

Opioid Dependence Medication-Assisted Therapy

Buprenorphine-naloxone products

Opioid addiction in the United States remains a deadly epidemic. What often starts as treatment for pain, too frequently ends in addiction to painkillers like opioids. This dependence leads to higher risk of death from respiratory depression or overdose and the need for drugs like buprenorphine-naloxone products used in medication-assisted treatment for opioid use disorders.¹

The Healthcare Fraud Prevention Partnership strongly encourages medication-assisted therapy for misuse of opioids or opioid use disorder over behavioral health therapy alone. Further, they report that medication-assisted treatment is cost-effective and more clinically effective at reducing opioid misuse than tapering, detoxification or abstinence, all of which carry higher rates of relapse.²

Buprenorphine*	Naloxone
An opioid medication designed for maintenance of opioid withdrawal symptoms.	A drug that reverses the effects of other narcotic medicines and decreases abuse potential.
Buprenorphine-naloxone	
A combination medicine used for the maintenance treatment of opioid dependence. If prescribed, buprenorphine-naloxone should be used as part of a complete treatment plan that includes counseling and psychosocial support for the patient.	

*Because of buprenorphine's opioid effects, it can be misused, particularly by people who do not have an opioid dependency. Naloxone is added to buprenorphine to decrease the likelihood of diversion and misuse of the combination drug product. When these products are taken as sublingual tablets, buprenorphine's opioid effects dominate and naloxone blocks opioid withdrawals. If the sublingual tablets are crushed and injected, however, the naloxone effect dominates and can bring on opioid withdrawals.³

Covered Drug List (closed formulary): Generic buprenorphine-naloxone film and Zubsolv[®] sublingual tablets are the preferred products for treating opioid overuse disorders.

Non-formulary drugs: Suboxone[®] sublingual film, buprenorphine sublingual and buprenorphine-naloxone sublingual tablet.

Exception requirements for non-formulary combination products:	Exceptions for buprenorphine alone include one of the following plus a diagnosis of opioid dependence:
<ul style="list-style-type: none"> • Member has opioid dependence; AND • Member must have tried and failed (e.g., intolerance or inadequate response) both generic buprenorphine-naloxone film and Zubsolv[®] sublingual tablets unless there is clinical evidence or patient history that suggests the use of these products will be ineffective or cause an adverse reaction to the patient for authorization to be considered for Suboxone[®] sublingual film or buprenorphine-naloxone sublingual tablet. 	<ul style="list-style-type: none"> • The patient is being treated for induction therapy; OR • The patient has moderate to severe hepatic impairment; OR • The patient is being treated for maintenance therapy because she is pregnant or breastfeeding; OR • Evidence that a buprenorphine/naloxone product was tried AND medical record documentation of severe naloxone intolerance (e.g., vomiting and/or debilitating headaches lasting several hours).

References: ¹Opioid withdrawal medically supervised withdrawal during treatment for opioid use disorder. Sevarino K. *Up to date*. <https://www.uptodate.com/contents/opioid-withdrawal-medically-supervised-withdrawal-during-treatment-for-opioid-use-disorder> (accessed December 2024) | ²Healthcare Fraud Prevention Partnership. Healthcare Payer Strategies to Reduce the Harms of Opioids, 2017. Chicago, IL: NORC at the University of Chicago. 2017:7, 20. | ³Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/medications-substance-use-disorders/medications-counseling-related-conditions/buprenorphine>. (accessed December 2024)

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