

Actiq®
(*fentanyl citrate transmucosal*)
Fentora®
(*fentanyl buccal tablet*)
Onsolis®

COVERAGE POLICY:

Actiq®/Fentora®/Onsolis® is covered for members who meet the following criteria:

- Patient has been diagnosed with cancer associated with breakthrough cancer pain or a terminal disease with breakthrough pain.
- **AND** the pain management of this patient will be managed solely by the provider's office.
- **AND** patient has tried and failed at least a 2-week therapy of the highest tolerated dose of at least two opioids due to unmanageable pain.
- **AND** patient is currently receiving at least 60 mg morphine per day, and/or 50 mcg of transdermal fentanyl per hour, and/or 30 mg of oxycodone daily, and/or 8 mg of hydromorphone daily and/or 300 mg meperidine per day and will continue maintenance therapy during Actiq®/Fentora®/Onsolis® administration.
- **AND** the patient is not receiving duplicate therapy that includes other strengths of Actiq® or fentanyl citrate transmucosal lozenges or Fentora® oral buccal tablets.

AND if the patient is requesting brand Actiq® Fentora® OR Onsolis® the patient has tried and failed at least an 8-week therapy of the highest tolerated dose of fentanyl citrate lozenges.