

Pain Management – Skeletal Muscle Relaxants (43)

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	DD – Drug-Drug Interaction	MD – Maximum Dose Limit	TD - Therapeutic Duplication
BH – Behavioral Health Clinical Authorization for Children Younger than 7 Years of Age	DS Maximum Days’ Supply Allowed	PR – Enrollment in a Physician-Supervised Program Required	UN – Drug Use Not Warranted
BY – Diagnosis Codes Bypass Some Requirements	DT – Duration of Therapy Limit	PU – Prior Use of Other Medication is Required	X – Prescriber Must Have ‘X’ DEA Number
CL – Additional Clinical Information is Required	DX – Diagnosis Code Requirement	QL – Quantity Limit	YQ – Yearly Quantity Limit
CU – Concurrent Use with Other Medication is Restricted	ER – Early Refill	RX – Specific Prescription Requirement	

Pharmacy Prior Authorization Phone Numbers for MCOs and FFS

Aetna Better Health of Louisiana **1-855-242-0802**

AmeriHealth Caritas Louisiana **1-800-684-5502**

Fee-for-Service (FFS) Louisiana Legacy Medicaid **1-866-730-4357**

Healthy Blue **1-844-521-6942**

Louisiana Healthcare Connections **1-888-929-3790**

UnitedHealthcare **1-800-310-6826**

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POS Edits

No additional POS edits apply on all **EXCEPT** carisoprodol-containing products.

AL – Carisoprodol / aspirin / codeine combination products are limited to use in recipients who are at least 12 years of age.

<p>QL – Some skeletal muscle relaxants have quantity limits as listed in the chart to the right.</p> <p><i>Requests to override the Quantity Limit should follow THIS CRITERIA</i></p> <p>QL – Carisoprodol-containing products have a quantity limit of 90 tablets per rolling 90 days. The quantity limit applies to all strengths and combinations of carisoprodol.</p>	<u>Medication</u>	<u>Quantity Limit per 30 days</u>
	Baclofen 10mg	120 40 Units
	Baclofen 20mg	120 Units
	Cyclobenzaprine 5mg	90 Units
	Cyclobenzaprine 7.5mg Cyclobenzaprine 10mg	90 Units 90 Units
	Cyclobenzaprine 10mg	90 Units
	Cyclobenzaprine 15mg Tizanidine 2mg	30 Units 90 Units
	Cyclobenzaprine 30mg	30 Units
	Tizanidine 2mg	90 Units
	Tizanidine 4mg	90 Units
	Tizanidine 6mg	180 Units
	<p><u>Carisoprodol-containing products have a quantity limit of 90 tablets per rolling 90 days. The quantity limit applies to all strengths and combinations of carisoprodol.</u></p>	

Revision	Date
Created POS Document	February 2020
Updated age for BH in POS Abbreviations chart	November 2020
<u>Added age limit for codeine-containing products and quantity limits for selected products</u>	<u>December 2020</u>