

# North Dakota Medicaid Pharmacy Program Quarterly News

Published Quarterly by Acentra Health

## Quarter 2

SPRING 2024

### *Benzodiazepine Deprescribing*

Prescribers should evaluate the benefit risk ratio to provide safe and effective patient centered care when prescribing benzodiazepines. These agents have some clinical value for specific indications, but have various black box labeled warnings. Despite warnings regarding concomitant use with opioids and risk of abuse, these agents are widely used. Benzodiazepines should be used at the lowest effective dose and shortest duration, and prescribers should routinely evaluate the need for continuation.

When discontinuing benzodiazepines, prescribers should implement a gradual taper that is patient specific with frequent monitoring to limit the risk of tolerance, physical dependence, and withdrawal. Based on reports from the FDA Adverse Event Reporting System (FAERS), withdrawal cases are increasing. Longer duration of treatment, higher doses, and abrupt discontinuation increase the risk of withdrawal reactions which can be life threatening. Tapering schedules should be flexible and may take months to years depending on patient response.

#### **Best Practice Recommendations:**

- Since alternative agents take longer to see effects, a benzodiazepine should be prescribed simultaneously with weekly monitoring; the benzodiazepine should be discontinued by week four
- Tapering:
  - Offer tapering for patients on benzodiazepines longer than one month
  - Reduce the dose by less than 5% of the original dose and adjust the tapering schedule based on patient response; tapering may take 12-18 months
  - Monitor every 1-2 weeks for benefits (decrease sedation and fall risk) and withdrawal symptoms which are usually mild and last a few days to weeks (anxiety, irritability, nausea, insomnia)

### *Drug Diversion Combinations*

Prescribers can limit drug diversion by assessing the need for high-risk medications, risk of substance abuse, and state Prescription Drug Monitoring Programs (PDMPs). Suspected drug diversion should be documented and reported. Drug classes with a high-risk for diversion include anabolic steroids, central nervous system depressants, hallucinogens, opioids, and stimulants.

Prescribers should be aware of the following recent trends for drug diversion:

- Benzodiazepine and high dose stimulant
- Benzodiazepine and gabapentin
- Opioids, stimulant, and gabapentin
- Opioids and stimulants

#### **References:**

1. McClellan M, Throckmorton D, Reissig C, McAninch J, Kroenke K, Iwanicki J, et al. Safe use of benzodiazepines: clinical, regulatory, and public health perspectives. Conference presentation (virtual); July 12-13, 2021. Available from: <https://healthpolicy.duke.edu/sites/default/files/2021-07/Safe%20Use%20of%20Benzodiazepines%20Workshop%20Slide%20Deck.pdf>
2. Pottie K, Thompson W, Davies S, Grenier J, Sadowski CA, Welch V, Holbrook A, Boyd C, Swenson R, Ma A, Farrell B. Deprescribing benzodiazepine receptor agonists: Evidence-based clinical practice guideline. *Can Fam Physician*. 2018 May;64(5):339-351. PMID: 29760253; PMCID: PMC5951648.
3. U.S. Department of Health and Human Services: Centers for Medicare & Medicaid Services. Drug diversion: what is a prescriber's role in preventing the diversion of prescription drugs; February 2016. Available from: <https://www.hhs.gov/guidance/sites/default/files/hhs-guidance-documents/DrugDiversionFS022316.pdf>
4. Sullivan D. 24 February 2023. A Discussion of Targeted interventions to Address Prescription Drug Diversion [PowerPoint slides], College of Pharmacy, Ohio State University. <https://adurs.com>

# North Dakota Medicaid Pharmacy Program Quarterly News

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The “North Dakota Medicaid Pharmacy Program Quarterly News” is a pharmacy newsletter presented by the North Dakota Department of Health and Human Services and published by Acentra Health. 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 Health and Human Services has contracted with Acentra Health 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 <https://ndmedicaid.acentra.com/> or call Acentra Health at (866) 773-0695 to have this information faxed. An important feature on this website is the NDC Drug Lookup, which 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).

The North Dakota Medicaid Pharmacy Program team appreciates your comments and suggestions regarding this newsletter. To suggest topics for inclusion, please contact Acentra Health at 1-800-225-6998 or e-mail us at [ND\\_Medicaid\\_Info@acentra.com](mailto:ND_Medicaid_Info@acentra.com).



#### Helpful Numbers

PA Help Desk	866-773-0695
To fax PAs	855-207-0250
To report adverse reactions	800-FDA-1088

#### Stay Informed:

##### Quarter 3 Newsletter:

Website Redesign  
Non-Emergent Transportation  
Omnipod Criteria Update

##### Upcoming DUR Board Meetings:

Wednesday, June 5, 2024 at 1:00 PM