



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

626 8th Avenue, SE • P.O. Box 45502 • Olympia, Washington 98504-5502

August 31, 2017

Dear Provider,

On ~~October 1~~, **November 1, 2017**, a new Health Care Authority (HCA) clinical policy pertaining to opioid prescriptions takes effect for Apple Health (Medicaid), both through managed care organizations and fee-for-service.

We're writing to make you aware of the policy and to ask you to "save the date" for a one-hour webinar about the policy. We know this represents a significant change for your practice and your patients, and we want to give you an opportunity to learn about the policy in detail, and to ask any questions you may have. The webinar will be offered twice in September, and will also be recorded. (See details, page two of this letter.)

Please note, this letter updates the information HCA sent to providers on August 23, 2017. If you received the earlier communication, note the changes below under "MED dose limits."

New policy helps combat opioid crisis

As you are aware, opioid use disorder (misuse and addiction) is a public health crisis in Washington State and across the country. In October 2016, Governor Inslee issued Executive Order 16-09, marshalling the state's resources to combat this crisis. These efforts include preventing opioid use disorder as well as treating it.

HCA's opioid clinical policy is a prevention and patient safety tool. The focus is on acute prescriptions and on the transition from acute to chronic use, since these are critical to reducing long-term opioid use and the risk of developing opioid use disorder.

Medical organizations support

HCA coordinated with the Washington State Medical Association, Washington State Hospital Association, health plan partners, and others in developing the policy, which aligns with recommendations of the Centers for Disease Control, the Washington State Agency Medical Directors Group, and the Bree Collaborative around safe and appropriate opioid prescribing.

Summary of policy requirements

Risk of long-term opioid use goes up with every day's supply on the initial prescription, and with every refill. By prescribing the lowest effective dose for the shortest time needed, you can help prevent opioid use disorder.

The policy limits the quantity of opioids that can be prescribed to opiate naïve patients for non-cancer pain. The limits for new opioid prescriptions will be:

- No more than 18 doses (approximately a 3-day supply) for patients age 20 or younger.
- No more than 42 doses (approximately a 7-day supply) for patients age 21 or older.

You can override these limits if you feel this is medically necessary, by typing "Exempt" in the text of the prescription.

At the point of transition from acute to chronic opioid treatment, defined as six weeks of therapy, the policy requires that you attest that you are following best practices for opioid prescribing. These are listed on the HCA Chronic Opioid Attestation form, which will soon be available online, and include actions such as checking the Prescription Monitoring Program, informing the patient about the risks of opioid use, and using a pain contract. Documentation of these practices should be in the chart, but you are not required to submit supporting materials.

Exceptions

- Patients who are undergoing active cancer treatment or who are in hospice, palliative care, or end-of-life care are exempt from these limits and prior authorization.
- Patients who are already on chronic opioids will be grandfathered under the policy, and will not be subject to these limits or to prior authorization.

You can read the full policy on the HCA website. (The policy and other materials are on the HCA website at www.hca.wa.gov/billers-providers/programs-and-services/opioids.)

MED dose limits

While initially intending to implement a 90 MED dose limit and peer-to-peer consultation for patients requiring doses beyond that amount, we will be postponing these requirements for now. We are taking additional time to assure that any exemption or request process we implement does not unduly burden providers. We also want to assure that mechanisms are in place to assure adequate acute pain treatment is not limited for the small subset of patients in whom 90 MED would not provide adequate relief.

Online resources available soon

Informational materials about the policy will be available soon, including an online Q&A for providers and pharmacists, detailed scenarios to explain how the policy would be applied in different situations, and a patient handout.

These materials will be available on the HCA website before the September webinars.

Join a webinar on the opioid policy

The Health Care Authority will host a one-hour webinar for prescribers and pharmacists on two different dates in September. Registration is now open.

- Monday, Sept. 11, noon to 1 p.m.
Register: <https://attendee.gotowebinar.com/register/6493409294646854657>
- Tuesday, Sept. 19, 7 to 8 a.m.
Register: <https://attendee.gotowebinar.com/register/6099874291856535809>

Important step

The opioid clinical policy is an important step in helping children and adults in Washington avoid opioid use disorder, and supporting safe and effective use of opioids. I appreciate your engagement with this effort to lower the effects of the opioid crisis in our state.

Sincerely,



(for) Daniel S. Lessler, MD, Chief Medical Officer