



**Drug Name:** Short Acting Opioid Naïve Edit

**Effective Date:** 7/2018

**Review Date:** 7/2020, 6/2021, 05/2022, 06/2023

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