



# DUR PROJECT

August 2010

**Affected Programs:** BadgerCare Plus, Medicaid, SeniorCare

**To:** Blood Banks, Dentists, Dispensing Physicians, Federally Qualified Health Centers, Hospital Providers, Nurse Practitioners, Nursing Homes, Physician Assistants, Physician Clinics, Physicians, Pharmacies, Podiatrists, Rural Health Clinics, HMOs and Other Managed Care Organizations

## Monitoring Opioid Utilization

Prescription opioids play a key role in the effective treatment of chronic pain; however, efforts to treat chronic pain more aggressively have resulted in a significant increase in opioid prescribing, both nationally and in Wisconsin. As the utilization of prescription opioids increases, evidence demonstrates that the rates of fraud, misuse, diversion, and overuse also increase. For example, a Center for Disease Control and Prevention (CDC) report published in March 2010 showed that unintentional drug overdose deaths in 2006 were five times greater than in 1990.

The growing prevalence of opioid utilization in the BadgerCare Plus, Medicaid, and SeniorCare populations has prompted Wisconsin to develop a multi-faceted approach to encourage appropriate opioid utilization. Approaches include the following:

- Monitoring utilization of opioids and other controlled substances.
- Restructuring the Pharmacy Services Lock-In Program.
- Convening an opioid prescribing review committee to help address inappropriate opioid prescribing.
- Providing educational materials and other resources that promote appropriate prescribing practices.

### Resources and Educational Materials

The use of opioids for the management of cancer and acute pain is widely accepted. The use of opioids to treat chronic non-cancer pain can also be appropriate and effective for carefully selected and well-monitored patients. The following list of clinical resources has been provided to assist providers who are treating members with chronic pain:

- The Washington State Agency Medical Directors' Group, Interagency Guideline on Opioid for Chronic Non-cancer Pain, which is available at [www.agencymeddirectors.wa.gov/opioiddosing.asp](http://www.agencymeddirectors.wa.gov/opioiddosing.asp).
- American Pain Society and the American Academy of Pain Medicine, Opioid Treatment Guidelines, which is available at [www.painmed.org/Workarea/DownloadAsset.aspx?id=3225](http://www.painmed.org/Workarea/DownloadAsset.aspx?id=3225).
- American Pain Society, Clinical Guidelines for the Use of Chronic Opioid Therapy in Chronic Non-cancer Pain, which is available at [www.ampainsoc.org/pub/cp\\_guidelines.htm](http://www.ampainsoc.org/pub/cp_guidelines.htm).

### Opioid Prescription Monitoring

Due to the prevalence of opioid prescribing, Medicaid, BadgerCare Plus, and SeniorCare have implemented dispensing limits to monitor and promote appropriate opioid utilization.

## **Quantity Limits**

Where literature supports specific maximum doses for opioids, quantity limits have been established. If it is medically appropriate for a member to exceed a quantity limit, pharmacy providers may request a quantity limit policy override by calling the Drug Authorization and Policy Override (DAPO) Center at (800) 947-9627. The DAPO Center is open from 8:00 a.m. until 5:30 p.m., Monday through Friday.

## **Early Refill**

Prospective Drug Utilization Review (DUR) alerts for early refill will activate when a member requests a refill of a drug before 80 percent of a previous claim's day supply for the same drug, strength, and dosage form has been taken.

For some drugs, if it is medically appropriate for a member to exceed an early refill, pharmacy providers may respond to the early refill DUR alert and resubmit the claim in the Point-of-Sale (POS) system to obtain reimbursement from ForwardHealth.

Other drugs denied for the early refill DUR alert require a policy override by the DAPO Center rather than a response to the DUR alert by the pharmacy provider.

## **Restructuring the Pharmacy Services Lock-In Program**

The Pharmacy Services Lock-In program coordinates the use of controlled substances, including opioids, benzodiazepines, and stimulants, for members who misuse or abuse controlled substances. These members are required to use a single pharmacy provider and prescriber to obtain controlled substances.

If a provider suspects inappropriate utilization, he or she may complete the Pharmacy Services Lock-In Program Request for Review of Member Prescription Drug Use form, F-00250 (05/10), and submit the form to the

Pharmacy Services Lock-In Program. Providers may complete and submit the form on the ForwardHealth Portal at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

More information on the Pharmacy Services Lock-In Program is available at the Pharmacy page of the Portal.

Providers may call the Pharmacy Services Lock-In Program at (800) 225-6998, extension 3045, with questions.

## **Opioid Prescribing Review Committee**

Inappropriate prescribing of controlled substances, including opioids, can contribute to fraud, misuse, diversion, and overuse. As part of an ongoing effort to monitor and promote responsible opioid utilization, a committee of specialists in the field of pain management has been established.

This committee, known as the Opioid Prescribing Review Committee, serves in an advisory capacity to assist and advise the Department of Health Services (DHS) in the development of a quality review process for opioid prescribing.

## **Conclusion**

Growing opioid utilization and evidence of increased fraud, misuse, and diversion has led the DHS to take a number of steps to encourage appropriate opioid utilization. Providers are encouraged to review the resources provided in this newsletter to improve prescribing of opioids for chronic non-cancer pain.

## **For More Information**

For more information about pharmacy policies and procedures, providers may refer to the ForwardHealth Online Handbook on the Portal. Providers may also refer to the DUR Board information and the pharmacy data tables, which are available on the Pharmacy page of the Portal.