



Montana Medicaid Proposed Pharmacy Rule Regarding Opioid Prescriptions

Medicaid and Health Services Branch Tribal Consultation, December 4-5, 2018

Proposed rule:

Limit prescriptions for opioid naïve members to 7 days and 50 Morphine Milligram Equivalents (MME).

Goals:

- To prevent new cases of opioid dependence
- To prevent overdose
- To ensure that members are using the lowest possible dose for the shortest amount of time and that they are receiving a benefit of both pain and function which outweighs the risk to their safety.

Definitions:

Morphine Milligram Equivalent (MME)

Used to assess the comparative potency of an opioid to morphine

Can assist clinicians in determining the relative risk of a specific opioid dose

Opioid

Narcotics that act on opioid receptors in the nervous system. They are general prescribed for pain relief, but can also have unwanted side effects such as respiratory depression and dependence.

Opioid Naïve

The definition varies somewhat per entity, but generally describes a patient who does not take opioids chronically and is not tolerant to, or dependent on, opioids. Montana Medicaid will be using this term to describe members who have not received an opioid prescription for 45 days.

CDC Recommendations:

- Limit the day supply of initial opioid prescriptions (first prescription for each individual acute event) for acute pain to 3-7 days and the total daily dose to 50MME. This has been shown to decrease the risk of opioid dependence and overdose.
- Limit total daily dose to 90MME for most chronic opioid prescriptions, as this is the point where risk outweighs benefit for most patients.

Current limits:

Effective 8/27/18, opioid naïve members were limited to 90MME and members already receiving chronic opioids for non-cancer pain were limited to 180MME. This rule will change the opioid naïve 90MME limit to 50MME and 7 days.

Exceptions:

Patient care must be individualized and our case management team will work with providers to ensure that their patients are receiving the treatment that is safe and appropriate. The prior authorization process is available, for those members currently on doses which exceed these limits, whose provider deems the daily dose to be appropriate. The 3-day emergency override is available after hours and on weekends to ensure that members do not go without medication.

Impacts:

This rule will affect any claim submitted to the Montana Healthcare Programs Point-of-Sale (POS) system, which does include Indian Health Service (I.H.S.) and Tribal 638 pharmacies and tribal members. For prescribers, this might require a change in prescribing practices.