

Effective Date: 9/2018
Revised: 12/2019
Reviewed: 9/2018, 12/2019, 4/2020, 1/2021, 1/2022
Pharmacy Scope: Medicaid
Medical Scope: Medicaid, Commercial, Medicare-Medicaid Plan (MMP)

SUBLOCADE (buprenorphine extended-release) INJECTION

POLICY

I. CRITERIA FOR INITIAL APPROVAL

Moderate to severe opioid use disorder

Authorization of 6 months may be granted for treatment of moderate to severe opioid use disorder in members 18 years of age or older when all of the following criteria are met:

- A. Member has initiated therapy with transmucosal buprenorphine containing product (delivering the equivalent of 8-24mg of buprenorphine daily) over a minimum of a 7 day period and is stable with clinically controlled cravings and withdrawal symptoms.
- B. Member is part of a complete treatment program that includes counseling and psychosocial support.
- C. Member is not receiving other opioids during therapy with Sublocade.
- D. Rationale is provided to support the member’s inability to continue to use oral formulations of buprenorphine.
- E. The dose of Sublocade does not exceed 300mg a month.

II. CONTINUATION OF THERAPY

Authorization of 12 months may be granted for treatment of moderate to severe opioid use disorder in patients when all of the following criteria are met:

- A. Member continues to meet the initial criteria in section I.
- B. Member is tolerating treatment.
- C. Member has documentation of a decrease in signs of opioid dependence relapse.

Pharmacy Dosing

Indication	Dose
Opiate use disorder	300 mg monthly for the first two months followed by a maintenance dose of 100 mg monthly.

Effective Date: 9/2018
Revised: 12/2019
Reviewed: 9/2018, 12/2019, 4/2020, 1/2021, 1/2022
Pharmacy Scope: Medicaid
Medical Scope: Medicaid, Commercial, Medicare-Medicaid Plan (MMP)

Medical Dosing

Indication	Dose	Maximum dose (1 billable unit = 100 mg)
Opiate use disorder	300 mg monthly for the first two months followed by a maintenance dose of 100 mg monthly.	3 units for the first two months, followed by a maintenance dose of 1 unit monthly

The following HCPCS/CPT codes are:

HCPCS/CPT Code	Description
Q9991	Injection, buprenorphine extended-release (Sublocade), less than or equal to 100 mg
Q9992	Injection, buprenorphine extended-release (Sublocade), greater than 100 mg