PROVIDER BULLETIN PROVIDER INFORMATION



August 14, 2017

New Drug-Related Prior Authorization (PA) and Quantity Limit (QL) Criteria: Concurrent Opioids with Buprenorphine

Effective October 1, 2017, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will require PA for selected pain medications, when there is a concurrent claim for a buprenorphine or buprenorphine/naloxone product in the subscriber's prescription history.

The intent of the Conccurrent Opioids with Buprenorphine PA is to help prevent inappropriate use of opioid agents while receiving buprenorphine or buprenorphine/naloxone agents for the treatment of opioid dependence. The program will allow for use of opioids or opioid combinations concurrently with buprenorphine or buprenorphine/naloxone agents for the treatment of opioid dependence when the prescriber has provided documentation that such treatment is appropriate.

Please note: QLs are currently in place with the selected pain medications.

As stewards of healthcare expenditures for our subscribers, we are charged with ensuring the highest quality, evidence based care. One method for doing so is through the PA process. The primary purpose of the PA process is to ensure that evidence based care is provided to our subscribers, driving quality, safety, and affordability.

Products Impacted

This PA program applies to the following Minnesota Health Care Programs:

- Blue Advantage Prepaid Medical Assistance Program (PMAP)
- Minnesota Senior Care Plus (MSC+)
- MinnesotaCare

New PA criteria will be posted by September 1, 2017, and may be accessed using the Blue Cross provider link.

- Access providers.bluecrossmn.com
- Under Tools and Resources, select Medical policy, then acknowledge the Acceptance statement
- Select Utilization Management
- Select Pharmacy Utilization Management Programs

CoverMyMeds prior authorization request service

As a reminder, CoverMyMeds (CMM) is a free service to providers which allows quick and easy submission of PA requests. Experience with CMM by other plans has demonstrated marked reductions in physician office call-backs regarding PA requests, after CMM is implemented. PA requests may also continue to be faxed to their review destination external to the CMM portal, as is the current practice.

You may access CMM at www.covermymeds.com. Select Help (top right of the web page) to view FAQs and Support tutorials (3-5 minutes), including live online chat support to help you get started. You will need to open a CMM account to submit requests using the portal.

Questions?

If you have questions, please contact provider services at (651) 662-5200 or 1-800-262-0820.

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