## Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE OxyCODONE ER (OxyContin)

## Notes:

- ^ Adequate trial is defined as a minimum of 2-week treatment duration with titration as needed.
- \* Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment and do not require med discontinuation.

Initiation (new start) criteria and criteria for new members entering Kaiser

Permanente already taking the medication who have not been reviewed previously:

Non-formulary oxyCODONE ER tablet (OxyContin) will be covered on the prescription drug benefit when the following criteria are met:

- Patient has failed an adequate trial<sup>^</sup> of or has an allergy or intolerance<sup>\*</sup> or contraindication to oxyCODONE immediate-release, morphine immediate-release, HYDROcodone/acetaminophen, HYDROmorphone immediate-release, morphine sustained-release and fentaNYL transdermal
  - -OR-
- Prescriber is a Hospice/Palliative Care clinician
- Patient has active cancer-related pain

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Revised: 10/10/24 Effective: 12/19/24



