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 | |

| POS Edits | | | | | |
|---|---|-------------|--|--|--|
| | Minimum Age Requirements | | | | |
| AL – The agents listed in the table to the right are limited to use in recipients who meet specific age requirements. | Generic (Brand Example) | Minimum Age | | | |
| | Buprenorphine (Sublocade®) | 18 years | | | |
| | Buprenorphine SL | 16 years | | | |
| | Buprenorphine/Naloxone (Suboxone®, Zubsolv®) | 16 years | | | |
| | Lofexidine (Lucemyra®) | 18 years | | | |
| | Naltrexone Extended-Release Injectable Suspension (Vivitrol®) | 18 years | | | |
| | Naltrexone Tablet | 18 years | | | |

CU – These agents are monitored at POS for concurrent use with other agents.

- Incoming pharmacy claims for a buprenorphine-containing agent used for opiate dependence will deny when the recipient has an active prescription (a prescription in which the days' supply has not expired) for an opioid analgesic.
- **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 any opioid (including buprenorphine-containing products) and vice versa.
- **DS** Pharmacy claims for lofexidine tablets are limited to a 14-day supply per 6-month period.
- **DX** Pharmacy claims for some agents must be submitted with an appropriate diagnosis code.
 - Pharmacy claims for all buprenorphine opiate dependence agents (single-ingredient and combination) must be submitted with a diagnosis code for opioid dependence (F11.2*).
 - Pharmacy claims for lofexidine (Lucemyra®) must be submitted with a diagnosis code for **ONE** of the following:
 - Opioid abuse with withdrawal F11.13
 - o Opioid dependence with withdrawal F11.23
 - Opioid use, unspecified with withdrawal F11.93
 - Pharmacy claims for naltrexone tablets or naltrexone extended-release injectable suspension (Vivitrol®) must be submitted with either a diagnosis code for opioid dependence (F11.2*) or alcohol dependence (F10.2*).
- * Any number or letter or combination of UP TO FOUR numbers and letters of an assigned ICD-10-CM diagnosis code
- **MD** The following agents are limited to a maximum daily dose:
 - Buprenorphine agents (single-ingredient and combination) are limited to a maximum daily dose of 24mg per day of buprenorphine or buprenorphine equivalent. Refer to specific product prescribing information for buprenorphine equivalence charts.
 - Lofexidine 0.18mg tablet is limited to a maximum daily dose of 2.88mg (16 tablets).

| POS Edits | | | | |
|--|---|--------------------------|--|--|
| | Quantity Limits | | | |
| QL – Some agents have quantity limits as listed in the chart to the right. | Generic (Brand Example) | Quantity Limit | | |
| | Buprenorphine Extended-Release Injection (Sublocade®) | 1 unit/26 days | | |
| | Buprenorphine SL Tablet 2mg | 2 units/day | | |
| | Buprenorphine SL Tablet 8mg | 3 units/day | | |
| | Buprenorphine/Naloxone 2mg/0.5mg SL Tab (Suboxone®) | 2 units/day | | |
| | Buprenorphine/Naloxone 2mg/0.5mg SL Film (Suboxone®) | 1 unit/day | | |
| | Buprenorphine/Naloxone 4mg/1mg SL Film (Suboxone®) | 1 unit/day | | |
| | Buprenorphine/Naloxone 8mg/2mg SL Film/Tab (Suboxone®) | 3 units/day | | |
| | Buprenorphine/Naloxone 12mg/3mg SL Film (Suboxone®) | 2 units/day | | |
| | Buprenorphine/Naloxone SL Tablet 0.7mg/0.18mg (Zubsolv®) | 1 unit/day | | |
| | Buprenorphine/Naloxone SL Tablet 1.4mg/0.36mg (Zubsolv®) | 1 unit/day | | |
| | Buprenorphine/Naloxone SL Tablet 2.9mg/0.71mg (Zubsolv®) | 1 unit/day | | |
| | Buprenorphine/Naloxone SL Tablet 5.7mg/1.4mg (Zubsolv®) | 3 units/day | | |
| | Buprenorphine/Naloxone SL Tablet 8.6mg/2.1mg (Zubsolv®) | 2 units/day | | |
| | Buprenorphine/Naloxone SL Tablet 11.4mg/2.9mg (Zubsolv®) | 1 unit/day | | |
| | Naltrexone Extended-Release Injectable Suspension (Vivitrol®) | 1 unit/28 days | | |
| | Naloxone Nasal Spray (Narcan®) | 4 units/30 days | | |
| | Naloxone Nasal Spray (Kloxxado TM) | 4 units/30 days | | |
| | Naloxone Injectable Solution/Cartridge 0.4mg/ml | 4 units/30 days | | |
| | Naloxone Injectable Solution Syringe 1mg/ml | 4 units/30 days | | |
| | Naloxone Injectable Solution (5ml, 10ml, 20ml) 1mg/ml | 1 unit/30 days | | |
| | Naloxone Injectable Solution (10ml) 0.4mg/ml | 1 unit/30 days | | |
| | Naloxone Injectable Solution (Zimhi TM) | 4 syringes (2ml)/30 days | | |

TD – These agents are monitored at the pharmacy POS for duplication of therapy with each other.

- 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.
- Incoming prescriptions for any naltrexone agent will deny when the recipient has an active prescription for any other naltrexone agent.

X Prescribers of buprenorphine must meet enrollment and certification requirements.

| POS Edits | | | | |
|---|---------------------|--|--|--|
| Revision / Date | Implementation Date | | | |
| Created POS Document | February 2020 | | | |
| Updated age for BH in POS Abbreviations chart / November 2020 | January 2021 | | | |
| Added POS edits for lofexidine and naltrexone / January 2021 | April 2021 | | | |
| Modified quantity limit for Sublocade® / May 2022 | June 2022 | | | |
| Modified wording for concurrent use with buprenorphine-containing products, Clarified DD for naltrexone / February 2022 | July 2022 | | | |
| Added Kloxxado™ and Zimhi™ and policy clarifications / April 2022 | October 2022 | | | |
| Modified quantity limit for naloxone agents / Sept 2022 | January 2023 | | | |
| Removed 'X' DEA number wording / January 2023 | <u>April 2023</u> | | | |