

Guide for Prescribing Opioids on Inpatient Discharge

For primary teams discharging patients, please contact palliative care consult team if further guidance needed:

1. Identify an appropriate outpatient provider or clinic who will continue managing opioid regimen.
 - a. For patients established with supportive oncology practices or palliative care fellows clinic – email outpatient team regarding anticipated discharge and updates to opioid regimen.
 - b. For non-established oncology patients – email primary oncologist and recommend referral to respective supportive oncology clinic.
 - c. For non-established, non-oncology patients with serious illness – consider referral to palliative care fellows' clinic.
 - d. For other patients (e.g., complex concurrent chronic pain or substance use disorder), discuss with an identified PCP or chronic pain provider.
 - e. For questions regarding concurrent opioid use disorder email #GPAP for guidance from the Geri-Pal, Addiction, and Pain Collaborative regarding appropriate follow up (secure to include patient information). If REACH is appropriate (primary care clinic with a focus on substance use disorder treatment and buprenorphine prescribing), email #REACH or call 646-951-1693 to refer.

2. Once a discharge opioid regimen is finalized, send opioid prescriptions in advance of discharge date
 - a. Ensure at least a 2-week prescription is sent or until scheduled outpatient follow up.
 - b. Call pharmacy prior to sending prescriptions to check if needed medication, formulation, and quantity are available at that time.
 - c. Limited availability is not uncommon for both short-acting (especially liquid formulations) as well as long-acting opioids. Long-acting opioids include morphine ER (MSContin tablets; Kadian or Avinza capsules), hydromorphone ER (Exalgo tablets), oxycodone ER (OxyContin tablets; Xtampza capsules), fentanyl patches, and buprenorphine formulations approved for pain (Belbuca buccal films, Butrans patch).
 - d. Allow time for troubleshooting (e.g., Prior authorizations, identifying alternative pharmacies with availability)

3. Identifying a pharmacy:
 - a. Start with patient's preferred local pharmacies
 - b. If needed medications are not available there, try below pharmacies
 - c. For pharmacies that deliver, can ask if they are able to deliver to the hospital to patient at that time

Duane Reade

May not accept certain Medicaid plans
1490 Madison Ave (and 102nd St.)
212-410-2508

Preferred Pharmacy

May deliver to parts of Manhattan
3 E. 115th St. (and 5th Ave)
212-722-0000

Drug Stop Pharmacy

May deliver in Manhattan
2062 2nd Ave (and 106th St.)
212-410-0509

Arrow Pharmacy

Has most opioids including buprenorphine formulations
883 9th Ave (and 57th St.)
212-245-8469

Chelsea Royal Care Pharmacy

May deliver to patients
154 9th Ave (and 20th St.)
212-255-8000

Medly Pharmacy

Delivers in Brooklyn
31 Debevoise St., Brooklyn
718-782-7539

Enexia Specialty Pharmacy

Has most opioids, can compound medications, and delivers in Manhattan and parts of Bronx
200 E. 125th St. (and 3rd Ave)
212-955-9400

Enexia Brooklyn/Nate's Pharmacy

Delivers mainly for hospice patients, may deliver to parts of Brooklyn
376 Van Brunt St., Brooklyn
718-797-0200

Avenue Chemists Pharmacy

May deliver in parts of Queens
45-01 30th Ave., Astoria, Queens
718-545-1010

Capsule Pharmacy

Delivers throughout the city. Does not accept straight Medicaid but will accept managed Medicaid and all other insurances; requires patient's photo ID for initial prescription. Often needs prescription sent before staff will discuss medication availability.
Capsule.com
212-675-3900

4. Writing the prescriptions
 - a. Check iSTOP prior to writing opioid prescriptions
 - b. Ensure an adequate quantity of tablets/capsules/patches/liquid solution is prescribed to allow patient to have enough medications until an appropriate outpatient provider can refill. This includes both long-acting and short-acting opioids
 - c. Using an appropriate associated diagnosis (eg. ICD code G89.3 for cancer-associated pain) should allow for more than a 3–5-day prescription to be covered
 - d. Include in "Add Note to Pharmacy" section of the prescription a prescriber contact phone number for the pharmacy to call prescriber in case prior authorization is needed. Can also write in ICD diagnosis code here.
 - e. For delivery to patients, in "Add Note to Pharmacy" section put patient's contact number for pharmacy to call patient to arrange delivery. See screenshot below.

Reference Links: 1. Lexi-Comp Peds 2. Lexi-Comp

Class: E-Prescriber **E-Prescribing** Normal No Print Historical Med

Priority:

Dx Assoc.:

	Assc	Encounter Diagnoses	Codes	Qualifier	Comment
1	<input checked="" type="checkbox"/>	Cancer associated pain	G89.3		
2	<input type="checkbox"/>				

Phase of Care:

Note to Pharmacy:

Please call "contact#" if there are any questions about the prescription. Call patient at "contact#" to arrange delivery.

5. Prior Authorizations and Insurance issues

- a. Many Medicaid plans, including managed Medicaid, may limit the first-time prescription of a medication to a 7-day prescription. To prescribe more than a 7-day supply, it may require writing two prescriptions, with the second prescription dated to be filled a week after the first one.
- b. Prior authorizations are often needed by insurances (which pharmacies will know once they process the prescription) for most new prescriptions of long-acting opioids, higher quantities, dose increases, and some insurances may even require PA for new prescriptions of common short-acting opioids. Many insurances may require trial of morphine ER, fentanyl patches, or Xtampza (abuse-deterrent) before approving Oxycontin.
- c. Submitting a prior authorization:
 - i. Check EMR and scanned Media for prescription drug coverage information. Will need the payer (eg. CVS Caremark, Express Scripts, Optum RX) and their phone number, as well as patient's prescription coverage ID number (BIN and PCN numbers helpful but not always necessary).
 - ii. Submitting an electronic PA via covermymeds.com will likely be easier than calling the insurance.
 1. Recommend setting up an account and verifying as a prescriber in advance (will need prescriber NPI number; helpful to have a fax number available).
 2. To submit a new request, search by medication, then enter patient demographic information and insurance information, and the needed forms will come up.
 3. See screen shots below. Live chat function available for assistance and can request status of PA anytime.
 - iii. If Mount Sinai Tax ID is requested whenever checking on status of a PA, use 611-6617881.

New Request

Request a prior authorization, enrollment, benefits verification, or other patient services.

Enter Key

To access a current request for your patient, enter the Key provided on the notification that you received.

[Verify Prescribers](#)

Current

0 requests

Sent to Plan

0 requests

Search

Welcome to CoverMyMeds!

Start a new prior authorization request or enter a key by clicking the 'New Request' or 'Enter Key' button on the left side of the screen.

If you have any questions, you can chat with us in the bottom-right of your screen.

Find Your Medication

Name of Medication or National Drug Code (NDC)

Exalgo 12MG er tablets



Patient Details ?

Entering the patient's demographic information will help narrow down the most accurate form.

We'll copy this info into the PA to save you time.

▼ Patient address book

Clear

First Name

Last Name

PATIENT GENDER

Male Female Unspecified

Date of Birth

Patient Zip Code

Patient State
Alabama




SKIP

CONTINUE

Patient Insurance Search

By providing the patient's drug insurance information we are able to more accurately provide you the correct form needed to request a prior authorization. Alternatively, you can search by a patient's Insurance Plan or PBM Name, but searching this way may not be as accurate.

 [Searching with Medicare Part D?](#)

By Drug Insurance ID card



Patient Insurance State	Alabama	▼
RxBIN		
RxPCN Number		
RxGroup		

Find this on a card specific to drug coverage, or on your patient's medical card. Search with all 3 terms, or by the information available. Contact the pharmacy to obtain these if you don't have access to them.

INSURANCE CARD		
Member Name	Group Number	EP409-01
JOHN DOE		
Member Identification Number	RX FORMULARY - GENRX	
YFW123A567800	SPECIALTY - PRIME SPECIALTY	
RxBIN Number	610455	Office Visit Co-Pay \$20
RxPCN Number	PGIGN	Retail Health Clinic Co-Pay \$10
RxGroup	EP409-01	

Note: The Part D Member ID may also differ from the UID on the Medicare Health Insurance Card.

OR

By Insurance Plan or PBM name



Patient Insurance State		▼
Plan or PBM Name		

Forms

Form results will display here