



## **Prescription Update**

To: Sharp Health Plan Providers
Attn: Providers and Provider Office Staff

From: Sharp Health Plan

Date: 03/30/18

Subject: Important Update to Sharp Health Plan's Commercial Drug Formulary.

This change does not apply to the Sharp Advantage Medicare Part D Drug Formulary.

## Attention Provider Partner:

The following change will be made to the Sharp Health Plan Commercial Drug Formulary, effective April 1, 2018:

The hard stop threshold for cumulative MED (morphine equivalent dose) levels will be lowered from 120 MED to 100 MED for members who are receiving opioid drugs from two or more prescribers. Members whose cumulative MED level exceeds 100 MED will require a prior authorization for their opioid medication. Prior Authorization requires the following:

- Prescriber has documented they are aware there are two or more prescribers for opioid medications
- Prescriber has attested that the prescribed dose of opioids is medically necessary and required for the level of pain management needed
- Provider has attested they are committed to monitoring the state's Prescription Monitoring Program to
  ensure controlled substance history is consistent with prescribing record

An exception to this safety edit will be made for members with the following conditions:

- Diagnosis of cancer
- Diagnosis of palliative care
- Diagnosis of sickle cell disease
- Member is receiving hospice care

A description of our opioid cumulative dose safety program is located on the Sharp Health Plan website at <a href="https://www.sharphealthplan.com/search/search-drug-list">https://www.sharphealthplan.com/search/search-drug-list</a> under the section titled, "Opioid cumulative dose program."

If you have any questions about the Sharp Health Plan drug formulary, please contact Customer Care at (858) 499-8300, toll-free at 1-800-359-2002 or via e-mail at <a href="mailto:customer.service@sharp.com">customer.service@sharp.com</a>. We are available to assist you 8 a.m. – 6 p.m., Monday – Friday.

Warm regards,

K. Tepedine

Kate Tepedino, PharmD Manager, Pharmacy Benefits

## PLEASE NOTE THE PHARMACY PRIOR AUTHORIZATION FAX NUMBER FOR SHP: (858) 357-2534

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