



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
Bureau for Medical Services  
Office of Pharmacy Services  
350 Capitol Street - Room 251  
Charleston, West Virginia 25301-3706  
Phone: (304) 558-1700 - Fax: (304) 558-1542

Joe Manchin III  
Governor

Patsy A. Hardy, FACHE, MSN, MBA  
Cabinet Secretary

June 15, 2010

Dear Pharmacy Provider,

Effective August 1, 2010, all prescriptions for Subutex® and Suboxone®, including their generic equivalents if available, will require prior authorization for West Virginia Medicaid members. This action is being taken due to the increasing reports of abuse and diversion of these medications. For your convenience, a member notice is enclosed to post in your pharmacy.

Members' physicians have been advised of this change and encouraged to seek prior authorization (PA) before the start of the new requirements in order to avoid any delay in access to Subutex® and Suboxone® when medically necessary. However, the staff at the Rational Drug Therapy Program has been instructed to allow a one-time PA when pharmacists call and indicate that the physician has not been proactive in seeking the request. After the transition period, only the prescriber may make the PA request.

Please note that coverage of these drugs is limited to prescriptions written by physicians who are enrolled with WV Medicaid and bill Medicaid for their addiction treatment/management services. Non-enrolled prescribers have been notified of this change.

If Medicaid members choose to pay cash for their Subutex®/Suboxone® prescriptions, we encourage you to submit a Cash Waiver form to Medicaid. This form is included for duplication and can be downloaded from the BMS website: [www.wvdhhr.org/bms](http://www.wvdhhr.org/bms).

Criteria for coverage include:

- Subutex® will only be approved for use during pregnancy
- Confirmed diagnosis of opiate addiction/dependence (diagnosis code required)
- Prescribed by a qualified physician enrolled with WV Medicaid, with an assigned DEA-X number (*Note: claims are processed with the prescriber NPI. It is extremely important that accurate NPI information is submitted.*)
- Patients are at least 16 years of age
- Maximum maintenance dose is 16mg (*tablet splitting for lower doses is required, when appropriate*) *Current evidence shows that higher doses do not increase the success of the treatment program, but lead to an increased incidence of drug diversion and an unnecessary cost burden.*
- Early refills are not permitted, including lost or stolen medications
- Combination with benzodiazepines and hypnotics will deny (can be fatal when combined)
- PA is limited to:
  - Drug naïve patients : 7- day supply per prescription for a 3-month period, then;
  - If compliant with treatment plan: 14-day supply per prescription for a 6-month period, thereafter;
  - If compliant with treatment plan: 30-day supply per prescription per 6-month intervals

Please contact me by phone at 304-558-1700 or by email at [Peggy.A.King@wv.gov](mailto:Peggy.A.King@wv.gov) should you have questions regarding this change in policy.

Sincerely,

*Peggy A. King*

Peggy A. King, R.Ph.  
Director, Office of Pharmacy Services

Enclosures