

Clinical Policy Title:	abuse-deterrent opioid formulations
Policy Number:	RxA.437
Drug(s) Applied:	Oxaydo®, Roxybond™
Original Policy Date:	03/06/2020
Last Review Date:	09/14/2020
Line of Business Policy Applies to:	All lines of business

Background

The following are abuse-deterrent formulations (ADFs) of opioid agonist products requiring prior authorization: immediate-release oxycodone (Oxaydo®, Roxybond™).

Oxaydo® and Roxybond™ are indicated for the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate.

Limitation(s) of use:

Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, and because of the greater risks of overdose and death with extended-release opioid formulations, reserve Oxaydo and Roxybond for use in patients for whom alternative treatment options (e.g., non-opioid analgesics or non-opioid combination products):

- have not been tolerated, or are not expected to be tolerated, or
- have not provided adequate analgesia or are not expected to provide adequate analgesia.

Dosing Information

Drug Name	Indication	Dosing Regimen	Maximum Dose
Oxaydo®, Roxybond™ (immediate-release oxycodone, ADF)	Pain management	5-15 mg PO every 4-6 hours as needed for pain; titrate based on pain severity and patient response	Not applicable

Dosage Forms

- Oxycodone immediate-release tablets (Oxaydo): Immediate-release tablets: 5 mg, 7.5 mg
- Oxycodone immediate-release tablets (Roxybond): Immediate-release tablets: 5 mg, 15 mg, 30 mg

Clinical Policy

Provider must submit documentation (such as office chart notes, lab results or other clinical information) supporting that member has met all approval criteria.

I. Initial Approval Criteria

A. Pain Management (must meet all):

This clinical policy has been developed to authorize, modify, or determine coverage for individuals with similar conditions. Specific care and treatment may vary depending on individual need and benefits covered by the plan. This policy is not intended to dictate to providers how to practice medicine, nor does it constitute a contract or guarantee regarding payment or results. This document may contain prescription brand name drugs that are trademarks of pharmaceutical manufacturers that are not affiliated with RxAdvance.

1. Diagnosis of chronic pain;
2. Age ≥ 18 years;
3. Medical justification supports inability to use a generic non-abuse-deterrent formulation of the same active ingredient as the requested opioid;
4. A treatment plan is required, including all of the following:
 - a. Diagnosis or conditions that are contributing to the pain;
 - b. Pain intensity (scales or ratings);
 - c. Functional status (physical and psychosocial);
 - d. Patient’s goal of therapy (level of pain acceptable and/or functional status);
 - e. Current analgesic (opioid and adjuvant) regimen;
 - f. Current non-pharmacological treatment;
 - g. Opioid-related side effects;
 - h. Indications of medical misuse;
 - i. Action plan if analgesic failure occurs.

Approval Duration

Commercial: 3 months

Medicaid: 3 months

II. Continued Therapy Approval

A. Pain Management (must meet all):

1. Currently receiving medication that has been authorized by RxAdvance or member has previously met initial approval criteria listed in this policy;
2. Member is responding positively to therapy.

Approval Duration

Commercial: 3 months

Medicaid: 3 months

III. Appendices

APPENDIX A: Abbreviation/Acronym Key

ADF: abuse-deterrent formulation

FDA: Food and Drug Administration

APPENDIX B: Therapeutic Alternatives

Drug Name	Dosing Regimen	Dose Limit/ Maximum Dose
oxycodone immediate-release capsules, tablets, or oral solution	Opioid naïve patients: 5-15 mg PO every 4-6 hours as needed for pain; titrate based on pain severity and patient response. For chronic pain: Oral tablets may be administered around-the-clock rather than as needed.	Varies

Therapeutic alternatives are listed as Brand name® (generic) when the drug is available by brand name only and generic (Brand name®) when the drug is available by both brand and generic.

APPENDIX C: Contraindications/Boxed Warnings

- Contraindication(s):
 - Significant respiratory depression;
 - Acute or severe bronchial asthma in an unmonitored setting or in absence of resuscitative equipment;
 - Known or suspected gastrointestinal obstruction, including paralytic ileus;
 - Hypersensitivity to the opioid active ingredient, salts, or any component of the product.

- Boxed Warning(s):
 - **Potential for addiction, abuse, and misuse:**
OXAYDO exposes users to risks of addiction, abuse, and misuse, which can lead to overdose and death. Assess patient’s risk before prescribing and monitor regularly for these behaviors and conditions.
 - **Risk evaluation and mitigation strategy (REMS):**
To ensure that the benefits of opioid analgesics outweigh the risks of addiction, abuse, and misuse, the Food and Drug Administration (FDA) has required a Risk Evaluation and Mitigation Strategy (REMS) for these products.
 - **Life-threatening respiratory depression:**
Serious, life-threatening, or fatal respiratory depression may occur. Monitor closely, especially upon initiation or following a dose increase.
 - **Accidental ingestion:**
Accidental ingestion of OXAYDO, especially by children, can result in a fatal overdose of oxycodone.
 - **Neonatal opioid withdrawal syndrome:**
Prolonged use of OXAYDO during pregnancy can result in neonatal opioid withdrawal syndrome, which may be life-threatening if not recognized and treated. If prolonged opioid use is required in a pregnant woman, advise the patient of the risk of neonatal opioid withdrawal syndrome and ensure that appropriate treatment will be available.
 - **Cytochrome P450 3A4 interactions:**
Concomitant use with CYP3A4 inhibitors (or discontinuation of CYP3A4 inducers) can result in a fatal overdose of oxycodone.
 - **Risks from concomitant use with benzodiazepines or other CNS depressants:**
Concomitant use of opioids with benzodiazepines or other central nervous system (CNS) depressants, including alcohol, may result in profound sedation, respiratory depression, coma, and death. Reserve concomitant prescribing for use in patients for whom alternative treatment options are inadequate; limit dosages and durations to the minimum required; and follow patients for signs and symptoms of respiratory depression and sedation.

APPENDIX D: General Information

- Although Oxaydo and Roxybond have language in their labeling describing reduced abuse potential via specific routes (intranasal for Oxaydo and intranasal/injection for Roxybond), the Prescribing Information (PI) documents for both still contain black box warnings and Limitations of Use re: abuse potential. The Oxaydo PI says “The clinical significance of the difference in drug liking and difference in response to taking the drug again reported in this study has not yet been established. There is no evidence that Oxaydo has a reduced abuse liability compared to immediate-release oxycodone.” The Roxybond PI says “However, abuse by the intranasal, oral, and intravenous route is still possible”.

- Per the 2016 CDC treatment guidelines for opioid prescribing, “As indicated in FDA guidance for industry on evaluation and labeling of abuse-deterrent opioids, although abuse-deterrent technologies are expected to

make manipulation of opioids more difficult or less rewarding, they do not prevent opioid abuse through oral intake, the most common route of opioid abuse, and can still be abused by non-oral routes. The “abuse-deterrent” label does not indicate that there is no risk for abuse. No studies were found in the clinical evidence review assessing the effectiveness of abuse-deterrent technologies as a risk mitigation strategy for deterring or preventing abuse. In addition, abuse-deterrent technologies do not prevent unintentional overdose through oral intake. Experts agreed that recommendations could not be offered at this time related to use of abuse-deterrent formulations.”

References

1. Oxaydo Prescribing Information. Wayne, PA: Egalet US, Inc.; June 2020. Available at www.oxaydo.com. Accessed on August 3, 2020.
2. Roxybond Prescribing Information. Valley Cottage, NY: Inspirion Delivery Sciences, LLC; April 2017. Available at https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/209777lbl.pdf. Accessed on August 3, 2020.
3. Dowell D, Haegerich TM, Chou R. CDC guideline for prescribing opioids for chronic pain - United States, 2016. JAMA. 2016 Apr 19; 315(15):1624-45.

Review/Revision History	Review/Revised Date	P&T Approval Date
Policy established.	01/2020	03/06/2020
Policy was reviewed: 1. Clinical Policy Title was updated. 2. Drug(s) Applied was updated. 3. Line of Business Policy Applies to was update to all lines of business. 4. Continued Therapy criteria II.A.1 was rephrased to "Currently receiving medication that has been authorized by RxAdvance..." 5. Initial Approval criteria: Commercial and Medicaid approval duration were updated to 3 months. 6. Continued Approval criteria: Commercial and Medicaid approval duration were updated to 3 months. 7. APPENDIX C: was updated to include the details information for Contraindications and Boxed Warnings. 8. References were updated. 9. Updated Background: “Oxaydo® and Roxybond™ are indicated for the management of pain sever enough to require an opioid analgesic and for which alternative treatments are inadequate.”	08/03/2020	09/14/2020