

## Notice from the Executive Officer: Promoting Compliance with the Existing Limited Use Criteria for Fentanyl Transdermal Patch

### Frequently Asked Questions

#### 1. What is the new Health Network System feature for fentanyl transdermal patches?

The Health Network System (HNS) will now assist pharmacists to ensure that Ontario Drug Benefit (ODB) eligible recipients meet the applicable clinical criteria for fentanyl transdermal patches at the time of dispensing, promoting the appropriate prescribing and dispensing of these products.

Fentanyl transdermal patches are listed under the ODB program as Limited Use (LU) Benefits. This network rule utilizes the dispensing histories in the HNS and the Narcotics Monitoring System (NMS) to determine if a patient received a long-acting opioid or a fentanyl transdermal patch in the previous 180-day period.

#### 2. Which fentanyl transdermal patch strengths are subject to the new Health Network System Rule?

The new HNS rule will only be applicable to listed Formulary fentanyl transdermal patches, 25 mcg/hour and 50 mcg/hour strengths.

Fentanyl transdermal patches funded under the Exceptional Access Program or Palliative Care Facilitated Access will NOT be subject to the rule.

#### 3. What is the Reason for Use/Limited Use code for Fentanyl Transdermal Patch?

The current LU code 201 will be deactivated and a new LU code will be assigned.

Effective with the September formulary update, the new Reason for Use (RFU)/LU code for Formulary fentanyl transdermal patches will be as follows:

- LU Code 511: For the treatment of chronic pain in patients who cannot tolerate, or have failed treatment with a long-acting opioid. Intolerance or failed treatment with a long acting opioid will be subject to verification at the time of dispensing. LU Authorization Period: 1 year.

4. What happens if a patient presents a prescription for fentanyl transdermal patches or requests a part-fill from an existing prescription for fentanyl transdermal patches with the old Limited Use code (LU Code 201)?

The dispensing pharmacist should notify the prescriber and the patient that the RFU/LU code and criteria for fentanyl transdermal patches have changed.

If the prescription cannot be clarified to the new LU code (LU code 511), a temporary transition code RFU/LU 279 may be submitted to allow for continuity of care and for the claim to be processed in HNS.

The transition code will be activated for formulary listed fentanyl transdermal patches to transition patients to the new LU code and criteria for a period of three months after the change. It is expected that after three months all patients with a prescription for a formulary listed fentanyl transdermal patch have the correct LU Code and meet the new clinical criteria. The transition code for formulary listed fentanyl transdermal patches will be deactivated with the December formulary update.

5. When will the changes take effect?

The new HNS fentanyl feature will be implemented October 1, 2017.

6. Who will be affected by the new Health Network System fentanyl feature?

ODB eligible recipients that have a prescription and are seeking coverage for a Formulary listed fentanyl transdermal patch with the RFU/LU code 511 will be affected.

The LU criteria is only applicable to ODB eligible recipients for the purpose of drug coverage and reimbursement. Patients who have a prescription for non-formulary listed fentanyl transdermal patch and/or private pay patients (i.e. those who are paying by cash or through private insurance) will not be affected.

Please note that all dispensers/pharmacies will still be required to submit prescription information to NMS for monitored drugs dispensed in Ontario pursuant to section 8 of the *Narcotics Safety and Awareness Act, 2010*.

#### 7. What happens if the Health Network System (HNS) rejects an Ontario Drug Benefit (ODB) claim for a fentanyl transdermal patch?

If no prior dispensing records are found in the HNS or the NMS, then the current claim for fentanyl transdermal patch will be rejected with response code QM (No Record of Required Prior Therapy). The absence of a dispensing record in HNS or NMS means that the patient may not satisfy the reimbursement criteria for fentanyl patches as they may not have an intolerance, or have failed treatment with a long-acting opioid.

An override code MZ (Required Prior Therapy Documented) can be used when a claim is rejected to allow pharmacists to use their professional judgement to submit the claim as appropriate by confirming the patient meets the RFU/LU code criteria. Documentation may be requested for post-payment verification.

Examples on the appropriate use of the override code MZ – Required Prior Therapy Documented include:

- A claim in HNS was not submitted to ODB because the recipient was not an ODB beneficiary in the preceding 180 day period;
- The long acting opioid was not a product in the HNS or NMS database;
- Confirmed intolerance or failed treatment to a long acting opioid.

## 8. Why implement this new Health Network System (HNS) feature for fentanyl transdermal patches?

As part of the Ministry's overall Strategy to Prevent Opioid Addiction and Overdose, the Ontario Public Drug Programs is committed to supporting the appropriate prescribing and dispensing of opioids and addressing the issue of prescription opioid misuse and abuse.

Fentanyl transdermal patches are only eligible for reimbursement under the ODB Program when prescribed in accordance with the clinical criteria associated with RFU code 511.

Analysis of ODB claims for fentanyl transdermal patches has demonstrated that up to 60% of claims did not meet the LU criterion of requiring prior use of a long-acting opioid. Approximately 16% of ODB recipients on fentanyl patches had no prior opioid use at all. According to the product monograph, fentanyl transdermal patches are indicated only for use in patients who are already receiving opioid therapy at a total daily dose of at least 60 mg/day morphine equivalents. Therefore the Committee to Evaluate Drugs (CED) recommended that restrictions be put in place to prevent the use of fentanyl patches in opioid-naïve patients. The ministry committed to explore the use of HNS rules to address inappropriate claims from being submitted for payment under the ODB program.

Effective October 1, 2017, the changes will be implemented to promote the safe and proper use of fentanyl transdermal patches by promoting compliance with the LU criteria.

## 9. What is the Narcotic Monitoring System (NMS)?

The Narcotics Monitoring System ("NMS") was activated on April 16, 2012 to collect and record information respecting all prescription narcotics and other controlled substances ("monitored drugs") that are dispensed in Ontario.

The NMS serves as a central database to enable reviews of prescribing and dispensing activities related to monitored drugs within the community health care sector. The NMS collects dispensing data from pharmacies in relation to all monitored drugs irrespective of whether the prescription is paid for under a publicly funded drug program, through private insurance, or by cash.

**Additional information:**

**For pharmacies:**

Please call ODB Pharmacy Help Desk at: 1-800-668-6641

**For all other health care providers and the public:**

Please call ServiceOntario, Infoline at 1-866-532-3161 TTY 1-800-387-5559. In Toronto, TTY 416-327-4282

For technical issues relating to the submission of data to the NMS, please contact your pharmacy software vendor or contact the ODB Help desk at 1-800-668-6641.