

Memorandum

To: Plan Members
 From: Citizens Rx
 Subject: Short-acting opioid edit

As part of a larger strategy to address increasing concerns and negative health outcomes associated with the opioid epidemic, LSU First would like to notify you of changes to coverage of opioid prescriptions. Currently, there is insufficient clinical evidence to support long-term use of opioids in acute or chronic non-cancer pain. In fact, more clinical research reveals longer treatment durations and exposure to higher morphine milligram equivalents (MME) has substantial negative health risks. These health risks include but are not limited to depression, physical dependence, potential overdose, and even death.

In response to these concerns, LSU First, through its pharmacy benefits manager Citizens Rx, will implement short-acting opioid quantity and day supply limits for first-time and non-chronic opioid prescriptions. The goal of these limits is to reduce the risk of long-term use and misuse of opioids.

Effective August 1, 2018, LSU First will limit acute opioid therapy coverage for ALL new and non-chronic opioid prescriptions.

- You can receive opioid prescription coverage for up to 7 days in a 30-day period at predefined maximum dosages and quantity limits. Appropriate provisions and prior authorization approvals will be granted for patients requiring medically necessary quantities above these limits.

The following table illustrates the maximum quantities covered per 7 days for certain oral opioid formulations:

Description	Dosage Form	Max # per 7 Days	Max Daily #	Representative Brands
Codeine/Acetaminophen	Tablet	28	4	Tylenol® with Codeine
Hydrocodone/Acetaminophen	Tablet	28	4	Lortab®, Vicodin®
Hydrocodone/Ibuprofen	Tablet	28	4	Vicoprofen®
Hydromorphone	Tablet	28	4	Dilaudid®
Meperidine	Tablet	28	4	Demerol®
Morphine Sulfate	Tablet	28	4	
Oxycodone, Oxycodone/Acetaminophen, Oxycodone/Aspirin, Oxycodone/Ibuprofen	Tablet/ Capsule	28	4	Roxicodone®, Endocet®, Percocet®, Roxicet®
Oxymorphone HCl	Tablet	28	4	Opana®
Tapentadol	Tablet	28	4	Nucynta®
Tramadol/Acetaminophen	Tablet	28	4	Ultram®, Ultracet®

Again, this benefit limit will be **effective starting August 1, 2018**. If you will be impacted by this change, we encourage you to review the necessity of continuing opioid therapy and alternative, non-opioid treatment options with your doctor. Your doctor may call 888-471-8620 with questions or to obtain a prior authorization form.

If you have any questions about these plan changes, please contact Citizens Rx Member Service Department at 888-471-8620.