



An Anthem Company

## **Empire BlueCross BlueShield HealthPlus (Empire) Hot Tip: Chronic Pain**

Your Empire patients on nonpreferred products will experience a pharmacy claim rejection. To avoid additional steps or delays at the pharmacy, please consider prescribing preferred products whenever possible.

<b>Therapeutic class</b>	<b>Nonpreferred products</b>	<b>Preferred products</b>
Chronic pain <sup>1</sup>	<p>OxyContin <i>Generic: Oxycodone ER<sup>2</sup></i></p> <p>Opana <i>Generic: Oxymorphone ER<sup>2</sup></i></p> <p>Exalgo <i>Generic: Hydromorphone ER<sup>2</sup></i></p> <p>Avinza and Kadian <i>Generic: Morphine ER<sup>2</sup></i></p>	<p>Morphine sulfate tablets (15mg, 20mg, 60mg and 100mg) <i>Brand name: MS Contin</i></p> <p>Fentanyl patch <i>Generic for Duragesic</i></p>
<p>1 Prior authorization for medical necessity is required for all products. Call <b>1-800-450-8753</b> or fax <b>1-844-490-4877</b>.</p> <p>2 Neither brand nor generic formulations are covered.</p>		

If you have questions regarding this *Hot Tip*, please call Provider Services at **1-800-450-8753**.

*Preferred Drug List:*

<https://mediproviders.empireblue.com/ny/pages/formularies.aspx>

**[www.empireblue.com/nymedicaiddoc](http://www.empireblue.com/nymedicaiddoc)**

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