



Drug Name: Short Acting Opioid Naïve Policy

Effective Date: 7/2018

Review Date: 7/2020, 6/2021, 5/2022, 6/2023, 4/2024

Drug Name:	Short Acting Opioid Naïve Policy
Required Medical Information:	<ul style="list-style-type: none">• Confirmed diagnosis code relates to at least one of the following: Pain associated with a current cancer diagnosis, pain associated with sickle cell disease, a patient with a pain diagnosis in palliative or nursing home care.• Confirmed patient not opioid-naïve after consultation with the State of Rhode Island Prescription Drug Monitoring Program and/or prescriber.
Coverage duration:	7-day authorization duration and the logic should take over after the initial fill