Buprenorphine (Brixadi™)

Point-of-Sale (POS) edits are safety limitations that are automatically verified through computer programming at the time that a prescription claim is submitted at the pharmacy. These edits can be applied to *any* medication, whether or not it is listed in the Preferred Drug List / Non-Preferred Drug List (PDL/NPDL). The first section of this document is organized to follow the order of the therapeutic classes in the PDL/NPDL and explains the POS edits for those medications.

POS Abbreviations

AL – Age Limit	**DS** – Maximum Days' Supply Allowed	**PU** – Prior Use of Other Medication is Required
BH – Behavioral Health Clinical Authorization for Children Younger than 7 Years of Age	**DT** – Duration of Therapy Limit	**QL** – Quantity Limit
BY – Diagnosis Codes Bypass Some Requirements	**DX** – Diagnosis Code Requirement	**RX** – Specific Prescription Requirement
CL – Additional Clinical Information is Required	**ER** – Early Refill	**TD** – Therapeutic Duplication
CU – Concurrent Use with Other Medication is Restricted	**MD** – Maximum Dose Limit	**YQ** – Yearly Quantity Limit
DD – Drug-Drug Interaction	**MME** – Maximum Morphine Milligram Equivalent is Restricted	

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POS Edits

AL – This agent is limited to use in recipients who are at least 18 years of age.

CU – This agent is monitored at POS for concurrent use with other agents.
- Incoming pharmacy claims for an opioid analgesic will deny when the recipient has an active prescription (a prescription in which the days' supply has not expired) for this agent.
- Incoming pharmacy claims for a benzodiazepine will deny when the recipient has an active prescription (a prescription in which the days' supply has not expired) for this agent.

DD – Pharmacy claims for naltrexone tablets or naltrexone extended-release injectable suspension (Vivitrol®) will deny for drug-drug interaction when the recipient has an active prescription (a prescription in which the days' supply has not expired) for this agent and vice versa.

DX – Pharmacy claims for this agent must be submitted with a diagnosis code for opioid dependence (F11.2*).

** Any number or letter or combination of **UP TO FOUR** numbers and letters of an assigned ICD-10-CM diagnosis code*

QL – This agent has quantity limits as listed in the chart to the right.

Quantity Limits	
Generic (Brand Example)	**Quantity Limit**
Buprenorphine Extended-Release Injection (Brixadi™) 8mg (weekly)	4 units/21 days
Buprenorphine Extended-Release Injection (Brixadi™) 16mg (weekly)	4 units/21 days
Buprenorphine Extended-Release Injection (Brixadi™) 24mg (weekly)	4 units/21 days
Buprenorphine Extended-Release Injection (Brixadi™) 32mg (weekly)	4 units/21 days
Buprenorphine Extended-Release Injection (Brixadi™) 64mg (monthly)	1 unit/21 days
Buprenorphine Extended-Release Injection (Brixadi™) 96mg (monthly)	1 unit/21 days
Buprenorphine Extended-Release Injection (Brixadi™) 128mg (monthly)	1 unit/21 days

TD – This agent is monitored at the pharmacy POS for duplication of therapy with other buprenorphine or buprenorphine/naloxone agents.
- Incoming prescriptions for buprenorphine or buprenorphine/naloxone agents will deny when the recipient has an active prescription (a prescription in which the days' supply has not expired) for any buprenorphine or buprenorphine/naloxone agent.

Revision / Date	Implementation Date
Created POS Document / August 2023	January 2024