



Texas Department of Insurance

Division of Workers' Compensation

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Memorandum

To: Texas Workers' Compensation System Participants

From: Matthew Zurek, Executive Deputy Commissioner, Health Care Management and System Monitoring

Date: September 23, 2014

Subject: Federal Reclassification of Hydrocodone Combination Drugs

On August 22, 2014, the US Drug Enforcement Administration (DEA) published a final rule in the *Federal Register* (http://www.deadiversion.usdoj.gov/fed_regs/rules/2014/fr0822.htm) reclassifying hydrocodone combination drugs from Schedule III to Schedule II in the Schedule of Controlled Substances. This federal rule takes effect on October 6, 2014. This reclassification change, regardless of payer type, impacts all physicians and pharmacies throughout the nation. This federal change applies to drugs prescribed and dispensed in the Texas workers' compensation system.

This change has no direct impact on the application of DWC's pharmacy closed formulary; however, hydrocodone combinations are the most frequently prescribed drugs in the Texas workers' compensation system and are impacted by this change. Appendix A of the Official Disability Guidelines (ODG), the Division's adopted treatment guidelines, will always describe the most current formulary status for these hydrocodone and hydrocodone combination drugs.

Although the pharmacy closed formulary is not impacted by this change in classification, prescriptions for Schedule II drugs have specific requirements. Changes to the physician prescription process for hydrocodone combinations include:

- Prohibiting physicians from delegating to advance practice nurses and physician assistant's authority to prescribe these drugs *outside* of a hospital or hospice setting.
- Preventing physicians from calling in prescriptions for these medications to pharmacies (except in emergencies, in which case oral transmission must be followed up with written prescription within seven days).
- Required use of official prescription pads from Texas Department of Public Safety (DPS) by physicians for written prescriptions; or if e-prescribing, physicians must use a certified Electronic Prescribing of Controlled Substances (EPCS) vendor and ensure the pharmacy in receiving of the EPCS is able to receive the prescription.
- Prohibiting refills of prescriptions for these drugs without a patient visit or consultation.
- Physicians may issue prescriptions for Schedule II drugs for a maximum 90-day period. The 90 days constitutes three 30 day prescriptions to be written at one time and the refills to be filled on a "not before date" written on the prescription note by the prescriber.

- Any prescriptions that physicians issue before October 6, 2014, and are authorized for refilling, may be dispensed in accordance with Schedule III requirements if such dispensing occurs before April 8, 2015.

Injured employees and pharmacies should work with the physician to resolve any issues regarding these changes when prescribing or attempting to fill prescriptions for hydrocodone combinations

Additional information is available at the Texas Medical Association website:
<http://www.texmed.org/Template.aspx?id=31794>.

Detailed information concerning prescriptions for all scheduled drugs may be found at the DEA website:

PART 1306 — PRESCRIPTIONS

<http://www.deadiversion.usdoj.gov/21cfr/cfr/2106cfr.htm>

PART 1308 — SCHEDULES OF CONTROLLED SUBSTANCES

<http://www.deadiversion.usdoj.gov/21cfr/cfr/2108cfr.htm>

For additional information on the closed formulary, contact the DWC by calling *Comp Connection for Health Care Providers* at 1-800-372-7713 and select option 3 or send an e-mail to medben@tdi.texas.gov.