

Suboxone®/Subutex®

Prior Authorization Criteria

Draft

All prescriptions for Suboxone (buprenorphine/naloxone) or Subutex (buprenorphine) require prior authorization.

Criteria for coverage are as follows:

- Prior authorization request must be made in writing by an approved prescriber on the designated PA form by fax or electronic submission
- Prescribed by a licensed physician who qualifies for a waiver under the Drug Addiction Treatment Act (DATA) and has notified the Center for Substance Abuse Treatment of the intention to treat addiction patients and has been assigned a DEA (X) number
- Prescribed by a WV Medicaid enrolled provider (enrolled directly, enrolled with WV Medicaid HMO, employed by a facility that is enrolled with WV Medicaid) who certifies he/she is treating the patient and billing WV Medicaid for this service
- Confirmed diagnosis of opiate abuse/dependence
 - Diagnosis code required
- The patient is at least 16 years of age (Exceptions can be handled on appeal to the Medical Director)
- Subutex will only be approved for use during pregnancy
- Minimum initial dose is 24 mg per day for a maximum of a 60-day period; initial dosing is limited to once per lifetime
- Maximum maintenance dose is 16 mg per day (tablet splitting for lower doses is required, when appropriate)
- Early refills are not permitted, including replacement of lost or stolen medication
- PA is limited to a 6-month period to be dispensed in corresponding quantities for the time periods specified by the prescriber, with a maximum time period of 30 days and 60 units.
- Combination with benzodiazepines, hypnotics, and opioids (tramadol) will be denied
- Patient must be warned about the dangers of ingesting concurrent sedating medications
- Attestation from prescriber that the Board of Pharmacy Prescription Drug Monitoring Program database has been reviewed and that patient has been warned about the dangers of ingesting concurrent sedating medications