

ARYMO ER (extended-release morphine sulfate, crush resistant),
buprenorphine buccal film (BELBUCA),
BELBUCA (buprenorphine buccal film),
buprenorphine patch (BUTRANS),
BUTRANS (buprenorphine transdermal),
CONZIP (tramadol extended-release),
EMBEDA (morphine sulfate/naltrexone, abuse deterrent),
EXALGO (extended-release hydromorphone, abuse deterrent),
fentanyl transdermal (DURAGESIC),
Fentanyl transdermal 37.5mcg/hr, 62.5mcg/hr, 87.5mcg/hr,
hydrocodone extended-release, abuse deterrent, non-abuse deterrent
(Zohydro ER),
hydromorphone extended release, abuse deterrent (EXALGO),
HYSINGLA ER (extended-release hydrocodone, abuse deterrent),
levorphanol (LEVO-DROMORAN),
methadone (DOLOPHINE),
methadone oral solution,
MORPHABOND ER (morphine extended-release),
morphine extended-release (AVINZA, KADIAN),
NUCYNTA ER (extended-release tapentadol, abuse deterrent),
oxycodone, extended release (OXYCONTIN),
OXYCONTIN (oxycodone extended release, abuse deterrent),
oxymorphone, extended-release (OPANA ER)
RYZOLT (tramadol extended-release),
TRAMADOL 150mg extended-release capsule,
tramadol extended-release (CONZIP, RYZOLT, ULTRAM ER),
ULTRAM ER (tramadol extended-release),
XTAMPZA ER (extended-release oxycodone, abuse deterrent),
ZOHYDRO ER (extended-release hydrocodone, abuse deterrent)

Diagnosis Considered for Coverage:

- Treatment of severe pain requiring daily, around-the-clock, long-term opioid therapy

Coverage Criteria:

For pain related to a current diagnosis with cancer:

- Prescribed by an oncologist, **and**
- Total quantity of dosage form has been consolidated to the least number of higher strength.

For those with pain not due to cancer, and currently NOT on an extended-release opioid:

- The cause of the pain cannot be removed, or treated by other mode of therapy, **and**
- Pain occurs every day, and lasted for at least 3 months, **and**
- Patient requires around-the-clock, long-term therapy with opioids, **and**
- Inadequate response or intolerable side effect to 2 preferred non-opioid analgesics used around-the-clock, **and**
- Inadequate response or intolerable side effect to 2 preferred immediate-release opioids used around-the-clock, **and**
- Doctor has a specific plan for evaluating patient's response to therapy, monitoring for potential misuse, monitoring for side effects, and tapering down opioid use, **and**
- Will not be used together with another long-acting opioid, **and**
- Total dose of all opioid being used does not exceed 120 mg morphine equivalent dose per day, **and**
- Total quantity of dosage form has been consolidated to the least number of higher strength, **and**
- **For requests except Butrans, Fentanyl transdermal patches, Xtampza ER, Conzip, Ryzolt, and Ultram ER:** Inadequate response or intolerable side effect to generically available extended-release morphine (MS Contin), **and**
- **For requests for Conzip, Ryzolt, and Ultram ER:** Adequate trial with immediate-release tramadol therapy, **and**
- **For Fentanyl (12 mcg/hr, 25 mcg/hr, 75 mcg/hr, 100 mcg/hr) transdermal patch:** Inadequate response or intolerable side effect to generically available extended-release morphine (MS Contin), **and**
- **For Fentanyl (37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr) transdermal patch:** Medical rationale why preferred generically available fentanyl (12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, or 100 mcg/hr) transdermal patch formulations cannot be used, **and**
- **For Xtampza ER:** Inadequate response or intolerable side effect to generically available extended-release morphine (MS Contin), **AND** medical rationale why patient is unable to use generically available extended-release oxycodone (Oxycontin).

For those with pain not due to cancer, and currently on an extended-release opioid:

- Doctor has a specific plan for evaluating patient's response to therapy, monitoring for potential misuse, monitoring for side effects, and tapering down opioid use, **and**
- Will not be used together with another long-acting opioid, **and**
- Total dose of all opioid being used does not exceed 120 mg morphine equivalent dose per day, **and**
- Total quantity of dosage form has been consolidated to the least number of higher strength, **and**
- **For requests except Butrans, Fentanyl transdermal patches, Xtampza ER, Conzip, Ryzolt, and Ultram ER:** Inadequate response or intolerable side effect to generically available extended-release morphine (MS Contin), **and**
- **For requests for Conzip, Ryzolt, and Ultram ER:** Adequate trial with immediate-release tramadol therapy, **and**
- **For Fentanyl (12 mcg/hr, 25 mcg/hr, 75 mcg/hr, 100 mcg/hr) transdermal patch:** Inadequate response or intolerable side effect to generically available extended-release morphine (MS Contin), **and**
- **For Fentanyl (37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr) transdermal patch:** Medical rationale why preferred generically available fentanyl (12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, or 100 mcg/hr) transdermal patch formulations cannot be used, **and**
- **For Xtampza ER:** Inadequate response or intolerable side effect to generically available extended-release morphine (MS Contin), **AND** medical rationale why patient is unable to use generically available extended-release oxycodone (Oxycontin).

For brand-name Avinza, Belbuca, Conzip, Duragesic, Exalgo, Kadian, Methadose, Opana ER, Oxycontin, Ryzolt, Ultram ER, Zohydro ER:

- Meets above coverage criteria for generic, **and**
- Allergic or intolerable side effect to the generic formulation not expected with the brand.

Coverage Duration: up to 30 days

Effective Date: 6/01/2022