

THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:**COUNTIES:**

- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

LINES OF BUSINESS:

- Molina Medi-Cal Managed Care
- Molina Medicare Options Plus
- Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
- Molina Marketplace (Covered CA)

PROVIDER TYPES: **Medical Group/ IPA/MSO****Primary Care**

- IPA/MSO
- Directs

Specialists

- Directs
- IPA

 Hospitals**Ancillary**

- CBAS
- SNF/LTC
- DME
- Home Health
- Other

FOR QUESTIONS CALL PROVIDER SERVICES:
(855) 322-4075, Extension:

Los Angeles/Orange Counties

X111113 X123071
X127657

Riverside/San Bernardino Counties

X127684 X120618

Sacramento County

X121360

San Diego County

X121805 X121401
X127709 X121413
X123006 X121599

Imperial County

X125682 X125666

Medi-Cal Drug Utilization Review (DUR) Educational Article – Risks with Sudden Discontinuation of Opioids

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding Risks with Sudden Discontinuation of Opioids.

Opioids are a class of prescription medicines that are used to manage pain when other treatments and medicines cannot be taken or are not able to provide enough pain relief. Opioids have serious risks, including abuse, addiction, overdose, and death. Examples of common opioids include codeine, fentanyl, hydrocodone, hydromorphone, morphine, oxycodone, and oxymorphone. On April 9, 2019, the U.S. Food and Drug Administration (FDA) issued a warning that it has received reports of serious harm in patients who are physically dependent on opioid pain medicines when these medicines are suddenly discontinued or the dose is rapidly decreased. Examples of serious harm include serious withdrawal symptoms, uncontrolled pain, psychological distress, and suicide. The FDA is requiring expanded guidance within the prescribing information of opioids that are intended for use in the outpatient setting on how to safely decrease the dose in patients who are physically dependent on opioids. While not every patient taking opioids requires tapering, health care professionals should not abruptly discontinue opioids in a patient who is physically dependent on opioids.

In order to minimize risk to patients when tapering the dose of opioids, health care professionals should consider the following actions:

- Work with each patient to agree on an appropriate tapering schedule and follow-up plan so both patient and provider goals and expectations are clear and realistic. Tapering should be voluntary.
- Consider a variety of factors in the development of an opioid tapering schedule, including the dose of the drug, the duration of treatment, the type of pain being treated, and the physical and psychological attributes of the patient. No standard opioid tapering schedule exists that is suitable for all patients.

- Counsel every patient to contact a health care professional if they experience increased pain, withdrawal symptoms, changes in mood, or thoughts of suicide.
- When managing patients taking opioid analgesics, particularly those who have been treated for a long duration and/or with high doses for chronic pain, ensure that a multimodal approach to pain management, including mental health support (if needed), is in place prior to tapering the dose of opioids.
- Reassess the patient regularly to manage pain and withdrawal symptoms that emerge, as frequent follow up with patients is important.
- When opioid analgesics are being discontinued due to a suspected substance use disorder, evaluate and treat the patient, or refer them for evaluation and treatment of the substance use disorder.

Treatment should include evidence-based approaches such as medication-assisted treatment. Complex patients with comorbid pain and substance use disorders may benefit from referral to a specialist. To read the full safety announcement, which includes a summary of withdrawal symptoms, refer to the FDA Drug Safety Communication:

FDA identifies harm reported from sudden discontinuation of opioid pain medicines and requires label changes to guide prescribers on gradual, individualized tapering” article found on the Drug Safety and Availability page of the FDA website. For more information about when and how to taper opioids for chronic pain, providers may refer to the resource, “Pocket Guide: Tapering Opioids for Chronic Pain,” which can be found on the Centers for Disease Control and Prevention (CDC) website at:

https://www.cdc.gov/drugoverdose/pdf/Clinical_Pocket_Guide_Tapering-a.pdf.

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (855) 322-4075. Please refer to the extensions on page one.