



FAQ: Safety and Monitoring Program for High-Risk Medication Use

Based on rules from the Centers for Medicare and Medicaid Services (CMS), PacificSource is implementing chronic opioid use coordination changes for opioid utilization to prevent abuse and misuse of frequently abused drugs. These new guidelines will become part of the PacificSource drug management program, broadening the outreach and education throughout service areas. The goal is to reduce the risk of opioid overdose and help members with a potential opioid-use disorder receive treatment.

How is potential abuse and misuse by members identified?

We review the prescription-fill history for any of the following at-risk behaviors:

- A high number of controlled substance claims
- Multiple prescribers of controlled-substances prescriptions filled at multiple pharmacies
- Cumulative opioid doses at or above 90 milligrams of morphine equivalents
- Combinations of opioid potentiators, such as gabapentinoids and benzodiazepines

What happens when a member is identified?

If identified at the dispensing pharmacy:

- The pharmacist will receive an alert that there is a safety concern and to contact the prescribing provider for verification.
- The dispensing pharmacist will use his or her clinical judgment before inputting override codes required before the opioid claim can pay.

When identified at the health plan:

- Clinicians will review identified claims for risk assessment.
- If a risk of medication abuse or misuse is identified, the health plan sends letters to prescribers and members, addressing individual member cases.
- Members continuing to use high-risk medications may be limited to a single provider and pharmacy. We will work with that provider to identify the best options for the member.

How are members notified?

In the event a member is restricted to one provider and one pharmacy, the member and prescribers will receive letters from PacificSource informing them of the upcoming restrictions.

Are any members excluded?

Members with the following conditions or fills are excluded from this program:

- Hospice, palliative, or end-of-life care
- Active treatment for cancer pain
- Resident in a long-term care facility
- Buprenorphine products for medication-assisted treatment programs



Still have questions?

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