Pain Safety Initiative (PSI).

### Elements

**90 MED:** Molina will be using information systems to identify Members on greater than 90 MED (Morphine Equivalent Dose) daily opioid regimens. These Members will be required to obtain prior authorization from their prescribing provider in order to continue on chronic high dose opioids. In evaluating prior authorization requests for doses above these new limits, Molina will be looking for supporting documentation including, but not limited to, pain consultation supporting the dose requested, signed and dated patient prescriber agreement and medical records documenting treatment plan including rationale for high dose and titration to current dose and plan. The prescriber will be informed of which patients are on high dose regimens and will be provided with information on the CDC Guidelines for Prescribing Opioids for Chronic Pain along with other resources to support them in possibly reducing the member's dose to safer levels. This measure does not apply to any member with cancer or who is enrolled in hospice or palliative care.

**Extended Release (ER) Opioid Step Therapy:** We will be implementing a pharmacy tool that ensures that Extended Release (ER) opioids are appropriately prescribed (as documented by the drug manufacturer and the Federal Drug Administration (FDA)). This tool simply uses the prior authorization tool when it appears that the member has received a prescription for an extended release opioid formulation inappropriately.

**Duration Limits:** To address the goal of reducing the number of new starts, Molina will be implementing a pharmacy tool that limits the amount of short-acting opioids that a member can receive for acute pain. This only applies to Members who have not been on opioid on a chronic basis (usually greater than 90 days).

Molina requires Providers to adhere to Molina's drug formularies and prescription policies designed to prevent abuse or misuse of high-risk chronic pain medication. Providers are expected to offer additional education and support to Members regarding Opioid and pain safety as needed. Providers may access additional Opioid-safety and Substance Use Disorder resources at [www.molinahealthcare.com](http://www.molinahealthcare.com) under the Health Resource tab. Please consult with your Provider Network Manager or reference the medication formulary for more information on Molina's Pain Safety Initiatives.

Warmest regards,

Dr. Karl Brown, Chief Medical Officer

<sup>1</sup> The Centers for Disease Control and Prevention. Injury Prevention and Control: Prescription Opioid Overdose Data. Available from: <http://www.cdc.gov/drugoverdose/data/overdose.html>