

Connecticut Department of Social Services Medical Assistance Program www.ctdssmap.com

Provider Bulletin 2020-58 July 2020

TO: Pharmacy Providers, Physicians, Nurse Practitioners, Physician Assistants, Clinics, Long Term Care Providers and Hospitals

RE: Updated Opioid Prior Authorization Requirements

The purpose of this bulletin is to notify providers of upcoming changes to the Opioid Prior Authorization (PA) form. As a reminder, PA is required for all opioid medications for HUSKY A, HUSKY B, HUSKY C, HUSKY D, and Family Planning members.

Effective August 19, 2020, the 'Clinical Information' section of the PA form will be updated to include new clinical conditions and attestations from the provider that will bypass the need for a letter of medical necessity. Members not meeting the clinical criteria will continue to require Letters of Medical Necessity to be considered for approval. The additional clinical conditions that will be added to the Opioid PA Form include:

- cancer-associated pain syndrome
- sickle cell pain syndrome
- severe arthritis
- post-traumatic pain syndrome
- renal colic
- pancreatitis
- avascular necrosis
- spinal compression fracture(s)
- painful cutaneous ulcers/wounds

Please note that a diagnosis code is <u>NOT</u> a requirement for coverage and does not need to be included on the PA form. However, the inclusion of a diagnosis code on a prescription and transmitted by pharmacies on the NCPDP D.0 claim transaction may be used to bypass the PA requirement. The inclusion of a diagnosis on the PA form may bypass the need for a letter of medical necessity.

Please note that prescribing providers with the following taxonomies, who are actively

enrolled in the Connecticut Medical Assistance Program (CMAP) and who are treating a patient for any form of cancer or sickle cell disease and document the International Statistical Classification of Diseases and Related Health Problems (ICD-10) diagnosis code on the opioid prescription order, will be excluded from the PA requirement:

- 207RH0000X Allopathic & Osteopathic Physicians/Internal Medicine, Hematology
- 207RH0003X Allopathic & Osteopathic Physicians/Internal Medicine, Hematology & Oncology
- 207RX0202X Allopathic & Osteopathic Physicians/Internal Medicine, Medical Oncology
- 2080P0207X Allopathic & Osteopathic Physicians/Pediatrics, Pediatric Hematology-Oncology

Please note the Opioid PA functionality via the secure Web portal will also be updated to include these new clinical conditions.

Please refer to <u>Provider Bulletin 2019-67</u> for the specifics regarding the short acting opioid (SAO) policy and <u>Provider Bulletin 2016-79</u> for the long acting opioid (LAO) policy.

Submission of Letters of Medical Necessity

The Department of Social Services (DSS) requests that prescribing providers scan and email all opioid PAs that require submission of a letter of medical necessity to Rx.LMN@ct.gov. As a reminder, a letter of medical necessity is required when the prescribing provider answers "no" to any of the



clinical information questions on the Opioid PA form or via the secure Web portal. Forms and submissions where the provider answers with "yes" to all of the clinical information criteria should be faxed to the number at the top of the Opioid PA form or submitted using the Opioid PA functionality via the secure Web portal. DSS does request that providers do not share the Rx.LMN@ct.gov email address with clients as this email box is for provider use only.

An <u>updated Opioid PA Form</u> with the new email address is available on the <u>www.ctdssmap.com</u> Web site. From the Home page, go to Pharmacy Information → Pharmacy Program Publications → Opioid PA Form.

The secure Web portal will be updated with messaging to include the new email address.

NOTE: For PA types including Opioid Prior Authorization, Non-Preferred Drug List (Non-PDL), Brand Medically Necessary (BMN), Early Refill (ER), and Optimal Dosage (OD), prescribers may continue to submit their request via the Pharmacy Web PA feature on the www.ctdssmap.com secure Web portal or fax them to the Pharmacy Prior Authorization Assistance Center at 1-866-759-4110 or (860) 269-2035. Prescribing providers also have the ability to check the status of PAs submitted either through the Web portal or transmitted by Fax via the secure Web Please refer to Provider Bulletin portal. 2019-70. Web Pharmacv **Prior** Authorization for additional information.

