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# North Dakota Medicaid Pharmacy Program Quarterly News

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Welcome to the “North Dakota Medicaid Pharmacy Program Quarterly News,” a pharmacy newsletter presented by the North Dakota Department of Human Services and published by Health Information Designs. This newsletter is published as part of a continuing effort to keep the Medicaid provider community informed of important changes in the North Dakota Medicaid Pharmacy Program.

The North Dakota Department of Human Services has contracted with Health Information Designs (HID) to review and process prior authorizations (PAs) for medications. For a current list of medications requiring a PA, as well as the necessary forms and criteria, visit [www.hidndmedicaid.com](http://www.hidndmedicaid.com), or call HID at (866) 773-0695 to have this information faxed. An important feature on this website is the NDC Drug Lookup. This allows you to determine if a specific NDC is covered (effective date), reimbursement amount, MAC pricing, copay information, and any limitations (prior authorization or quantity limits).

This newsletter provides information regarding safe prescribing tips for opioids. Also included are the recent prior authorization updates and criteria for coverage.

The North Dakota Medicaid Pharmacy Program team appreciates your comments and suggestions regarding this newsletter. To suggest topics for inclusion, or to make comments, please contact Health Information Designs at (334) 502-3262, call toll free at 1-800-225-6998, or e-mail us at [info@hidinc.com](mailto:info@hidinc.com).

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### Helpful Numbers

PA Help Desk	866-773-0695
To fax PAs	866-254-0761
To report adverse reactions	800-FDA-1088

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**Visit HID’s North Dakota Department of Human Services Prior Authorization website, [www.hidndmedicaid.com](http://www.hidndmedicaid.com).**

## Safe Prescribing Tips for Opioids

Opioids are an important class of medication used in the treatment of acute and chronic pain. While these drugs provide significant relief to patients, they also have many unwanted and often dangerous side effects. It is important to recognize that opioids are effective for some patients but are ineffective or potentially harmful to others. Opioids need to be used as safely as possible. There are several things prescribers can do to increase the safety of opioid use. Below are a few guidelines to help ensure the safe prescribing and use of opioids.

**Individualize treatment.** Keep in mind that opioids are a class of medications, and may not be the only treatment option for patients. For some patients, opioids will not be effective alone or well tolerated; the treatment plan for each patient should account for variability in patient responses.

**Consider long-acting preparations.** It cannot be said that long-acting opioids provide superior pain relief compared with shorter-acting opioids, but longer-acting opioids may require fewer pills. They also may provide the potential benefit of more stable blood levels of the medication rather than highs and lows produced with short-acting opioids. As a result, they tend not to reinforce potentially addictive behaviors.

**Use multimodal therapy.** Opioids are a class of medications that may be useful in many patients with moderate to severe pain, but not all. When opioids are used to treat chronic pain, they should be considered one portion of a multimodal treatment plan. The treatment plan should acknowledge that the patient is likely to benefit from a range of therapies, both pharmacologic and non-pharmacologic. In patients with chronic pain, opioid therapy should be considered after the patient has tried and failed non-opioid therapy as well as non-pharmacologic pain therapy.

**Educate patients and get a written treatment agreement.** Patients must be educated regarding their therapy, especially when opioids are a part of their treatment plan. Some patients may be afraid that the use of opioids will cause more harm than good, while others may think of opioids as a cure-all. Patients should be informed that total pain relief with opioids is rare. Patients should be well informed of the goals of therapy as well as the prescribers' expectation of them as a patient. There should be a treatment agreement signed by the patient and prescriber, which can be used as a tool for educating the patient about the opioid treatment plan and to document the patient's agreement to participate.

**Refer patients to a specialist.** Most patients on opioid therapy can be monitored in the primary care setting; however, some patients have complicated medical or social conditions which require integrated care with specialists outside of the primary care setting. These more complicated cases may be treated successfully within primary care

## Safe Prescribing Tips for Opioids, cont.

by involving specialists as co-managers. The management of patients with a history of substance abuse may require extra care, monitoring, documentation, and consultation with a behavioral health specialist.

**Use opioid monitoring.** Random urine drug screening may be important, even before an opioid is prescribed. This can be an important part of the patient history as it can screen for the presence of illegal drugs, unreported prescribed medications, or unreported alcohol use prior to starting therapy. It's important to know who you are prescribing to in order to maximize benefit and safety.

**Consider tamper-resistant products.** There are many new products available—as well as many products in the pipeline—to help reduce inappropriate use. These products will not prevent all misuse but they can help prevent patients from crushing the medication for a use other than the medical purpose of an opioid. The tamper-resistant products should be considered in all patients and not just those exhibiting potential abuse behaviors.

References:

Chou R, Fanciullo GJ, Fine PG, et al. Clinical guidelines for the use of chronic opioid therapy in chronic noncancer pain. *J Pain*, 2009;10(2):113-130.

The Department of Veterans Affairs and The Department of Defense. Clinical Practice Guideline for Management of Opioid Therapy for Chronic Pain. Washington, DC. Available at: [http://www.healthquality.va.gov/Chronic\\_Opioid\\_Therapy\\_COT.asp](http://www.healthquality.va.gov/Chronic_Opioid_Therapy_COT.asp)

### ND Medicaid Prior Authorization Updates

Drug or Class	Criteria for Coverage
Ophthalmic Antihistamines	Trial and failure of ketotifen, azelastine, elestat, emadine or patanol
Hepatitis C Agents	FDA approved indication.
Hereditary Angioedema Agents	FDA approved indication.
Oral Anticoagulants	FDA approved indication.
Asacol HD	Trial and failure of Asacol.
Horizant	FDA approved indication and trial and failure of gabapentin, pramipexole, or ropinirole.
Daliresp	FDA approved indication.
Dificid	FDA approved indication and trial and failure following current treatment guidelines.



Health Information Designs (HID) is the most experienced and qualified provider of drug utilization review and pharmacy support services in the country. We specialize in helping our clients promote clinically appropriate and cost-effective prescribing, dispensing, and utilization of prescription drugs.

HID was founded in 1976 with a mission to improve patient care and contain costs for state Medicaid agencies by providing drug utilization review (DUR) services. In 1997, HID was acquired by HDI Solutions and subsequently has experienced strong and steady growth as a premium healthcare analytics and pharmacy support services provider. HID is the industry leader in providing comprehensive prescription drug monitoring programs and state Medicaid pharmacy decision support systems, informatics, and related services. Currently, HID works with clients in 29 states, including 17 Medicaid agencies, 17 Boards of Pharmacy and state health agencies, and several private healthcare benefit management organizations. The work performed by HID has a daily impact on the healthcare of more than 70 million Americans.



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