

Effective **12/10/07** – Patient Specific Prior Authorization Required For All New Patients Prescribed **Suboxone<sup>®</sup>** (buprenorphine/naloxone) or **Subutex<sup>®</sup>** (buprenorphine)

November 27, 2007

Dear Prescriber:

At the November meeting of the Drug Utilization Review (DUR) Board of the Office of Vermont Health Access (OVHA) a significant change was made to the prior authorization requirements for Suboxone<sup>®</sup> and Subutex<sup>®</sup>. Patient specific prior authorization will need to be obtained for all new patients (those patients with no history of a Suboxone<sup>®</sup> or Subutex<sup>®</sup> claim within the past 30 (thirty) days). Physicians will no longer be granted approval to prescribe these medications for any new patients without first obtaining a patient specific prior authorization. This change becomes effective **12/10/07**.

As you are aware, Suboxone<sup>®</sup> and Subutex<sup>®</sup> have received FDA approval only for the treatment of opioid addiction. Vermont Medicaid will grant prior authorization only for patients who have a diagnosis of opioid dependency. Prior authorization will not be granted for buprenorphine prescribed for pain control.

The Drug Addiction Treatment Act of 2000 (DATA 2000) enables *qualifying physicians* to receive a *waiver* from the special registration requirements in the Controlled Substances Act for the provision of medication-assisted opioid addiction therapy. On October 8, 2002 Suboxone<sup>®</sup> tablets (buprenorphine/naloxone) and Subutex<sup>®</sup> (buprenorphine) received FDA approval for the treatment of opioid addiction. Physician assistants and nurse practitioners may not prescribe buprenorphine for opioid addiction treatment as these practitioners are not included in the definition of "*qualifying physicians*".

Physicians must include their DATA 2000 waiver ID number or "X" number on prescriptions for buprenorphine for opioid addiction treatment in addition to their DEA registration number. Prior authorization will only be granted to patients whose requesting prescriber has a DATA 2000 waiver ID number.

Lastly, due to reports of Subutex<sup>®</sup> (buprenorphine "mono" tablet) being diverted and abused by injection or intranasal use, prior authorization will only be granted for Subutex<sup>®</sup> in select patients. Patient reports of intolerance to naloxone in Suboxone<sup>®</sup> should be carefully evaluated as this intolerance has not been reported in the literature. The naloxone in Suboxone<sup>®</sup> guards against abuse. If Suboxone<sup>®</sup> is taken sublingually, the buprenorphine is absorbed while the naloxone is not. If Suboxone<sup>®</sup> tablets are crushed and injected, the naloxone causes opioid withdrawal. Prior authorization will be granted for Subutex<sup>®</sup> for pregnant women and patients with medical record documentation of naloxone intolerance.

You are receiving this mailing as per our current pharmacy claims activity you have issued a prescription for buprenorphine within the past six months. An updated prior authorization form is attached to this letter for your use (if applicable). In the coming months, steps will be taken to review currently established Suboxone<sup>®</sup> and Subutex<sup>®</sup> patients to ensure that buprenorphine use in these patients is in accordance with the above criteria. We hope you find this information useful and informative. If you have questions related to this change in benefit coverage, please feel free to contact our on-site MedMetrics' Clinical Account Manager, Diane Neal, R.Ph, at 1-802-879-5605.

Thank you for your continued support of the State of Vermont's clinical pharmacy programs.

Respectively,



Erin Reisfeld, M.D.  
Medical Director