



# Bulletin

To: HPM Providers

From: HPM Pharmacy Department

**Bulletin #: 09-1030**

Date: 10/30/2009

Re: Changes in Approval Criteria for OxyContin

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Due to its higher risk for misuse or diversion, the following changes to the Approval Criteria for OxyContin were directed by the Health Plan of Michigan Executive Committee and will be effective December 1, 2009. Requests for OxyContin will be considered via the established Prior Authorization process. **ALL EXISTING PRIOR AUTHORIZATIONS FOR OXYCONTIN WILL END ON FEBRUARY 28, 2010.**

## **CRITERIA FOR USE**

- Diagnosis of Cancer Related Pain
- Pain Management when ordered by a Board Certified Pain Management Specialist, or Hematologist/Oncologist, after therapeutic trial and failure of short and long-acting Formulary approved opiod analgesics.
  - Diagnosis of chronic pain for more than 90 days duration

## **REQUIRED MEDICAL INFORMATION FOR APPROVAL**

- Documentation of cancer and/or chronic pain diagnosis
- Prescribed by Hematologist/Oncologist or Pain Management Specialist
- Documented therapeutic trial and failure of 1<sup>st</sup> Line short and long-acting opioids:
  - Short-acting: morphine sulfate, oxycodone IR, methadone
  - Long-acting: morphine sulfate ER (MS Contin)
- Pain Management Plan of Care
- Pain Management Contract (when managed by Pain Management Specialist)

## **DOSING**

- 10mg TO 80mg twice (every 12 hours) daily dosing
- Quantity Limit – ALL STRENGTHS – 60 tablets every 30 days
- NOT approved if ordered PRN (as needed)

## **AUTHORIZATION**

- 6 months maximum
- Criteria for continuation of therapy beyond initial request, or 6 months:
  - Initial therapy was tolerated
  - Cancer diagnosis with cancer related pain remains valid
  - Pain Management Plan of Care remains effective and valid

## **RECOMMENDED DOSES OF OPIOID ANALGESICS**

*Initial Doses*

*Adult oral Dose (mg)*

### **Opioid for Mild to Moderate Pain (mu Agonists)**

Codeine	30 – 60
Hydrocodone	5 – 10
Oxycodone (short acting)	5
Tramadol (Ultram)	50 – 100

### **Opioids for Moderate to Severe Pain (mu Receptor Agonists)**

Morphine (short acting)	15 – 30
Hydromorphone (Dilaudid)	4 – 8
Methadone (Dolophine)	5 - 10

*SOURCE: Koda-Kimble MA, et al. Applied Therapeutics: The Clinical Use of Drugs. Ninth Edition. 2009*

## **World Health Organization recommended initial regimens for Different Pain Levels**

<b>Pain Level Description</b>	<b>Typical Corresponding Numerical Rating (0 – 10 Scale)</b>	<b>Who Therapeutic Recommendations</b>	<b>Example Medicines for Initial Therapy</b>	<b>Comments</b>
“Mild Pain”	1 – 3	Nonopioid analgesic: taken on a regular schedule, not as needed (prn)	<ul style="list-style-type: none"> <li>Acetaminophen 650mg every 4 hours</li> <li>Acetaminophen 1,000mg every 6 hours</li> <li>Ibuprofen 600mg every 6 hours</li> </ul>	<ul style="list-style-type: none"> <li>Consider adding adjunct analgesic or using an alternative regimen if pain not reduced in 12 days</li> <li>Consider step up if pain not relieved by two different regimens</li> </ul>
“Moderate” Pain	4 – 6	Add opioid for moderate pain. Use on a schedule, not prn (Codeine, Hydrocodone, Oxycodone, tramadol)	<ul style="list-style-type: none"> <li>Acetaminophen 325mg/Codeine 60mg every 4 hours</li> <li>Acetaminophen 325mg/Oxycodone 5mg every 4 hours</li> <li>Tramadol 50mg every 6 hours</li> </ul>	<ul style="list-style-type: none"> <li>Consider adding adjunct analgesic or using an alternative regimen if pain not reduced in 12 days</li> <li>Consider step up if pain not relieved by two different regimens</li> </ul>
“Severe” Pain	7 – 10	Switch to high potency opioid. Administer on a regular schedule (Morphine, Hydromorphone, Methadone)	<ul style="list-style-type: none"> <li>Morphine 15mg every 4 hours</li> <li>Hydromorphone 4mg every 4 hours</li> <li>Morphine controlled release 60mg every 8 hours</li> </ul>	<ul style="list-style-type: none"> <li>Consider alternative regimen if pain not reduced in 12 days</li> <li>Consider increased dose of strong opioid, or addition of nonopioid agents, if pain is not adequately relieved by two regimens.</li> </ul>

Adapted from the World Health Organization, <http://www.who.int/cancer/palliative/painladder/en/>

If you should have any questions please feel free to contact the Provider Services Department at 1-888-773-2647