

tapentadol immediate-release (NUCYNTA)

Diagnosis Considered for Coverage:

- Moderate to severe acute pain

Coverage Criteria:

For pain related to cancer:

- Total dosage has been consolidated to the least number of higher strength dosage forms, **and**
- Dose does not exceed 600 mg per day, **and**
- Being recommended or prescribed by an oncologist.

For pain related to terminal illness:

- Total dosage has been consolidated to the least number of higher strength dosage forms, **and**
- Dose does not exceed 600 mg per day.

For pain not related to cancer or terminal illness:

- Inadequate response or intolerance to TWO preferred short-acting narcotic agents,

Preferred short-acting narcotic agents:

- Codeine w/acetaminophen
- Codeine w/aspirin
- Hydrocodone w/acetaminophen
- Hydrocodone w/ibuprofen
- Hydromorphone
- Morphine sulfate
- Oxycodone w/ibuprofen
- Oxycodone w/acetaminophen
- Oxycodone
- Tramadol
- Tramadol w/acetaminophen

AND

- Total dosage has been consolidated to the least number of higher strength dosage forms, **and**
- Dose does not exceed 600 mg per day, **and**
- One of the following:
 - Dose does not exceed the following therapy limit:

- 70 tablets per 30 days for 50 mg tablet
- 56 tablets per 30 days for 75 mg tablet
- 56 tablets per 30 days for 100 mg tablet

OR

- Does exceeds the above therapy limit and meets the NSI criteria below

Narcotic Safety Initiative (NSI) Coverage Criteria

Initial Request

- Prescribing or consulting MD attests narcotic quantity requested is necessary to adequately treat pain, **and**
- Documented patient-specific treatment plan for evaluating pain relief, potential misuse, and monitoring plan for adverse side effects, **and**
- Not being used with other short-acting narcotics, **and**
- Total dosage has been consolidated to the least number of higher strength dosage forms.

Reauthorization Request

- **If opioid use is expected to be more than 60 days:** Prescribing or consulting doctor is pain management and pain cannot be removed or otherwise treated by other treatment modalities (e.g. acupuncture, massage therapy, physical therapy), **and**
- Updated documentation of patient-specific treatment plan for evaluating pain relief, potential misuse, monitoring plan for side effects, and plan to taper total narcotic use, **and**
- Not being used with other short-acting narcotics, **and**
- Total dosage has been consolidated to the least number of higher strength dosage forms (e.g. tablets, capsules, suspension, etc.) **and**
- Dose does not exceed FDA maximum.

Coverage Duration: one year

Effective Date: 5/3/2023